

Mr. NICKLES. Mr. President, I ask unanimous consent that the resolution be agreed to, the preamble be agreed to, the motion to reconsider be laid upon the table, and that any statements relating to the resolution be printed in the RECORD.

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

The resolution (S. Res. 336) was agreed to.

The preamble was agreed to.

The resolution, with its preamble, reads as follows:

S. RES. 336

Whereas the Nation has a responsibility to veterans who are injured, or who incur a disease, while serving in the Armed Forces, including the provision of health care, cash compensation, and other benefits for such disabilities;

Whereas from 1945 to 1963, the United States conducted test explosions of approximately 235 nuclear devices, potentially exposing approximately 220,000 members of the Armed Forces to unknown levels of radiation, and approximately 195,000 members of the Armed Forces have been identified as participants in the occupation of Hiroshima and Nagasaki, Japan, after World War II;

Whereas many of these veterans later claimed that low levels of radiation released during such tests, or exposure to radiation during such occupation, may be a cause of certain medical conditions; and

Whereas Sunday, July 16, 2000, is the 55th anniversary of the first nuclear explosion, the Trinity Shot in New Mexico: Now, therefore, be it

Resolved, That it is the sense of the Senate that—

(1) July 16, 2000, should be designated as a "National Day of Remembrance" in order to honor veterans exposed to radiation or radioactive materials during service in the Armed Forces; and

(2) the contributions, sacrifices, and distinguished service on behalf of the United States of the Americans exposed to radiation or radioactive materials while serving in the Armed Forces are worthy of solemn recognition.

PROGRAM

Mr. NICKLES. Mr. President, I would like to put all Members on notice that just under 40 amendments were filed on the marriage penalty reconciliation bill. Those votes will occur in stacked sequence beginning at 6:15 p.m. on Monday. Therefore, all Senators should prepare for a late night session on Monday with a lot of recorded votes.

Mr. REED. Mr. President, if I could ask my friend to yield, we have 40 amendments filed. I hope the Senator will work on his side as we will on our side. There is some duplication. It may not be necessary to have votes on each amendment. There may be other things that develop during Monday. We may not need all of those votes.

Mr. NICKLES. Mr. President, I concur with my friend and colleague from Nevada. I think for a lot of these amendments recorded votes are not necessary. A lot of these amendments will fall on procedure because they

won't be germane to the reconciliation bill.

I will work with my friend from Nevada energetically to reduce the number of amendments on this side, as I am sure he will on the other side, to see if we can't expedite the matter and finish this reconciliation bill to provide marriage penalty relief for married couples, and hopefully complete it on Monday evening.

Mr. President, as a reminder, stacked votes are scheduled also for 9:45 a.m. on Tuesday with respect to the Interior bill. Therefore, Members should plan to stay in or around the Senate Chamber for those stacked votes on Tuesday morning as well. It is our intention to complete the interior bill on Tuesday and move to other matters.

We are going to have a busy couple of weeks. We had a fruitful week this week. We passed the Defense authorization bill. We almost completed the Interior bill. We completed the repeal of the death tax bill. This has been a good week. We have 2 more weeks prior to the August recess, which are going to be very aggressive. Next week we plan to take up the energy and water appropriations bill and the Agriculture appropriations bill.

ORDER FOR ADJOURNMENT

Mr. NICKLES. Mr. President, seeing no other Senators desiring to speak, I ask unanimous consent that the Senate stand in adjournment under the previous order following the remarks of Senators WELLSTONE and BRYAN.

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

BBA RELIEF

Mr. WELLSTONE. Mr. President, since its passage in 1997, the BBA has drastically cut Medicare payments in the areas of hospital, home health and skilled nursing care services, among others.

While the reductions were originally estimated at around \$100 billion over five years, recent figures put the actual cuts in Medicare payments at over \$100 billion.

These cuts have consequences. Beneficiaries with medically complex needs face increase difficulty in accessing skilled nursing care. Hospital discharge planners have greater difficulty obtaining home health services for Medicare beneficiaries as a result of the BBA. Rural Hospital margins have dropped four percentage points continuing a dangerous trend that threatens access to care in rural America.

Last year, Congress acknowledged that the Medicare savings that resulted from the 1997 Balanced Budget Act went far beyond what we intended, and passed the Balanced Budget Refinement Act (BBRA) but it didn't go nearly far enough.

With actual cuts in payment of \$200 billion from the BBA, the BBRA reversed at best only 10% of these actual cuts in payment to providers caused by the BBA.

My state of Minnesota has been hit very hard by the BBA cuts, and last year's fix hasn't stopped the pain. As I said when I voted against the BBA, the cuts are too harsh and they will hurt our health care system. Both urban safety net hospitals and rural hospitals are feeling the pain. They are cutting back services, they are short staffed, like the hospital in Aurora, MN are faced with closing if they can't find a way to restructure so that their reliance on Medicare is not so great.

My colleagues should be aware that in rural Minnesota typically 70% of the revenue for rural hospitals is from Medicare and Medicaid. Hospitals are often the largest employers in these communities and new businesses won't locate in a community if it doesn't have a hospital. You can't blame them.

In addition these hospitals are critical to the tourism industry, which in my state is made up largely of mom and pop resorts, restaurants, lodges, canoe outfitters, fishing guides, cross country ski lodges as well as the downhill ski areas, snow mobile trails, vendors who cater to hunters and fishermen and women, bicyclists who use our state trails, the list is a long one.

When these folks become sick or are injured while out in the wilderness, on the water, on the ski hill or while hunting, they need a local hospital to treat their injury or illness. In our state of Minnesota these front line health care providers are small rural hospitals in communities like Cook, Grand Marais, Ely and Teo Harbors. We can't fly out all the people with broken bones or heart attacks during a blizzard, or in the fog. We need hospitals there to provide the care.

Northwestern Minnesota has been hit again by flooding this year. I don't know how many years in a row this has happened. We need health care there in these communities for farm families who are struggling with the farm economy, the weather and a health care crisis in their family. The hospitals in Northwestern Minnesota are on the razors edge of staying open. These BBA cuts hit them hard and hurt them badly.

Southwestern Minnesota is a part of my state that relies on the farm economy. When families are not making any money at farming like this year and last year, whether it be collapsed hog prices, milk, or grain prices, through no fault of their own they don't have money to buy good insurance, the counties' revenue from property taxes that supports the rural county hospitals can't keep up and if Medicare isn't there with a fair level of reimbursement, they face the possibility of closing as well.