

this will change—do not want to have to come to the floor and debate amendments. They don't want to have to argue why they don't cover a third of the eligible people. They don't want to have to argue why they don't want to make sure families have access to specialized services. They don't want to argue why they don't want to provide doctors with whistleblower protection. They don't want to argue a whole lot of issues that deal with patient protection.

When you want to debate is when you really believe you are right. When you want to debate is when you really think you have a piece of legislation that will lead to the improvement of lives of people. When you want to debate is when you have a piece of legislation that is consistent with the words you speak and you know you are not trying to fool anybody; you know it is authentic; you know it is real.

When you don't want to debate, I say to my Republican colleagues, is when you have a whole set of propositions you cannot defend. When you don't want to debate is when you know in the light of day, with real debate, with people challenging you, you can't defend your proposal. When you don't want to debate is when you are worried you will get into trouble with the people in the country because you haven't done the job.

That is what is going on.

One final time, I come to the floor of the Senate to urge my Republican colleagues to be willing to debate this question.

Let me make a connection to what Senator KERREY said earlier, because it is so important to me. If there is anything we should be about as Senators, it should be about focusing on good education, opportunities for children, good health care for people, making sure families don't fall between the cracks. These are the issues that people talk about all the time in our States. That is what we ought to be focusing on right now.

I yield the floor.

The PRESIDING OFFICER (Mr. ROBERTS). The Senator from Georgia is recognized.

Mr. CLELAND. Mr. President, I thank my distinguished colleague from Minnesota for his remarks today on the subject of health care and HMO reform, and particularly his strong advocacy for what has become known as the Patients' Bill of Rights.

I would like to report to my colleagues in the Senate the most recent Kaiser Family Foundation/Harvard University survey reports that problems with managed care are, indeed, growing and that Americans are increasingly worried about how their health care plan will treat them. The survey found that in 1998 as many as 115 million Americans either had a problem or knew someone who had a problem with a managed care plan.

A number of provisions have been included in the Patients' Bill of Rights to maintain the sanctity of the provider-patient relationship, basically known as the doctor-patient relationship. We used to think that was sacrosanct. Unfortunately, it is not today under many HMO plans. Health plans frequently impose restrictions on that relationship by taking it upon themselves to determine the most appropriate treatment. These determinations are often made on the basis of costs rather than what is in the patient's best interest. The fact that health plans are now making medical decisions that were traditionally made by the treating physician really causes me great concern. I think it concerns a number of Members of this body.

If health plans continue to arbitrarily define medical necessity, patients will be ultimately denied the health care they were promised. In this HMO debate, this debate on reforming health maintenance organizations, I do not think there is any more pressing issue than ensuring that patients are protected against the practice of some health plans of having insurance bureaucrats determining medical necessity rather than trained physicians. I think that is an incredible abuse of the system. I think it is terrible when we treat people based on financial necessity rather than medical considerations.

Health plans, I don't think, should interfere with decisions of treating physicians when those decisions concern a covered benefit that is medically necessary, according to that physician, and appropriate based on generally accepted practices and standards of professional medical practice. It seems to me that is common sense.

The Patients' Bill of Rights protects the sanctity of the doctor-patient relationship by allowing physicians, not accountants, to make medical necessity determinations. I think that is critical. In addition, some managed care organizations use improper financial incentives to pressure doctors to actually deny care to their patients—incredible. The Patients' Bill of Rights, I think, will go a long way to stopping this practice.

I would like to share one personal experience. I am glad that when I was wounded in Vietnam I was not covered by a HMO. I am glad I was covered by the full faith and credit of the U.S. Government. I could see myself laying there after the grenade went off, trying to call an insurance bureaucrat, being told my conditions were not covered by what was in the plan and, second, I was not cost effective.

I am afraid more and more Americans are experiencing that, which is why I personally support the Patients' Bill of Rights. Many of my colleagues do as well.

I appreciate the opportunity to discuss this important issue in the Sen-

ate. Mr. President, I yield the floor and suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative assistant proceeded to call the roll.

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

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

#### AGRICULTURE APPROPRIATIONS

Mr. THOMAS. Mr. President, I rise today to talk for a few minutes about agriculture appropriations. That is the bill that is before us. It is one I believe is particularly important. But I want to talk, really, about the need for us to be doing the necessary work of the Congress to be moving forward with our appropriations bills to keep the Government operating. These are the things we have before us. We have to pass 13 bills before this Congress is adjourned, before the 30th of September. We have to do this to keep the operations of the Government moving, particularly in the area of agriculture where we are having one of the toughest times we have had in the economics of agriculture, all over the country. It has been very difficult. Of course the appropriations bill for agriculture will be there to help. There will be other things done as well, but this is the basic effort we will have to make.

I am very sorry to say our colleagues on the other side of the aisle have seen fit to delay this bill by using stalling tactics and bringing up unrelated amendments that have caused us not to be able to move forward. This is not a question of which issue is most important. We believe, with all of these issues, it is a question of an orderly process of moving forward to do the things that we have to do to accomplish our assignments.

I am sorry to say we are not able to do our job. It has been derailed by what I believe is simply an effort to bring partisan political issues to this debate which really do not have a place in this situation.

One, we need to move forward with the appropriations bills; there is no question about that. Two, we are dealing with patients' rights, which we have dealt with before and with which we continue to deal. It is not a question of being willing to do it. We have a Republican bill for patients' rights.

Are there some disagreements, some differences? Of course. We have been talking about this for more than a year. It is completely inappropriate to bring it up now and use it as a stalling tactic.

The unfortunate part is this is not the first time we have had it happen. We had it happen just 2 weeks ago when we were talking about Social Security, and we were unable to move

forward with the lockbox legislation. We are finding an unusual amount of disruption in moving forward with the business of this Congress.

I commend the Subcommittee on Agriculture Appropriations for their hard work in putting this bill together. The lion's share of funding, \$47 billion, is designated for mandatory programs. Domestic food programs, food stamps, and child nutrition programs account for more than half of the agriculture appropriations bill.

Certainly, the subcommittee faced difficult challenges in crafting this bill. Industry is struggling. The requests for financial assistance are escalating. Those types of things are very real, and we are prepared to deal with them. All we need to do is have the opportunity to move forward.

Unfortunately, the stalling tactics have stopped us. For those of us who are primarily from agricultural States, passage of this bill is fundamental to our economy and fundamental to those agricultural producers.

Recently, I heard several of my colleagues describe the financial problems in agriculture, and I do not disagree with any of them. We are feeling those in my State of Wyoming.

I am very frustrated we cannot take action on a bill because it has been bogged down. We should focus on this bill. We should get this one done. We can do it. There is general agreement on it. We can deal with the disagreements and move forward.

There are a number of programs in this agriculture bill that are particularly important. In addition to the domestic food programs, it contains funding for activities that are essential to an industry that employs more people in this country than any other industry, and that is agricultural producers. It has to do with land grant universities. It has to do with our rural citizens.

Of particular importance to Wyoming, a State where 50 percent of the State belongs to the Federal Government and is managed by the BLM and Forest Service, there are funds for predator management which is particularly important, even important in places like Hawaii. It has to do with decreasing livestock losses and crop losses. It has to do with research and extension.

We have the most efficient agriculture in the world because we have had land grant colleges and we have had the extension service. We have been able to produce more efficiently than anyone else. It is one of the largest exports we have.

There are conservation initiatives. Mr. President, \$800 million is provided in this bill to assist farmers and ranchers to be stewards of the land, to be environmental stewards, to reduce soil erosion, to reduce nonpoint water pollution. The list of positive programs in this bill goes on and on.

For food safety, there is \$638 million, an increase of \$24 million over the fiscal year 1999 level.

Also in the bill are agricultural credit programs—the Presiding Officer is one of the experts with a background in agriculture and has worked on this problem—loan authorization for rural housing, and assistance for rural communities to develop waste disposal and solid waste management programs.

To brush this off and say we have other things to do, we should not undertake to deal with this agricultural appropriations, is distressing to me. I want us to move forward with it.

It is important, of course, not only to producers but to all of us as citizens of this country when we talk about safe food.

When we are finally able to debate the agriculture appropriations bill, there will be numerous amendments, as there should be. Some will be controversial which will further delay the passage of the bill.

We ought to also keep in mind that in order to go forward with the programs of this country, we need to move forward. We have about four appropriations bills that have been passed. Our goal should be to pass at least 11 of them by the end of July. We do not want to find ourselves in this business of having political problems that shut down the Government, as we did several years ago, and trying to blame each other.

Instead, we ought to move forward and do the things we ought to be doing. We have a process and we ought to move forward with it. There is much to be done, and I urge my colleagues to end their tactics of derailing and allow us to move forward on this very important spending bill.

I yield the floor.

The PRESIDING OFFICER. The distinguished Senator from Idaho is recognized.

Mr. CRAIG. Mr. President, is the Senate still in morning business?

The PRESIDING OFFICER. The Senator is correct. The majority has 9 minutes and approximately 30 seconds. The minority has 5 minutes 5 seconds.

Mr. CRAIG. Mr. President, I join my colleague from Wyoming who has expressed a frustration that I think many of us in the Senate hold and that a growing number of Americans hold as to the current tactic being used by Democrats to block an ag appropriations bill or to force an issue that is separate and apart from it.

We do have a responsibility in the Senate and in the Congress, and that is to pass 13 appropriations bills on an annual basis to fund the workings of our Government. And the one before us today is agriculture.

There is some \$60 billion to be spent in many of the areas outlined by the Senator from Wyoming. They are critical to all our States, not just the agri-

cultural community but for those people who are less fortunate, for their very nutrition—nutrition for women, infants and children, the Food Stamp Program, certainly the School Lunch Program. All of those programs are embodied in this appropriations bill. A tactic to push what now rapidly appears to be a raw political point for the purpose of upcoming campaigns against the normal and necessary workings of our Government is a bit frustrating to me.

I have made that assumption at this moment. Let's assume that I am wrong, that clearly the other side is dedicated to a concern on the part of the average citizen as it relates to his or her health care, and in being so concerned they have offered a Kennedy bill that some call a Patients' Bill of Rights. If I take it at face value, it is a bit of a frustration, and in the next few moments let me express that.

Chairman PATRICK KENNEDY in the House, a Democrat, of the Congressional Campaign Committee, was recently quoted and the national media is saying that "we have written off rural areas." He means that Democrats politically have written off rural areas.

Is it by coincidence the Senator from Massachusetts chooses the ag bill on which to place his political agenda? There seems to be a unique coincidence that PATRICK KENNEDY, Congressman KENNEDY on the other side, says, "We have written off rural areas," and Senator KENNEDY on this side says, "I'm going to attach it to the ag approps bill; I'll bring the ag bill down if I can't have my political agenda for a Patients' Bill of Rights."

Let me look at the substance of what may be offered today, because it is my understanding that there may be an attempt, in an amendment, to offer a portion of the Kennedy health care mandates.

What would that do? That talks about what we now call medical necessities. It is a portion of the bill that I think offers the illusion of the patients being in control, by requiring health care plans and employers to pay for whatever care a physician recommends—without question. If that is what the physician recommends, without peer review or any observation of the total situation, it is paid for.

If that were the case, in today's medical climate, here is the reaction of the Barnitz Group. Who are they? They are an economic consulting firm that deals with health care and health care costs. They evaluate them. They make judgments as to how a given policy would affect the payment for health care for the individual.

Here is what they suggest this particular portion of the Kennedy bill would do. It could cost nearly \$60 a year per covered household, per insured household. It could cost employers \$180 a year per covered employee. In other

words, it shoves the cost of health care up. Arguably, it might improve health care—I cannot debate that—by requiring that anything a doctor suggests gets funded. But it would cost more, or at least that is the observation.

In that cost—this is a marketplace we are dealing with out here—it could result in the loss of 191,000 jobs or it could result in the cancellation of coverage for 1.4 million Americans. That is a provision in an amendment that might be offered this afternoon.

Isn't it unique—I made some of this argument yesterday—that as we deal with ag appropriations, at a time when the chairman of the National Democratic Campaign Committee says, We write the rural areas off, that the Senator from Massachusetts would be offering a bill that would dramatically impact the uninsured by forcing more to be uninsured.

It just so happens that a very large number of the uninsured live in rural America. It just so happens, according to the Employees Benefit Research Institute, nearly half, or 43 percent, of all workers in agriculture, in forestry, and in the fishing sector of our economy have no health insurance. In other words, they have to provide for themselves. Now we are suggesting that we will drive the cost of insurance up for those who are uninsured instead of doing things that bring the cost of that insurance down so that the uninsured can find insurance more affordable.

Is this a coincidence or is there a relationship? I am not sure. But there is one thing that is for sure: The other side has decided to target ag appropriations with a bill that they think is extremely valuable politically. It is also an issue that we have come together on to say that there are some real needs and we are willing to address those needs in a bipartisan and timely fashion.

But let us allow the work of the Congress to go forward in the appropriations area. We will deal with health care, as we should deal with health care, but we cannot deal with it by driving people from it, creating a greater dependency on government programs, as inevitably will happen, as shown by every research institute that has looked at the Kennedy bill.

The Kennedy bill, without question, shoves possibly 2 million people out of insurance; I will be conservative and say at least 1 million, or 1.4 million by conservative estimates.

So let us get on with appropriating money for women, infants, and children for their nutritional needs, for the school lunch program, for food stamps, for ag research, for those things that are important to rural America.

I do not care if Congressman KENNEDY on the House side has written off rural America. This Senator will not write it off. We will pass an ag approps bill. We could do it today. We could fi-

nalize it this week and send a very important message to American agriculture that your work and your interests are important to us; that we will deal with you on a timely basis; that we will respond to your needs as best we can; and we will say to those less fortunate, we will feed you, and we will not use it as a political issue. We will do it in a right and responsible and timely way.

I hope our colleagues on the other side of the aisle can agree with that. It is what they ought to be agreeing with. There is enough politics to go around. Let's take politics out of the ag bill. They put it in with the injection of the Patients' Bill of Rights. They now have the opportunity to remove it.

Our leaders have been negotiating for some time to establish a time certain so we can handle this issue and all sides can debate its fairness, its equity, or its lack thereof. We will have a lot more detail. But obstructionist attitudes, blocking the activity of the Senate, gain very few of us anything. And the American public scratches its head and says: What are they doing back there? Why can't they do the work of the people? Pass the ag appropriations bill. Deal with health care in a timely fashion. Move the other appropriations bills and complete the work of Government.

That is what the American people expect of us. That is what they should expect of us. I hope the other side will ultimately agree with that.

I yield the floor.

Mr. DORGAN addressed the Chair.

The PRESIDING OFFICER. The Senator from North Dakota is recognized.

#### PATIENTS' BILL OF RIGHTS AND THE AGRICULTURE APPROPRIATIONS BILL

Mr. DORGAN. Mr. President, I take this opportunity to respond just a bit to some of the discussion that has occurred with respect to both the Patients' Bill of Rights and also the agriculture appropriations bill.

I just heard the discussion about the Kennedy position in the House and the Kennedy bill this and the Kennedy bill that. It is not what this issue is about. This is about a Patients' Bill of Rights. It is about the kind of health care the American people get when they show up with a disease or with an injury and need health care treatment, what kind of treatment do they get under current circumstances, and what kinds of protections are reasonable protections for them to expect in this system.

We have been pushing, for a long while, to try to get a Patients' Bill of Rights enacted by this Congress and by the previous Congress, but our efforts have not met with great success. I will tell you why. Because as health care has reorganized, and the largest insurance companies have herded people

into HMOs, they have decided they do not want Congress to pass a Patients' Bill of Rights. They want to be making health care decisions in their insurance offices, often 1,000 miles away from a hospital room or a doctor's office. They do not want Congress, in any way, to pass a Patients' Bill of Rights. They have gotten enough folks here in this Congress, and here in this Senate, to decide that they would block it. And it has been blocked forever.

So it does not matter that it was the agriculture appropriations bill. It would have been any bill. The Democratic leader last week said to the majority leader: We intend to offer it. If you don't give us an agreement and an opportunity to decide that we're going to have a fair and free and open debate on the Patients' Bill of Rights, we're going to offer it.

We are going to pass the agriculture appropriations bill. Before we pass the agriculture appropriations bill, we are going to have a debate on responding to the emergency of the farm crisis. That is not in this bill at the present time. We tried to put it in the bill in the subcommittee and were defeated in our attempts to do so.

But we are going to have a debate that is much larger than just this bill. This bill deals with the funding of USDA programs, research, food stamps—a range of things—but it does not address the farm crisis that exists out there today that deals with income: The fact that farmers go to a grain elevator someplace and the grain trade decides that their food is not worth much, they do not get a fair price for it. Family farmers are in desperate trouble. We are going to debate that bill, but we are also going to debate a bill to try to respond to the farm crisis.

Mr. CRAIG. Will the Senator yield?

Mr. DORGAN. I will in a moment.

But let me point out, we are also going to debate the Patients' Bill of Rights. It is not going to be some gatekeeper who is going to tell us what our rights are on the floor of the Senate. Someone will stand over there and say: Well, we have reviewed this amendment. We think we'll allow you to offer that. We are not going to do that. That is not the way the Senate rules exist. The Senate rules exist in a way that says to every Senator: You have a right to offer amendments.

I understand that we are not in the majority and we do not set the agenda. The other side sets the agenda. But when they decide that the agenda will be to enhance all of their interests and shut off any debate of interests on the other side, they miss, in my judgment, the history of the Senate. That is not what this body is about.

We have rights. We intend to exercise those rights. We are going to talk about education. We are going to talk about health care. Yes, we are going to