

But I do know this: This debate has gone on for nearly 4 years now. This is an iteration of an iteration of an iteration. It is a compromise after a compromise after a compromise. It is a bipartisan bill brought to the Senate Chamber to say: Let us provide patient protections against those HMOs that want to withhold needed treatments for patients. Let's change the odds.

Let me hasten to say, not all insurance companies or HMOs are bad actors. Many of them are wonderful, and do a great job, and serve their patients very well. I commend them.

There are some, however, who look at a patient in the context of profit and loss. A woman in the State of Georgia suffered a very severe head injury. She was put in an ambulance, and on the way to a hospital—she was not quite unconscious—she had the presence of mind to tell the ambulance driver: I want to go to the following hospital. And it was the farthest hospital away, about another 10 minutes. They took her there, but they later asked her why, with a brain injury, she would want to take the extra 10 minutes to go to a further hospital. She said: I know about the hospital that was closer. It is a hospital with a reputation for taking a look at a patient who is coming in and seeing the dollars and cents, the profit and loss. I didn't want my medical care to be the function of someone else's calculation of profit and loss.

This is from a woman in an ambulance with a brain injury. My point is very simple. This country needs to have some basic protections for patients, and the patients want those protections. Especially with the growth of managed care organizations, many of whom do a fine job, but some of whom do not, we need these protections.

We need to say, as a matter of public policy in this country, patients have certain rights. Yes, you have a right to know all of your options for medical treatment, not just the cheapest one the managed care organization might want to tell you about.

Yes, you have a right to an emergency room when you have an emergency. Yes, you have a right to be able to see the specialist you need when you need to see one. Yes, you have a right, if your spouse is being treated for breast cancer and you have changed jobs, for your wife to see that same oncologist who has been working with for her for the last 5 years to fight her breast cancer. You ought to have that right, and this legislation will give you that right.

We will have Senators who will assert that this is a bill about trying to create more lawsuits. It is not that at all. It is about trying to provide patient protections. As I said when I started, the managed care organizations have all the lawyers they need. They can hire all the lawyers they need and want unimpeded. No one is going to come to the Chamber from the other side and talk about limiting the rights

of the big managed care organizations or insurers to hire lawyers, are they? I don't think so. But they will say: We don't want patients to have access to attorneys to hold managed care organizations accountable.

This is all about accountability. The Red Cross can be held accountable. Boy Scouts can be held accountable. Everybody can be held accountable except, in these circumstances, managed care organizations. This piece of legislation says everybody ought to be held accountable.

This is not about lawyers, this is about getting the right care to patients when they need it.

I suspect we will debate this for a couple of weeks. We have had this debate before. This legislation has changed from that time. For example, we hear from small businesses, who are now getting mailings around the country, saying: If Congress passes this Patients' Bill of Rights, this is going to break our small businesses because we will be held accountable. That is not true. In fact, this has changed so that we use exactly the same language the majority party used in its substitute in 1999. This bill isn't in any way putting in jeopardy small businesses. We don't hold them accountable. They are not accountable at all in circumstances where they have not had direct participation in making decisions about patient care. They are not accountable in that circumstance and should not be accountable because they were not making the decision.

This is about managed care organizations and patients and the relationship between the two and the rights patients ought to have.

I have other pictures. I have other stories. I will at some point later describe more of them in terms of what is "medically necessary" because by deciding what is medically necessary is another very important way in which HMOs can withhold treatment.

I am going to show a poster on the issue of medical necessity that is a little more subtle than perhaps the other one I used but just as important. Brenna Nay was born in 1987. She has abnormal facial features characteristic of what is called Hajdu-Cheney syndrome. The shape of her skull is distorted. She had no chin. The question is, is it medically necessary to treat this young lady?

Let me show the result after surgery. They built this young woman a chin. After surgery, does that improve that young woman's life? Is this something you ought to expect would be covered in a health plan? In my judgment, it should.

I have other pictures that are similar. I will use them later.

This "medically necessary" issue is critically important. I feel passionate about these health care issues. I have lost a member of my family. I have sat in intensive care day after day after day and know what it is like to lose a member of my family in a cir-

cumstance I can hardly begin to describe. In my case, my loss didn't have anything to do with the managed care organization withholding treatment. But I understand the passion of parents. I understand the passion of people who are fighting for their lives, who are struggling and fighting mightily against dread diseases and illnesses they know can kill them and then discover they not only have to waste the emotional energy to wage war against cancer or heart disease or so many other problems, but they also have to try at the same time to fight a managed care organization that ought to be covering that which is in their health care plan.

That is not right. That is not fair. These are the types of problems this piece of legislation is designed to try to address. If we can pass this legislation, the country will be a significant step ahead in dealing with patients' needs and protections.

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

The PRESIDENT pro tempore. The clerk will call the roll.

The bill clerk proceeded to call the roll.

(Mr. DORGAN assumed the chair.)

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

The PRESIDING OFFICER (Mr. DAYTON). Without objection, it is so ordered.

THE VERY BAD DEBT BOXSCORE

Mr. HELMS. Mr. President, at the close of business Friday, June 15, 2001, the Federal debt stood at \$5,632,910,105,449.16, five trillion, six hundred thirty-two billion, nine hundred ten million, one hundred five thousand, four hundred forty-nine dollars and sixteen cents.

One year ago, June 15, 2000, the Federal debt stood at \$5,644,607,000,000, five trillion, six hundred forty-four billion, six hundred seven million.

Twenty-five years ago, June 15, 1976, the Federal debt stood at \$612,128,000,000, six hundred twelve billion, one hundred twenty-eight million, which reflects a debt increase of more than \$5 trillion, \$5,020,782,105,449.16, five trillion, twenty billion, seven hundred eighty-two million, one hundred five thousand, four hundred forty-nine dollars and sixteen cents during the past 25 years.

ADDITIONAL STATEMENTS

HONORING COLONEL JAMES GARRARD JONES, FIRST MAYOR OF EVANSVILLE

● Mr. LUGAR. Mr. President, I rise today to honor a true pioneer in public service, Colonel James Garrard Jones.

Colonel Jones was born in Paris, KY on July 3, 1814, but soon became a resident of the great State of Indiana when

his family moved there in 1819. This move was Indiana's good fortune, for it did not take long for Colonel Jones to become involved in public life.

The young Colonel Jones served as Surveyor and Deputy Recorder of Vanderburgh County, leaving a lasting mark as the county's early field notes and books of deeds and mortgages appear in his handwriting. He went on to serve as Evansville Trustee and Evansville Attorney under the town corporation. In 1847, Colonel Jones's efforts in the establishment of a city government culminated with his election as first Mayor of Evansville. He won reelection as Mayor in 1850.

Colonel Jones took his service to the State level with his election as Attorney General of Indiana in 1860. But shortly thereafter he was appointed Colonel of the Forty-Second Regiment of the Indiana Volunteer Infantry, and he left office to serve with the regiment.

After hostilities ended, Colonel Jones practiced law until Governor Baker appointed him to his final position of public service in 1869 as Judge of the Fifteenth Judicial Circuit.

Colonel Jones passed away on April 5, 1872. This public servant, husband, and father to eight children is remembered not only for his public service, but also for his intelligence, kindness, and gentility.

On June 23, 2001, the descendants of Colonel Jones, the current Mayor of Evansville, IN, Russell Lloyd Jr., the Friends of the Forty-Second Regiment Indiana Volunteer Infantry, and others will gather to remember Colonel Jones with the placement of a new bronze marker at his grave site in the Oak Hill Cemetery in Evansville. I am pleased to join them in honoring this fine man who contributed greatly to Evansville, the state of Indiana, and our nation.●

CONGRATULATING SHIRLEY M. CALDWELL TILGHMAN

● Mr. TORRICELLI. Mr. President, I rise today to congratulate Shirley Tilghman on becoming the 19th President of Princeton University. Dr. Tilghman comes to this revered post eminently qualified, having previously served as an exceptional teacher and a world renowned scholar.

Dr. Tilghman has been a valuable member of the Princeton faculty for many years. Arriving at Princeton in 1986, she served as the Howard A. Prior Professor of the Life Sciences. She has also served as the chair of Princeton's Council on Science and Technology from 1993 through 2000, and in 1998 undertook the responsibilities of founding director for Princeton's multi-disciplinary Lewis-Sigler Institute for Integrative Genomics. The founding of the Lewis-Sigler Institute grew out of Dr. Tilghman's role as one of the architects of the national effort to map the human genome.

Harold R. McAlindon once said, "Do not follow where the path may lead. Go

instead where there is no path and leave a trail." I am confident that based on Dr. Tilghman's wealth of experience and interests, she will continue in this spirit as she guides Princeton University. I wish her all the best.●

TRIBUTE TO KATHLEEN MOORE

● Mr. SMITH of New Hampshire. Mr. President, I rise today to pay tribute to Kathleen Moore of Goffstown, NH, for her act of heroism. I commend her for the act of risking her own life to save the life of a fellow citizen.

While returning home after babysitting for children of a friend, Kathleen spotted a burning automobile that had crashed into a tree. Alarmed by the sound of banging from inside the vehicle, Kathleen, a postal employee, risked her life while aiding Mark Renaud, of Barnstead, NH, who was trapped underneath the burning car.

Kathleen, who had lost a daughter and a son in an automobile accident 12 years earlier, heroically pulled Mark Renaud out of the flaming inferno that had consumed the car. Thanks to the selfless actions of Kathleen, Mark is alive today.

Kathleen Moore is a role model for the citizens of Goffstown, our State and country. I applaud her act of heroism and charity. It is an honor and a privilege to represent her in the United States Senate.●

CONGRATULATING THE MERCK INSTITUTE OF AGING & HEALTH

● Mr. CORZINE. Mr. President, I rise to congratulate the Merck Institute of Aging & Health and its executive director, Dr. Patricia Barry, on its public introduction today.

As the baby boom becomes the senior boom, the number of Americans over 65 will double within the next 30 years to 70 million. This significant increase in the life span means that we must find ways to increase the health span, or America will grow sicker as it grows older.

Located in Washington, DC, the Merck Institute of Aging & Health is a new nonprofit organization established to help increase the health span by promoting active aging. Funded by the respected Merck Company Foundation of White House Station, NJ, the new institute is specifically dedicated to improving the health, independence, and quality of life of older people around the world. It will fulfill this mission by communicating vital health information, educating the public and health professionals about healthy aging, and encouraging research in the aging field.

As more individuals start to enjoy longer lives, they also need to enjoy better lives. They need to learn how to age without losing independence, and they need to see the promise of active aging transformed into reality. This is both the challenge and charge of the new institute, and I have every con-

fidence that its director and staff will meet that challenge and help the public, professionals, and policymakers face the critical issue of active aging in the 21st century. In the process, I know that this institute will help prove, in the words of Dr. Barry, that "Aging should not be seen as an obstacle, but as an opportunity."

Again, I congratulate the Merck Institute of Aging & Health on its public introduction, and I wish it continued success throughout the coming years.●

LOCAL LAW ENFORCEMENT ACT OF 2001

● Mr. SMITH of Oregon. Mr. President, I rise today to speak about hate crimes legislation I introduced with Senator KENNEDY last month. The Local Law Enforcement Act of 2001 would add new categories to current hate crimes legislation sending a signal that violence of any kind is unacceptable in our society.

I would like to describe a terrible crime that occurred July 24, 1999 in San Diego, California. Hundreds of gay-pride marchers and spectators were tear-gassed when someone threw a military-issue tear-gas grenade near the Family Matters contingent during the 25th annual Pride Parade. Family Matters is a social and educational group for gay and lesbian parents and their families. The 70-person contingent included small children and babies in strollers.

I believe that government's first duty is to defend its citizens, to defend them against the harms that come out of hate. The Local Law Enforcement Enhancement Act of 2001 is now a symbol that can become substance. I believe that by passing this legislation, we can change hearts and minds as well.●

SPEARFISH HIGH SCHOOL "WE THE PEOPLE . . . THE CITIZEN AND THE CONSTITUTION" FINALISTS

● Mr. JOHNSON. Mr. President, I rise today to publicly commend an excellent group of students from Spearfish High School in Spearfish, SD. This class of 23 government students performed extraordinarily well at the Center for Civic Education's "We the People . . . The Citizen and the Constitution" national finals held in Washington, D.C. The Spearfish High School class competed with 49 other government classes from around the country, and I applaud these students for their outstanding performance and for their dedication and commitment to studying the U.S. government.

"We the People . . . The Citizen and the Nation," is an outstanding program directed by the Center for Civic Education and funded by the United States Department of Education by an act of Congress. The program's goal is to create an enlightened citizenry that