

bring them forward. Again, I hope, along with the distinguished chairman of the subcommittee, that we might be able to wrap up relatively soon on this piece of legislation. I mention that, for those who are sitting around wondering if there is anything better to be doing, that now is a good time to do it. Many have called; few are accepted. Now is the time to do it.

With that, Mr. President, and nobody else seeking recognition, I yield the floor.

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#### RECESS

Mr. LEAHY. Mr. President, I ask unanimous consent that we now recess for our policy lunches.

There being no objection, at 12:27 p.m., the Senate recessed until 2:16 p.m.; whereupon, the Senate reassembled when called to order by the Presiding Officer (Mr. FRIST).

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 President, I ask unanimous consent that the order for the quorum call be rescinded.

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

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#### UNANIMOUS-CONSENT REQUESTS—PATIENTS' BILL OF RIGHTS

Mr. DASCHLE. Mr. President, I will not take long. I know that there are discussions ongoing.

Before we left for the August recess, Democrats made it very clear that it is essential that we not leave here before the end of the year without having taken up and passed the Patients' Bill of Rights. I think it is very clear, given the extraordinary degree of interest in the issue on both sides of the aisle, that there is an opportunity for us to complete our work on that bill. I hope we can do it sooner rather than later. I see no reason why we cannot do it within the course of the next couple of weeks.

I will propound a unanimous consent request that would allow us to do that. The request, very simply, would allow the Senate to take up the House-passed HMO reform bill, begin the debate, allow relevant amendments, and set the bill aside at the request of the majority leader to take up appropriations bills when they are ready to be considered. It takes into account the need for us to complete our work on appropriations bills, and it takes into account the high priority that both parties have put on dealing with this issue.

But I must say, for Democrats, that there cannot be a more important issue than the complete and successful conclusion of the debate on managed care and the Patients' Bill of Rights. We now have over 170 different organizations that have said they join us in supporting this legislation and recog-

nize the importance of passing it before we leave. All we have left is 6 weeks. Mr. President, it is critical that we complete our work, that we get this job done, that we do so in the remaining time we have, and that we allow a full debate given the differences we have on how we might approach this issue.

Mr. President, I ask unanimous consent that upon disposition of the foreign operations appropriations bill, the Senate proceed to consideration of Calendar No. 505, H.R. 4250, the House-passed health care reform bill; that only relevant amendments be in order; that the bill be the regular order, but that the majority leader may lay it aside for any appropriations bill or appropriations conference report which he deems necessary to consider between now and the end of this session of Congress.

The PRESIDING OFFICER. Is there objection?

Mr. MCCONNELL addressed the Chair.

The PRESIDING OFFICER. The Senator from Kentucky.

Mr. MCCONNELL. I object.

Mr. DASCHLE addressed the Chair.

The PRESIDING OFFICER. The Democratic leader.

Mr. DASCHLE. Mr. President, I am very deeply disappointed that the Senator from Kentucky has seen fit to object to this.

We will continue to press this matter. We will look for other opportunities. I would much rather do it in an orderly fashion using the regular order to allow this to come up and be debated. But if we cannot do it that way, we will offer it in the form of amendments. One way or the other we will press for this issue. We will see it resolved, and see it resolved successfully, because I don't believe there is another issue out there this year that is of greater importance to the American people.

I would be happy to yield to the Senator.

Mr. KENNEDY. Mr. President, if the Senator will yield, as I understand it, the proposal that was made by the minority leader would have only permitted amendments that were relevant to the underlying measure, which would be the Patients' Bill of Rights, and that would have still granted to the majority leader the opportunity to move ahead, as we must, with the various appropriations bills, and appropriations conference reports.

As I understand, if the leader's proposal had been accepted, we would then have had the opportunity to consider this very important piece of legislation in an orderly way that would ensure adequate debate and discussion. The proposal would have ensured, if the Senator would agree, an opportunity to debate relevant amendments on critically important issues. It would have allowed the Senate to debate amendments that would ensure: that health care decisions are being decided by doctors rather than insurance company

accountants; that all women have access to appropriate specialists for the gynecological and obstetrician care that they need; that patients with life-threatening conditions have access to clinical trials; an effective end to gag practices that inhibit doctors from making medical recommendations and suggestions based on their patients' needs; that all patients have access to a meaningful and timely internal and external appeal, similar to what we have in Medicare, for example; and that the States themselves, if they so choose, to find further accountability for those who are going to practice medicine.

Am I correct that these elements were included in the legislation which the minority leader introduced, and that these are measures—along with others, that the minority leader thinks the Senate ought to have an opportunity to debate, discuss and vote upon—were based in part on the comments that have been made to the minority leader, I am sure, from people in his own State, and from representatives of the 170 leading patient and medical organizations in this country?

These are the groups that are supporting the leader's legislation, and they are supporting this action as well. And I understand that now the Republican leadership has just objected to our request to move forward to debate on health care legislation, on the Patients' Bill of Rights? Is that what we have just seen on the floor of the Senate?

Mr. DASCHLE. The Senator from Massachusetts is absolutely correct. First, to the point he made about relevancy, what our unanimous consent request would have done is simply allowed what we have attempted to negotiate with our Republican colleagues now for months, which is to allow a good debate about this issue and allow the opportunity for the Senate to decide on relevant amendments.

This may be one of the most comprehensive and most complicated medical issues that the Senate will address for a long period of time. It is impossible for us to address it in the way that has been suggested by some on the other side, that we have an up-or-down vote on two simple bills. There is nothing simple about them. These are very serious questions about holding health insurance companies accountable, about making sure that when a woman has a mastectomy she can be protected, about making absolutely certain that when you go into a pharmacy you have a drug that the doctor prescribed and not something that the health care company prescribed.

Those are the kinds of issues that we ought to have the opportunity to decide in a very careful way. So we offered a unanimous consent request that would have allowed for relevant amendments.

The Senator is absolutely right, as well, about the 170 organizations. In my time in the Senate on an issue of