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

Mr. GRASSLEY. I further ask that there be a period for morning business for 1 hour, with the first 30 minutes under the control of Senator DASCHLE, and the next 30 minutes under the control of Senator LOTT.

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

Mr. GRASSLEY. At the hour of 10 a.m., under the provisions of rule XXII, a cloture vote will occur on the Gorton substitute to the product liability bill. Following that vote, regardless of the outcome, I ask unanimous consent that a vote occur on adoption of the IRS conference report.

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

Mr. GRASSLEY. I ask it be in order now to request the yeas and nays.

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

Mr. GRASSLEY. Mr. President, I ask for the yeas and nays.

The PRESIDING OFFICER. Is there a sufficient second?

There is a sufficient second.

The yeas and nays were ordered.

PROGRAM

Mr. GRASSLEY. For the information of all Senators, when the Senate reconvenes on Thursday, a cloture vote will occur at 10 a.m. Immediately following that vote, a second vote will occur on the adoption of the IRS conference report.

Following those two back-to-back votes, it will be the leader's intention to begin the anti-agriculture sanctions legislation for India and Pakistan, hopefully under a brief time agreement. Following that legislation, it will be the leader's intention to begin the higher education bill under the consent agreement of June 25, 1998.

Therefore, several votes will occur during Thursday's session of the Senate, with the first two votes occurring back-to-back at 10 a.m.

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 President, I ask unanimous consent that the order for the quorum call be rescinded.

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

MEASURE PLACED ON THE CALENDAR—S. 2271

Mr. GRASSLEY. Mr. President, there is a bill at the desk due for its second reading.

The PRESIDING OFFICER. The clerk will report.

The legislative clerk read as follows:

A bill (S. 2271) to simplify and expedite access to the Federal courts for injured parties whose rights and privileges, secured by the United States Constitution, have been deprived by final actions of Federal agencies, or other government officials or entities acting under color of State law, and for other purposes.

Mr. GRASSLEY. I object to further consideration at this time.

The PRESIDING OFFICER. The bill will be placed on the calendar.

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

The PRESIDING OFFICER. The clerk will call the roll.

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

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

ORDER FOR ADJOURNMENT

Mr. GORTON. Mr. President, if there is no further business to come before the Senate, I ask unanimous consent that the Senate stand in adjournment under the previous order following the remarks of the Senator from Massachusetts, the Senator from Florida, and this Senator.

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

The Senator from Massachusetts is recognized.

MANAGED CARE

Mr. KENNEDY. Mr. President, the unholy alliance between the Republican leadership in Congress and the health insurance industry is working overtime to prevent enactment of meaningful patient protections to end the abuses of HMOs and managed care health plans. The tactics of the Republican leadership yesterday made that crystal clear—and continue the obstruction that has been taking place since the beginning of this Congress.

Yesterday, the Democratic leader, Senator DASCHLE, offered our Patients' Bill of Rights as an amendment to an appropriations bill, to address the worst abuses of managed care. The Republican leadership didn't want to debate our amendment in the Senate, because they know that they cannot sustain a position that protects insurance industry profits at the expense of patients.

So what did they do? They pulled down the important appropriations bill in order to avoid a vote on the Patient's Bill of Rights. Then they filed an immediate cloture petition on the Product Liability Bill, to avoid having to debate the Patient's Bill of Rights on that legislation. And I have no doubt that they will continue to engage in any other parliamentary maneuver they can devise—in an attempt to avoid debating and voting on the Patient's Bill of Rights. They are ready to impose a gag rule on the United States Senate, if that is necessary to prevent us from ending gag rules on the Nation's doctors.

It is long past time for Congress to act on the issue of reforming managed care. Individuals and families are increasingly apprehensive about how they will be treated when they are sick. A survey last year found that an astonishing 80 percent of Americans believe that their quality of care is often compromised by their insurance plan to save money. And, too often, their belief is well-founded.

Our Patients' Bill of Rights will end abuses of HMOs and managed care plans across the country. Too often today, managed care is mis-managed care. Decisions on health care should be made by doctors and their patients, not by insurance industry accountants bent on protecting profits instead of patients.

For more than a year, the Republican leadership has been delaying action. I introduced patient protection legislation with Congressman JOHN DINGELL nearly a year and a half ago. Since that time, the President's non-partisan blue ribbon commission has recommended nearly identical protections. Under Senator DASCHLE's leadership, we have introduced the Patients' Bill of Rights legislation in both the House and Senate—and it is supported not only by Democrats but by Republicans as well.

More than 170 organizations have endorsed it. These groups represent tens of millions of patients, doctors, nurses, persons with disabilities or chronic illnesses, those in the mental health community, workers and families, consumers, small businesses, religious organizations, non-physician providers and many others.

Yet, despite this support and the obvious need for action, the Senate leadership continues to delay. The special interests that profit from the status quo have designed a campaign of misinformation to obscure the real issues and prevent action.

There is no mystery about what is going on. The Republican leadership's position is to protect the insurance industry instead of protecting patients. They know they can't do that in the light of day. So their strategy has been to work behind closed doors to kill the bill. Keep it bottled up in committee. Prevent any debate or vote by the full Senate.

Willis Gradison, the head of the Health Insurance Association of America, was asked in an interview published in the Rocky Mountain News to sum up their strategy. According to the article, Mr. Gradison replied ''There's a lot to be said for 'Just say no.''' The author of the article goes on to report that

At a strategy session . . . called by a top aide to Senator DON NICKLES, Gradison advised Republicans to avoid taking public positions that could draw fire during the election campaign. Opponents will rely on Republican leaders in both chambers to keep managed care legislation bottled up in committee.

Instead of participating in a productive debate on how to give patients the protections they need, insurance companies and their allies in the business community have heeded the call of the

Republican leadership, in the words of a leadership aide acting on behalf of Senator LOTT, to ''get off their butts and get off their wallets.'' They are contributing hundreds of thousands of dollars to GOP candidates who toe their line, while simultaneously preparing to spend millions of dollars on TV ads to defeat the Patients' Bill of Rights.

But before we swallow their phony charges of excessive increases in costs and in the number of the uninsured, let's examine their credibility on this issue.

Insurers say it is too costly to guarantee that treatment decisions are made by doctors and patients. Yet, they pay their CEOs and high-ranking executives multi-million dollar compensation packages and spend millions of dollars on luxury accommodations for corporate headquarters.

How can the insurance industry tell the American people with a straight face that this legislation will raise costs, when it is spending millions of dollars—derived from premiums paid by hard working families—on a scare campaign to intimidate patients and deny them the protections they need, deserve, and thought they had paid for?

Mr. President, we have, and I will include in the RECORD, a summary of the various protections that are included in this legislation. But before I do, I think it is interesting to know where we are with regard to the scheduling of this particular provision.

The Patient's Bill of Rights was offered last evening by the Senator from South Dakota, Senator DASCHLE, and was sent back to the desk. We have been denied an opportunity for a markup on this legislation in the Labor and Human Resources Committee. The Republican leadership has refused to schedule this legislation on the floor of the U.S. Senate, with the exception of the phony unanimous consent request. The consent request indicated that when we had the debate on this legislation, and after a vote on or in relation to this legislation, it would be in order for the majority leader to return the legislation to the calendar. That means that after we voted on the legislation, even if we voted for good legislation that protects the consumers in this country, under this consent request, the Republican leader would have been able to send it back to the calendar. The Republican leader would not send it to the House of Representatives for action. The Republican leader would not even take legislation if it was sent over from the House of Representatives and we acted upon it. The Republican leader would not send it to the President of the United States: instead, the Republican leader would put the legislation back on the calendar.

This is a phony initiative by the Republican leadership. There isn't a Member of this body who wouldn't read it and understand how phony it is. It is insulting to the millions of patients in this country who have suffered to say that if we take action to try to protect you, and we have a positive vote in the Senate of the United States, the leader of the Republican Party can put it back on the calendar and frustrate every other Member in the Senate.

This is the first time in 36 years I have ever seen a consent request like this. Last night, the Republican leaders said, ''But, oh, wasn't the Senator from Massachusetts here when there was objection to the leader's request?''

Here is the consent request. I will put it all in the RECORD, Mr. President: ''it be in order for the majority leader to return the legislation to the calendar,'' effectively killing it. To add insult to injury, Mr. President, it points out that we will not be in order to offer any other health care measures for the rest of the session.

Isn't that a beauty? We will not be able to offer any other health measures for the rest of the session. We will not be able to deal with medical records confidentiality issues; we will not be able to deal with Medicare issues. We will not be able to deal with any other health care issue for the remainder of this session.

Why? What is it about debating the health care issues which are of such fundamental importance to families in this country that we cannot get a debate on it? What is it, Mr. President? What does the Republican leadership fear about debating these issues on the floor of the U.S. Senate that are of central concern to every family in America? That is the question we ask.

And you know what our answer is? You know what our answer is, Mr. President? Our answer is that tomorrow at 10 o'clock we are going to vote on the IRS conference report. We are going to vote on cloture of the product liability bill. Are we then going to proceed to health care? No. We are instead going to have a 2-hour debate on agricultural sanctions. Then are we going to proceed to health care? No. We are instead going to the higher education reauthorization. With the higher education reauthorization, by prior agreement that was made many weeks ago, we are prohibited from offering any amendments. And then this week is finished. It is gone. Starting tomorrow, thirty-five more days are left in this session. This week is gone without any opportunity to debate this important issue.

I see members of the Republican leadership here. Maybe the Senator from Oklahoma can explain why we cannot debate health care issues on the floor of the U.S. Senate. We had the opportunity to have health care raised yesterday by the Senator from South Dakota. And here we have the Republican leadership agenda. The vote on the IRS conference report is important and we are going to vote on it.

But is the conference report on the IRS more important than the fact that tonight, across this country, insurance company agents are making decisions on health care that will imperil the health of families? Can we say that the IRS is more important? What about the vote on the product liability bill? Is that more important than this debate? The Republican leadership says that we're going to have a 2-hour debate on agricultural sanctions. And it goes on and on.

Mr. NICKLES. Will the Senator yield?

Mr. KENNEDY. Just let me make a brief comment because I was denied the opportunity last evening by the Republicans to have a conversation or ask questions last night. I will make a brief statement, and then I will yield.

Last night, my friend from the State of Washington said: ''Republicans will decide whether this great body is going to debate health care. I want to say that to the Senator from Massachusetts. Republicans will. They'll make the decision. Democrats won't. And we decided that because the Senator from South Dakota has raised this issue we are not going to permit a debate on this issue on the floor of the U.S. Senate.'' That is what they have said.

Mr. NICKLES. Will the Senator yield?

Mr. KENNEDY. The Republican leadership, in issuing their list of priorities about what we are going to consider during July and during September, has denied us the opportunity to debate the health care issue.

Mr. NICKLES. Will the Senator yield?

Mr. KENNEDY. In 1 more minute I will yield. It has been the Republican leadership who has denied us the opportunity to mark up this legislation in committee, to move it to the calendar, and to permit any certainty about when we would debate it. That is the record.

I will be glad to yield for a question to the Senator from Oklahoma.

Mr. NICKLES. Will the Senator yield? I appreciate——

Mr. KENNEDY. For a question.

Mr. NICKLES. I would like to rebut some of the things the Senator said.

Mr. KENNEDY. The Senator will have an opportunity to do so. I waited last night until after the Senator finished. But I will be glad to yield to respond to a question, if you have one, or I will continue.

Mr. NICKLES. Please continue. I will make the statement afterwards.

Mr. KENNEDY. Mr. President, in the area of the Patients' Bill of Rights, we have provisions supported by four different groups. One group is the President's Quality Commission. The Commission is made up of a number of extraordinary individuals from the insurance industry, from HMOs, from consumer groups. This is a bipartisan group that is universally respected.

Another group is the NAIC, which is the National Association of Insurance Commissioners. The NAIC includes both Republicans and Democrats alike across the country. A third group is the American Association of Health Plans, which is the trade organization of HMOs.

The PRESIDING OFFICER. The Senator's 15 minutes have expired.

Mr. KENNEDY. I ask unanimous consent for 10 more minutes.

The PRESIDING OFFICER. Is there objection?

Mr. NICKLES. Reserving the right to object, and I will not object. I would like to modify the Senator's request, that following his additional 10 minutes, I have 10 minutes to respond.

The PRESIDING OFFICER. Is there objection?

Without objection, it is so ordered.

Mr. KENNEDY. Thank you. And I yield 8 minutes to myself of the 10 minutes.

So we have provisions supported by these four organizations: Medicare; the National Association of Insurance Commissioners; the President's Quality Commission; and the American Association of Health Plans.

Now, we come to the provision regarding access to emergency care to permit individuals to go to the nearest emergency room. All four organizations agree with this. My time tonight is going to be short, so I will get back to this issue at another time when we debate it.

Another provision is access to specialty care, for example when a child has cancer and ought to be able to go to an oncologist. Oh this provision, we have support from three out of the four organizations. The President's Quality Commission, the HMO trade association, and Medicare all say yes.

For the direct access by women to OB-GYNs, the President's Quality Commission says yes.

Continuity of care allows an individual to be able to continue to get treatment by their doctor if the doctor is dropped from an HMO. This provision is effectively favored by all of the various groups.

What in these particular areas can our Republican friends complain about? Let us go on.

Coverage of an individual to participate in clinical trials is absolutely essential if we are going to get breakthroughs, particularly in breast cancer, and allow patients to take advantage of cutting-edge new technology. Access to clinical trials is supported by the American Association of Health Plans.

Provider networks need to ensure adequacy. If you are going to represent yourself as an HMO, all of these groups say you ought to have a balanced number of participating professionals and hospitals.

Nondiscrimination in delivery of services. You cannot discriminate against sick people and cannot discriminate in the delivery of health care by race or religion. Three out of the four groups agree with this provision.

Patients need information about copays, deductibles and standard information so they can make comparisons between different groups. Who can complain about this? All four groups support this provision.

Prohibition on gag rules. All four groups agreed with us on this position. You should not prevent doctors from being able to tell you what is in the best interest of your health.

Prohibition of improper incentive arrangements. Can you imagine we have to put legislate to prevent HMOs from putting the kind of improper incentives into their arrangements with the medical profession? It is extraordinary that we have to do this, but it is necessary.

Internal appeals to have a fair appeal in cases. All four groups agree on that.

The external appeals, to have a third party group. The President's Quality Commission recommends it and Medicare has been doing it for years.

And finally, to hold plans accountable in State courts. We had a vote here in the U.S. Senate the other day not to give blanket freedom of any kind of liability for the tobacco industry, and it passed by two-thirds to three-quarters of the U.S. Senate. We want to give the same kind of protections and accountability on the issues of health care. We will have a chance to debate that. If the Republicans don't want us to do that, then let's have a rollcall vote on that.

These are the essential aspects of the Patients' Bill of Rights. They have been taken from these four different organizations. Most of these items are supported by two, three, in many instances all four, of the different groups. This is a commonsense protection for the patients of this country. If Republicans differ with those kind of protections, let us stand up and debate them. Let us hear their alternative.

We have heard in the last few days that the right to hold plans accountable is going to drive the health care costs through the roof. Read in the Wall Street Journal today an article on a study by Coopers & Lybrand that showed it will only cost pennies a day for this protection. Don't just read the Journal article, but also look at what has happened to the 23 million Americans—most of them State and county officials—who have those kinds of protections, and look at the cost of their premiums. Their premiums are not any higher. This result is better than any study that can be done by the Chamber of Commerce or other group that is wholeheartedly opposed to this legislation.

These are the essential elements of the Patients' Bill of Rights, introduced by Senator DASCHLE. Perhaps they have to be altered, or maybe they ought to be strengthened, or maybe others in this body have better ideas to achieve these kinds of protections. But let us hear the opposition and the reasons for it. Let us hear the reasons. Let them advance those causes. But the silence is deafening. The American public deserve better.

The Republican leadership will have a chance to debate the issue, because Senator DASCHLE and others will continue to press it until we get a time to debate it. If that is wrong, so be it. Some of us are committed to protecting the American family, to make sure that doctors and nurses and patients are going to be making the health care decisions and not the insurance companies. That is the issue, plain and simple. We will challenge the Republican leadership tonight, tomorrow, and every other day for the 35 days remaining in this session, to give us a time to debate this issue.

It is interesting that the essence of this legislation is supported by Republicans in the House of Representatives, including Congressman GANSKE, who is a doctor and was at our press conference. Congressman GANSKE didn't believe this ought to be a partisan issue. Dr. NORWOOD, a Republican, didn't believe this ought to be a partisan issue. But here in the U.S. Senate, the Republicans are making this a partisan issue. Here in the U.S. Senate we are told: No, not only you won't have any one of us support it, but we won't even give you the time to debate it. That is wrong.

How much time remains?

The PRESIDING OFFICER (Mr. BROWNBACK). The Senator has used his 8 minutes.

Mr. KENNEDY. I yield myself the last 2 minutes.

In summary, the Patients' Bill of Rights guarantees the access to specialists, emergency rooms, and other needed care. It expands choices. It ensures independent appeals. It holds plans accountable for the medical decisions, restores doctor-patient relationship, establishes quality and information standards.

The American people are entitled to these rights in their health care. Children in this country are entitled to them. Senior citizens in the country are entitled to them. Hard-working men and women in this country are entitled to them. Doctors are entitled to the kind of protections we provide. The major insurance companies and HMOs should be held to a standard like every other industry in this country.

If that is wrong, let's call the roll and find out who believes in it and who does not.

I yield the floor.

The PRESIDING OFFICER. The Senator from Oklahoma.

Mr. NICKLES. I will respond to a couple of comments made by my colleague and friend from Massachusetts.

One, he is absolutely, totally, completely wrong on many of the statements that he made, particularly in saying the Republican leadership wouldn't allow this bill to come to the floor, allow a debate to happen on the floor of the Senate on health care. As the Senator should be aware, we have already made a couple of offers that we would try to accommodate some type of time agreement to bring up this issue this month. We are still working on it.

My colleague was absolutely incorrect when he said the Republicans were insisting that, if we win, we can still put this bill back on the calendar. That wasn't our request. That wasn't our statement. It is not our last request.

I am reading the unanimous consent request given on June 25 or 26 which said votes held on final passage—if read the third time, the Senate votes on passage of the bill without any intervening action or debate. The Senate will request a conference with the House, the chair will be authorized to appoint conferees, and the Senate-House care bill will be placed on the calendar.

I make those points. We are willing to have debate on the bill. We are willing to consider different options—both the House and the Senate, the proposal by my friend and colleague from Massachusetts, as well as the substitute that I am working on with some of our other colleagues.

We will have a debate on the floor. We are willing to work out a time agreement to where we will have it this month. We don't intend to spend 2 months on this bill or even 1 month on this bill, but we are willing to have a debate on health care legislation. It goes under the title of Patients' Bill of Rights. I happen to think that is a very good title.

I might also mention that the President's Commission on Health Care Quality came up with a lot of recommendations. They have several things that they recommend be included in all health care plans, but they said they should be included voluntarily. I might mention that the bill that our colleague from Massachusetts is promoting mandates; it doesn't have voluntary compliance. It mandates a lot of things that aren't included in the President's Commission—many things. And many of those things have a lot of cost. We have asked the Congressional Budget Office to give us cost estimates of Senator KENNEDY's bill, the Patients' Bill of Rights, and we don't have that. I hope we can get it before we commence debate.

We have stated, and I just want to repeat to all of our colleagues, we are willing to discuss this issue. We are willing to have time on the Democrats' alternative. I might mention, the Democrats' alternative, I believe, to my knowledge, no Republican in the Senate has cosponsored, nor should they, because I think it is a bad bill. I think it definitely would increase consumer cost, drive up the cost of health care insurance, the cost of health care, period, and the net result would be, fewer people would have health care. I don't think that is a result that we want to have. I am willing to say that I am willing to work to try to come up with a package that we can support.

I see my friend and colleague from Florida. Maybe we can come up with a bipartisan package. I am willing to do that. I know the Senator from Florida has met with other Senators in a bipartisan way to see if we can come up with items that will make sense, that will not have dramatic increases in consumer cost, in health care cost, but try to see if we can't work out some things to help cover some of the problems that have arisen with managed care. I am willing to do that. I am not one who says we don't need any legislation whatever. Some people have taken that position. That is not this Senator's position. I am willing to try to legislate responsibly in health care. I don't want to do something we will find out will do damage, like how significant health care cost increases affect our consumers. I don't think they are asking for increased health care costs. I don't think that would be helpful.

So I will repeat to my colleague from Massachusetts and other Senators on the floor—and I know, because I have talked to the majority leader day in and day out—we are working on trying to come up with an arrangement where we will have adequate time, but not an unlimited amount of time, to consider health care legislation—maybe under the guise of the Patients' Bill of Rights—and to allow a couple different alternatives. My colleague from Massachusetts has an alternative; he has a proposal. Some of us are working on a different proposal. There may be some of those things in common. But certainly there will be very significant differences—big differences, philosophically, in cost, in premium increases, and so we need to discuss those.

We need to have an adequate time to discuss those and to consider the different alternatives and then to have a vote. We expect to do so. We don't expect to change the rules of the Senate. We don't expect to guarantee that one side or the other side will have a victory in the process, but we have stated—and, again, as assistant majority leader, I am telling our colleagues on the Democrat side of the aisle that we are willing to try to work out an arrangement, and we will have adequate time to discuss this issue on the floor this month. I think that is fair enough.

The majority leader has been fair. What we are not willing to do is stop the Senate from doing any work. So, yes, we are going to pass IRS reform and we are going to pass it tomorrow. I think it is a giant step in the right direction. Yes, we are going to take up higher education reform, and we need to do that. It is very important to colleges, universities, and students all across the country. That needs to happen. Yes, we need to pass appropriations bills. I think it was very unfortunate that the minority leader of the Senate introduced the Patients' Bill of Rights on the VA-HUD bill, the veterans and housing appropriations bill. It doesn't belong there. He knows that. We have already indicated a willingness and a commitment to bring up the so-called Patients' Bill of Rights this month. Someone might say, wait a minute, you have not passed the tobacco bill. We spent 4 weeks on the tobacco bill. They didn't win. I believe they are not going to win on the Patients' Bill of Rights.

Senator KENNEDY said, ''We are going to bring up minimum wage.'' They have that right. But they don't have a right to have their agenda totally dominate the Senate. The Senate needs to do its work. We will consider some of their issues and some of ours, like IRS reform. We are going to take that up, and, hopefully, we will pass that tomorrow.

So I mention to all of our colleagues that I want them to be aware of the fact that we are trying to be fair, we will be fair, and we will consider this issue. We will have different alternatives—I think significantly different alternatives. I believe the alternative that the Republicans will be offering will be in stark contrast to the Democrats'. Maybe some things will be in common. We are going to offer greater choice and opportunity and competition. Hopefully, that will help change buyer behavior and get health care costs down, instead of the increases that would be achieved by Senator KENNEDY's proposal.

So there will be differences. But that is fine, that is good, that is legitimate. We will have that debate, and we will have adequate time for that. But it can't consume 2 months. It will probably consume 2 or 3 days. The Senate needs to decide what it wants to do. I expect that we will.

So I make that commitment to our colleagues. This is going to be a busy month. We need to pass a lot of appropriations bills. We have a couple appropriations bills we are working on right now that, unfortunately, people have tried to load up with bills that are extraneous, like the tobacco amendment on the agriculture appropriations bill or the Patients' Bill of Rights on the VA–HUD bill. That is not acceptable. It is not going anywhere. It may be good for political posturing, but it is not going to help pass their legislation. We have committed to bring up the legislation in due time this month, have adequate debate and consideration of a couple of different alternatives, and go from there. So I make that commitment to our colleagues. I think we should lower the rhetoric and the volume it has had and see if we can't work together in a bipartisan way to make some positive improvements in health care legislation.

Mr. President, I thank my colleague from Florida. I know he had a unanimous consent request to speak. I didn't mean to delay him. I apologize for interjecting, but I did think it was important to respond to the Senator from Massachusetts for his comments. I appreciate the accommodation.

I yield the floor.

Mr. GRAHAM addressed the Chair.

The PRESIDING OFFICER. The Senator from Florida is recognized.

Mr. GRAHAM. Mr. President, I thank my colleague from Oklahoma and my colleague from Massachusetts for a very interesting, exciting debate which, from the comments of the Senator from Oklahoma, will be a teaser to a future debate that we will look forward to having on these issues in the next few days.

Mr. NICKLES. I thank my colleague.

(The remarks of Mr. GRAHAM pertaining to the introduction of S. 2278 are located in today's RECORD under ''Statements on Introduced Bills and Joint Resolutions.'')

Mr. GORTON addressed the Chair.

The PRESIDING OFFICER. The Senator from Washington.

THE PEOPLE OF TAIWAN

Mr. GORTON. Mr. President, yesterday the majority leader of the Senate, Senator LOTT, the senior Senator from New Jersey, Mr. TORRICELLI, and a number of other Senators, myself included, introduced a resolution reaffirming our commitment to the right of self-determination on the part of the people of the Republic of China on Taiwan. We did so in shock at the seeming abandonment of those people by the President of the United States on his trip to mainland China. The resolution was referred to the Foreign Relations Committee, and I hope will be reported back favorably and promptly for debate and passage by the Senate of the United States.

For decades it has been the policy of the United States to call for all of the relationships between the people and government on Taiwan and the People's Republic of China to be peaceful. It has been our policy that the people of Taiwan should be permitted to determine their own future, much of which has now been undercut by President Clinton's overwhelming desire for approval on the part of a still Communist dictatorship in mainland China.

In fact, Mr. President, on his trip to China and in the policies immediately preceding that trip, the President of the United States has managed to impose sanctions on the world's most populous democracy, India, for its natural reaction to our assistance to the missile capabilities of the People's Republic of China; has managed to impose sanctions on Pakistan which is greatly harmful to the economy of the United States because of Pakistan's natural reaction to India's nuclear test; has insulted and weakened the people of Japan, a long-time and vitally important democratic ally of the United States, by a refusal to visit Japan on this trip to East Asia; and has undercut one of the most vital democracies anywhere in the world, and particularly East Asia on Taiwan.

As the Washington Post's editors wrote on July 2, and I quote:

> Mr. Clinton has sided with the dictators against the democrats.

It seems vital to me that we should reaffirm our commitment to the rights of self-determination on the part of the people of Taiwan, and encourage them on the successful path they have now traveled for almost half a century.

Mr. President, at the end of the Chinese civil war, when the nationalists were left only with an outpost on Taiwan, a group of Chinese began a separate existence with almost no promise of a bright future, poverty stricken on an island that had just emerged from half a century of Japanese imperialism, threatened by the overwhelming armed force of mainland China, without natural resources, with nothing to sustain them but the brilliance and dedication and the hard-working nature of the Chinese people on Taiwan, and an absolute commitment to their own freedom.

They have been perhaps the most successful example of what can happen to a people who are dedicated to the ideals that have moved the United States since its founding.

On Taiwan, the Chinese people first created a magnificently successful economy—an economy so successful that to this day they purchase more American goods and services than does all of mainland China, and following immediately upon that economic success the creation of a life and vibrant democratic system of government. Where under such threat in the entire world do we see anything remotely similar? Perhaps in Israel, perhaps in Israel under a similar threat from the outside, but I think, Mr. President, nowhere else in the world have we seen such a magnificent success in the building of a free and successful economy and a free and successful democracy.

It seems to me, Mr. President, that it should be our policy in the future that we laud and support that degree of success, that we encourage the Chinese on the mainland to follow that example rather than impliedly tell the people in Taiwan they must follow the example of the mainland.

We as Americans simply cannot abandon those free people on Taiwan. We must clearly indicate to mainland China that it cannot attempt to solve its differences with them by the use of force. We must clearly indicate to mainland China that the people of Taiwan must be in charge of determining their own future. We can, of course, hope for one China, but a one China that has institutions and is created in a fashion that respects the views, the desire for continued freedom, on the part of the people of Taiwan.

How it is that we have managed because of deterioration in our relationship with four democratic nations in east and south Asia without gaining anything of substance, of any real substance in our relationship with China, is beyond my power to explain. But at this point a mild resolution totally consistent with the Taiwan Relations Act passed by this Senate, reaffirming our support for the freedom and rights of self-determination of the people of Taiwan, is, I believe, the minimum we can do to make up for the disastrous remarks of President Clinton on his trip to China.

I repeat, I hope that the Foreign Relations Committee will report this bipartisan resolution promptly, that it will be passed by both the Senate and the House of Representatives. Only in that fashion can we show our dedication for the cause of a country that has followed our leadership, adopted our ideals, and deserves our support.

ADJOURNMENT UNTIL 9 A.M. TOMORROW

The PRESIDING OFFICER. Under the previous order, the Senate stands in adjournment until 9 a.m. tomorrow morning.

Thereupon, at 7:31 p.m., the Senate adjourned until 9 a.m. Thursday, July 9, 1998, at 9 a.m.