

enough—we will have almost a trillion-dollar surplus beyond Social Security during the coming decade.

Now, I have not seen the entire new plan of the President, but I can tell you that it has some odd features. In the first five years, no one in America will get any tax relief. The Government of America will retain control of all the enormous projected surpluses. Tax relief is relegated to the second five years in the President's plan.

That is not fair to the American working man or woman. Now certainly, we will need to retain some of the projected surpluses to put toward Medicare reform. The President envisions one type of reform where he spends \$51 billion of surplus dollars on a Medicare prescription drug benefit. We don't know if that is right or not. But we can sit at the table and fix Medicare given our wonderful fiscal situation. But let's not kid ourselves. We don't need a trillion dollars. We should be giving some of this money back to the American people—they are the ones who generated all these extra tax payments, they ought to get some of them back.

In that regard, it appears we are on a collision course with the President. We will let the American people be the judge of who is correct. I don't think that these hardworking men and women will stand by as their taxes climb higher and higher—I think they will support our call for tax relief.

It is unfair to assume that the Government, having collected more than we need, ought to start saying: Well, let's find out how we can spend all of it in Government. How does that make sense? Should we wait for Washington to figure out which new program it needs? Should we do what the President is doing? He wants to put \$340 billion of IOUs into the Medicare trust fund, and then say, in 30 years when the IOUs come due, we will just raise income taxes to pay for it. Putting that money into the trust fund for Medicare does not enhance one payment, does not increase its solvency for one week. And here we sit failing to say exactly what it is. The President's proposal will lead to income tax increases down the road to cover these IOUs.

I should say a number of Democrats and almost every Republican have been critical of this presidential proposal. It is similar to writing a postdated check. Guess who is signing the check? The American people, because they back up the U.S. Government who signed that check. It is postdated 30 years. When it comes due, there isn't any money to pay it. So then you go out and tax the American people to pay it. But, in the meantime, you can for some reason run around and say there is a lot of money in the trust fund, ignoring the long-run consequences of this plan. Frankly, I don't believe this is the right way to do things.

I look forward to a good, healthy debate. Normally, I would wonder whether the President is going to once again politicize the issue of Medicare so much so that it will turn out that we will not do anything, and we will all be frightened to death. But I actually believe that the President and Congress can work together. However, we do not endorse the President's reliance on trust fund accounting. Instead of forcing all the surpluses into some trust fund or another, why don't we give them back to the people who paid us? Maybe they could set up their own trust funds. Maybe they could start their own savings plan. Maybe they could put a little more into the kind of things they think they need for their families.

In a sense, I don't know about the rest of the Senators on both sides of the aisle, but I look forward to these issues we are going to discuss between Members of the Congress and the President. On some of them, I look for us to walk right down this aisle in bipartisan fashion and get some things done. However, we will not walk into an end agreement where no relief is given to American taxpayers. We will not be able to agree with the President of the United States if he is leading all the Democrats—which I somehow doubt—saying, no matter how big the surplus is, let's just wait around and see if Government doesn't need it. I submit that, if you do that, Government will need it. Government will use it. And the taxpayers who collectively paid more into Government than we need will see bigger Government, more money spent and less money in their own pockets, which is where more of it ought to be.

I think my time has expired. I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

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

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

EXTENSION OF MORNING BUSINESS

Mr. DOMENICI. Mr. President, on behalf of the majority leader, I ask unanimous consent that we remain in morning business until 5 o'clock and that the time be equally divided.

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

Mr. DOMENICI. I thank the Chair.

The PRESIDING OFFICER. The Presiding Officer, in his capacity as a Senator from the State of Washington, suggests the absence of a quorum. The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

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

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

Mr. SCHUMER. Mr. President, I ask unanimous consent I be given 5 minutes to address the Senate.

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

GUN SHOW LOOPHOLE

Mr. SCHUMER. Mr. President, 2 months ago, right after the tragedy of Columbine High School, I warned that whenever a tragedy occurs in our schools, if we don't act quickly and resolutely, the tragedy would recede in memory and we would fail to pass laws necessary to make our schools safe, thereby creating new ways for future tragedies to occur.

To the relief of the entire Nation, the Senate passed the juvenile justice bill that, thankfully, although belatedly, closed the gun show loophole.

The House, however, failed in its duty to the American people. The House was unable to shake loose from the NRA. They were unable to pass a juvenile justice bill with any gun control legislation and unable to even close the gun show loophole.

I rise today to remind the Senate of the urgency that led us to act firmly and resolutely after Columbine, and to use the various parliamentary procedures that allow Members to bring the juvenile justice bill and the gun show loophole bill to conference where we can do what is right.

I spent part of this weekend, Sunday and Monday, in New York's capital region, talking with constituents from Albany and the surrounding towns. Some of the areas were fairly rural. Without prompting, people walked up to me and said: Senator, what the heck are they doing in Washington? How come you can't even close something as simple as the gun show loophole?

They were incredulous. These people aren't passionate advocates of gun controls. They were outraged. They could not believe that a lobbying group, even such a powerful lobbying group as the NRA, could stop the Congress from passing a basic gun show measure.

I am proud of what the Senate accomplished last month. We debated juvenile justice for over a week. Passions frequently ran high. We cast five separate votes on various proposals purporting to close the gun show loophole. In the end, we approved the real thing. The juvenile justice bill itself passed by a margin of 73-25, with majorities of both parties voting in favor.

Is it a perfect bill? No. Is it a good bill that will make a real difference? Absolutely.

Now the question is whether we are going to throw up our hands and say the House couldn't stand up to the gun lobby, so let's give up.

We are in a strange lull, a lull in which newspaper stories inform us, and I quote the Washington Times of June 23:

Some [GOP leaders] said even a Senate-House conference to iron out differences with Democrats over gun-control provisions in a juvenile justice bill is now in doubt.

I am told today that Mr. ARMEY said at the very earliest, conferees would not be appointed until after the July 4 recess.

First and foremost, conferees ought to be appointed. We should not simply stop the process because some people, certainly a minority of the Members of Congress, and certainly a minority in terms of the views of the American people, do not want it to happen. The Senate debated the issue. We should have the ability to go to conference. I call on the House leadership to appoint conferees quickly and with alacrity so we might debate the provisions here, not only the gun show loophole but many of the provisions that people on both sides of the aisle support that would make it easier to punish violent juveniles as adults and that would provide some of the prevention services that young people need. Because juvenile justice and closing the gun show loophole is a priority to many Americans; to a large majority of Americans, in my opinion.

Two weeks ago, for instance, a month after we passed the juvenile justice bill, we passed the Y2K liability bill. Lo and behold, Senate conferees were immediately appointed, and I understand we are now close to an agreement. In fact, I believe an agreement is due this afternoon. I think that is great. But Y2K is a far more complicated bill than juvenile justice. It is treading on fresh new ground.

The millennium, by definition, occurs every thousand years but we finished this one right up. The juvenile justice bill, however, is in stasis. There are things that can be done to get it moving. The most obvious is for the House leadership once again to appoint conferees so we can debate the gun show loophole. The real problem I fear is that those in the Republican House leadership do not want to continue to debate this issue. They know their allies in the NRA and the American people, including most gun owners, are divided because most Americans, including most gun owners, sincerely believe providing a background check at a gun show does not infringe their rights just as we now provide that a background check must be done when you buy a gun at a gun shop. But they do not want to do that.

So there are other things we should consider to get things moving. Perhaps we can add these provisions to a bill that has to be conferenced. Perhaps we can add this to other types of proposals which the other body sees a need to have go forward. But I am issuing this

challenge, particularly to the House leadership but to all of my colleagues: We should pledge to send a juvenile justice bill, one way or another, to the President's desk, a bill which includes the Senate gun show provision, by the first day of school, the Tuesday after Labor Day. That is 2 months to pass a bill that we already passed. If we do not, and there is, God forbid, another school shooting, we will sorely regret our inaction.

I yield the remainder of my time.

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

The PRESIDING OFFICER. The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

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

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

Mr. REED. I thank the Chair.

PATIENTS' BILL OF RIGHTS

Mr. REED. Mr. President, I will speak for a few moments about a topic that has consumed many of us for many days this week and preceding weeks, and that is the Patients' Bill of Rights.

A particular concern to me has been the status of children in the various versions of the Patients' Bill of Rights. I argue very strenuously and very emphatically that the Democratic proposal recognizes the key differences between children and adults when it comes to health care, and there is a significant difference. For a few moments, I will try to sketch out some of these differences.

First of all, if one looks at the adult population in terms of types of illnesses, they are characterized as chronic diseases with relatively simple symptoms, simple manifestations with known consequences. They are quantifiable over a short period of time. Prostate cancer, breast cancer, heart attack are familiar diseases to all of us.

The other aspect of adults is that there is a large volume of adults who have these types of diseases. As a result, there is more than a sufficient supply not only of physicians but of specialists, those who are particularly skilled and particularly knowledgeable about the most efficacious treatments one can use for these types of conditions.

In contrast, children present another type of population to the health professionals. The good news is that most children are healthy. But if a child is sick, that child usually does not have one of these chronic diseases that is well-researched and well-treated and staffed by numerous specialists, but something more complicated. In fact, as the professionals say, these diseases

are usually complex and with multiple co-morbidities. For the layperson, that means different problems interrelated causing a much more complicated case for the physician.

There is another aspect of this dichotomy between adult health and children's health. There are so many healthy children—the good news. The bad news is in terms of managing this population, there is a very small volume of very sick children. This makes it very difficult for physicians to maintain their clinical competency, particularly for general practitioners. They will see many adults who have similar symptoms and they know very well how to treat them. By contrast, they very rarely see chronically ill children, so treating them effectively becomes especially difficult for a general practitioner.

Another difficulty is the sense these general practitioners or even adult specialists can treat this population of patients. There is a further complicating factor, that is, to manage cases you need volume, you need data, you need to understand what the best treatments are, and you can only do that in a rational way by studying lots and lots of cases and, frankly, because of the nature of children's health, they do not have the same type of volume in children's diseases as they do in adult illnesses.

One other complicating factor is that many times children's true health conditions manifest themselves long after they have actually contracted the condition. It is not the short duration, it is not the heart attack that one can rush the person into the emergency room, do the surgery, apply the drugs, and get that adult on the road to recovery. It is much different when it comes to a child.

Managed care organizations and the way they deliver care can compound these inherent differences between the adult population and the children's population.

First, let me give credit where credit is due. When a managed care plan does it right, they do preventive care very well. They can anticipate, through the management of the child's case, immunizations and well-baby visits, et cetera. But there are certain inherent characteristics of the managed care system of health care delivery that makes it—appropriate for adults but less appropriate for children. That is why we have to focus a part of our efforts on making sure that children are truly recognized in the legislation we are discussing.

First of all, because there are a relatively small number of very sick children, there is not the adequate number of patients for the HMO to maintain a number of pediatric specialists in their provider network. The other fact is that HMOs tend to fragment the market. They go after parts of the market