

physician. But from what I know of patient safety, this is an extremely important piece of legislation, and we have been able to do it. We are going to be able to go to conference. There has been agreement between the Chair and the ranking member. I think this is an important step forward.

I would say, through the Chair to my friend who is not here, the distinguished chairman of the HELP Committee, I am glad he brought this to the Senate's attention. I am glad we did not agree to what his unanimous consent request was at that time. But we were able to get it done, and I am very happy for that.

I have no objection. This is an important piece of legislation. I now wish the conferees well.

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

The amendment (No. 3568) was agreed to.

(The amendment is printed in today's RECORD under "Text of Amendments.")

The committee amendment in the nature of a substitute, as amended, was agreed to.

The bill (H.R. 663), as amended, was read the third time and passed.

(The bill will be printed in a future edition of the RECORD.)

The Presiding Officer (Mr. ENZI) appointed Mr. GREGG, Mr. FRIST, Mr. ENZI, Mr. ALEXANDER, Mr. KENNEDY, Mr. DODD, and Mr. JEFFORDS conferees on the part of the Senate.

Mr. FRIST. Mr. President, I do want to congratulate Senator GREGG, chairman of the HELP Committee, and ranking member, Senator KENNEDY. This is a piece of legislation that people can trace. Several years ago, the Institute of Medicine did an outstanding report. We rely on the Institute of Medicine again and again to objectively, in a nonpartisan way, look at a whole range of issues, from the financing of health care, health care delivery, preventive health care, acute treatment, chronic treatment. They really respond very much to outside bodies like the Senate and do studies.

One great study they did—people have argued their numbers aren't exactly right, too high, too low—but it was that about 100,000 people die every year from systems' lapses, medical errors. Those are, for the most part, preventable deaths, if you improve the systems. This bill goes right at the heart of improving the systems and does so in a way that relies on individuals who may observe something that didn't work out, sharing that data with their peers in a way that they do not have to fear lawsuits.

Obviously, if there is wrongdoing, lawsuits would be appropriate. But, if it is an error, minor error, or even a more serious error, it can be addressed upfront in a way that you do not have to be afraid somebody is going to come in and crush you from the outside.

I say that because it is a bipartisan bill. It went through the Health, Education, Labor and Pension Committee.

I think the fundamental structure of the bill went through the committee unanimously. It shows tremendous leadership.

There were disagreements on a few items that have been worked out, with Senator GREGG's leadership, working with Senator KENNEDY. With that, we have a very good bill, a strong bill that will change systems of health care in a positive way, and clinics and hospitals and physicians offices such that we can eliminate or greatly reduce the number of unnecessary medical errors that occur in large part through systems approaches.

Just an example would be if somebody is on 10 different medicines and somebody prescribes a new medicine. You don't know the interaction of those medicines. You need a system to identify that. That sort of organized, commonsense approach to improve systems is made possible by this bill.

Mr. ENZI. Mr. President, the Senate this evening has taken a major step toward better and safer health care for all Americans.

Tonight, we approved the Patient Safety and Quality Improvement Act. The goal of this legislation is to allow health care providers some freedom from legal fear so they can do what we all strive to do every day—learn from our mistakes.

This bill would create a framework through which hospitals, doctors, and other health care providers can work to improve health care quality in a protected legal environment. It would accomplish this by granting privilege and confidentiality protections to health care providers to allow them to report health care errors and "near misses" to patient safety organizations.

This bill would not permit anyone to hide information about a medical mistake. Lawyers would still have access to medical records and other information that would normally be discoverable in a legal proceeding. However, the bill would ensure that the analysis of that information by patient safety organizations would take place on a separate track in a protected legal environment.

Under the bill, patient safety organizations would have the freedom to collect and analyze data on health care errors in confidence, and then report their findings to the health care community. These findings would help health care providers understand how mistakes happen in our health care system, and how to prevent them.

If we can reach an agreement in conference in the House and send this bill to the President, health care providers will be much more likely to share information about honest mistakes, because they will have some assurance that the analysis of their information won't result in a tidy package of information that a personal injury lawyer could use against them in court.

I express my appreciation for the hard work that the members of the

Committee on Health, Education, Labor, and Pensions put into this bill, particularly Chairman GREGG, Majority Leader FRIST, the lead sponsor Senator JEFFORDS, and Senators SESSIONS and KENNEDY.

I also thank the staff who worked so diligently over the course of this Congress to craft this legislation, particularly Vince Ventimiglia, Peggy Carlson, David Fisher, Dean Rosen, Jim Hippe, Sean Donohue, Megan Clarke, David Nexon, David Bowen, and of course Stephen Northrup with my office.

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

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

#### UNITED STATES-MOROCCO FREE-TRADE AGREEMENT IMPLEMENTATION ACT

The PRESIDING OFFICER. Under the previous order, the Senate having received H.R. 4842, the companion measure to S. 2677, an act to implement the United States-Morocco Free-Trade Agreement, the House bill is read a third time and passed; the passage of S. 2677 is vitiated, and the bill is returned to the Calendar.

The bill (H.R. 4842) was read the third time and passed.

The PRESIDING OFFICER. The majority leader.

#### THE DEPARTMENT OF DEFENSE APPROPRIATIONS BILL

Mr. FRIST. Mr. President, a few minutes ago we passed the Department of Defense appropriations bill, with a vote of 96 to 0. I want to take this opportunity to congratulate the chairman of the Appropriations Committee, who is also chairman of the Defense Subcommittee, Senator STEVENS, and his ranking member, Senator INOUE, on bringing this first appropriations conference report for next year to completion.

This is a critically important bill. It provides nearly \$418 billion in resources to our dedicated men and women in the global war on terrorism. The legislation will immediately make available \$26.8 billion to the Department of Defense as emergency appropriations to cover the costs associated with operations in Iraq and Afghanistan, upon signature by the President.

As GAO reported this week, these funds are needed, and they are needed quickly, for the operation and maintenance and military personnel through the end of the current fiscal year. Further, critical funding is provided immediately to the Department of State for our diplomatic programs, for our consular programs, and embassy security in Iraq.