

modern miracle drugs supports our proposal. Every major group that represents persons with disabilities in our country—individuals who are challenged mentally and physically every single day—supports our proposal. And still, because of the manipulation of the Senate rules, we are denied a full debate and discussion and ultimate resolution as to what this body would say to families of this country on such a matter. It is wrong, and we are going to continue to press our case.

I yield the floor.

Mr. BYRD. Mr. President, will the Senator yield?

Mr. KENNEDY. I am glad to yield.

Mr. BYRD. Mr. President, the distinguished Senator from Massachusetts can always be counted upon to stand up for the things in which he believes. He is constantly supporting legislation that is calculated and dedicated to bring better health care to the American people. I support his Patients' Bill of Rights. "Constancy, thou art the jewel." He is always constant in this efforts.

I have been hearing some ads on the radio, and these ads are talking about the "Kennedy Bill of Rights." I don't recall their ever telling us what is wrong with it. They may have been doing it; I have missed that. But I continually see these ads on the television: "Write your Congressman, write your Senator, write your representative, and urge them to defeat the Kennedy Bill of Rights, the health care bill of rights."

Tell me, has the Senator seen those ads, and what are we talking about?

Mr. KENNEDY. Mr. President, it is very interesting. I have seen those ads, but I believe they are going to be pulled very soon because what has happened, according to the most recent study by Bob Blendon at Harvard and the Kaiser Family Foundation, is that support for our bill has gone up, quite in conflict with the intentions of those who sponsored the ads that have been critical of the Patients' Bill of Rights. And so now the insurance companies and corporations that oppose the Patients' Bill of Rights are reviewing their television strategy because their campaign has had the reverse effect. They are sort of going back to the drawing board.

But quite clearly, as the Senator implies, their ads certainly were not a fair representation of the legislation that we have introduced. As I mentioned, virtually every one of these proposals in our bill has either been suggested by the President's commission—which was bipartisan and reported its recommendations unanimously—as important for all patients, or included in Medicare at the present time and used in protecting our seniors, or have been embraced by the state insurance commissioners—which are the 50 commissioners around this country, Republicans and Democrats—or adopted voluntarily by the HMOs themselves through their trade association.

This legislation reflects the best judgment of those groups that know this issue best. That is why we have a sense of confidence in this legislation. It has the strong support of those professionals who treat families and understand the kinds of protections that are necessary to give the best of health care to American families.

Mr. BYRD. Mr. President, I thank the Senator for enlightening this Senator in response to the question I asked. I again commend him for his unceasing effort in behalf of this legislation, the Patients' Bill of Rights.

Mr. KENNEDY. I thank the Senator.

#### MORNING BUSINESS

Mr. MURKOWSKI. Mr. President, on behalf of the leadership, I ask unanimous consent that there be a period for the transaction of morning business until 12:30 with Senators permitted to speak for up to 10 minutes each.

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

#### CLOTURE MOTION CORRECTION—S. 442

Mr. MURKOWSKI. Mr. President, on behalf of the leader, I ask unanimous consent that the name of Senator BURNS be added to the cloture motion in place of the Senator from Wyoming, Mr. ENZI, whose name was inadvertently added to the motion in error.

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

#### NATIONAL CANCER AWARENESS

Mr. MURKOWSKI. Mr. President, I rise to address two matters that are of importance to me. The first is the issue of national cancer awareness.

Mr. President, for the next 3 days, hundreds of thousands of cancer survivors, families, care givers, and friends, whose lives have been affected by cancer will join together in this city for an event called "The March: Coming Together to Conquer Cancer."

Yesterday, other Members of this body and I had an opportunity to place a large star on our respective States to represent special persons in our lives who have been touched by cancer.

I had the pleasure and honor on behalf of my wife, Nancy, to place a star on my State of Alaska for the late Judge Lester Gore, my wife's father. He was a remarkable pioneer in our State. In 1912, Judge Gore moved to Juneau after graduating from law school and established an impressive record as a young deputy district attorney. He was recognized in that effort in 1932 by President Hoover's appointment to serve as a Federal judge for the Territory of Alaska, serving the first judicial district in Nome.

In serving as a Federal judge in the far reaches of western Alaska in the aftermath of the gold rush, Judge Gore traveled from village to village hearing

various cases and judging on the merits. He used every mode of transportation from dog team to the former cutter *Bear*, bringing justice to rural Alaska. He was instrumental in both creating legal precedent and shaping the legal history of our State. Later in his career he worked as an attorney in Ketchikan, and died in 1965 of cancer. He had many accomplishments but none more important to me than fathering a daughter, Nancy, who later was good enough to accept my proposal of marriage.

In addition, I was pleased in my own personal case to recognize my mother, who died of cancer, leukemia, in Alaska in 1956, having spent her entire career in the area of education. She was the longest standing sixth grade teacher in Ketchikan, Alaska.

To move on, for more than 20 years now, my wife, Nancy, has worked with Alaskan women to encourage the establishment of a breast cancer center starting in Fairbanks, Alaska. She and a group of women initiated the Breast Cancer Detection Center for the purpose of offering free mammograms to women in the remote areas of Alaska, regardless of their ability to pay. I am proud to say that the center now serves about 2,500 women a year and provided screenings to more than 25,000 Alaska women in 81 villages throughout the State.

To help fund these efforts of the Fairbanks center, each year my wife has sponsored a fishing tournament to raise money for the operation of the facility and to purchase units. Interestingly enough, over the last 5 years they have raised over \$1 million in this effort. They now operate a permanent facility in Fairbanks, as well as a mobile mammogram unit that travels the highways of Alaska providing free breast cancer examinations for the women along the highway system. It looks like a big armored car. More recently, they have purchased a smaller unit called Molly. Molly is designed to go in aircraft to fly out to the villages that are not connected by any road, and by river barge down the rivers of the interior.

So I commend those who are responsible for this effort in my State, a group of women who have taken it upon themselves to do something about this disease, this killer disease which affects all of us. It is anticipated that 40 percent of us will get some form of cancer during our lifetimes. We have had a figure of about 1.5 million Americans being diagnosed this year.

Mr. President, I ask my colleagues to join with me in taking part in the activities here in Washington, D.C., with The march, thereby demonstrating our commitment to end cancer forever.

#### NORTH KOREA MISSILE TEST

Mr. MURKOWSKI. Mr. President, I would like to address one more issue, with the agreement of my colleagues. I see a number of them on the floor—

Senator BYRD—so I will try to be very brief. But I want to talk a little bit about our national security interests and what is occurring in North Korea. It does not just affect my State of Alaska, although this recent three-stage rocket did generate a little interest in my State because on August 31, 1998, the North Koreans fired a rocket which we now believe is a three-stage rocket carrying a satellite over the sovereign territory of Japan and it evidently came down very close to my home State of Alaska.

Although initial reports indicated that this was a two-stage rocket with a range of approximately 1,200 miles, now there is acknowledgment in the U.S. intelligence community that it was likely a three-stage rocket carrying a satellite. The third stage malfunctioned, consequently the satellite was not launched. But the point is that it has been identified that, indeed, the North Koreans have the rocket capability to carry some type of armament to the shores of the United States.

The Asian press reported that the rocket traveled 3,700 miles, or 6,000 kilometers, and landed in the ocean near Alaska. On September 17, the U.S. Department of Defense spokesman Kenneth Bacon responded to this report by saying:

The only way to track this is by radar tapes and there's considerable disagreement among experts on how to interpret this.

Let's think about what this really means. The only way we have to track this is by radar tapes; in other words, after the fact. But intelligence sources have been quoted as acknowledging that a three-stage rocket could have a range three times that of the two-stage Taepo Dong I rocket. Particularly concerned about this latest missile test, a number of us have recognized that there seems to be a breakdown on whether the administration was either caught off guard by the sophistication of the North Korean technology, or was reluctant to share this information with lawmakers.

I am reminded of President Clinton's comments last year, when he said "[t]he possibility of a long-range missile attack on U.S. soil by a rogue state is more than a decade away."

That does not appear to be the case—as a consequence of the occurrence in August, the last day of August, relative to the North Korean missile which did land within shouting distance of my State of Alaska.

This would ignore the testimony in 1994 by John Deutch, then-Deputy Secretary of Defense:

If North Koreans field the Taepo Dong 2 missile, Guam, Alaska and parts of Hawaii would potentially be at risk.

It appears the North Koreans have gone beyond even what Mr. Deutch envisioned by launching a three-stage rocket carrying a satellite.

There is truly an immediate need for missile defense, Mr. President. MIT professor Daniel Fine has an interesting take on why we need immediate

action on a National Missile Defense System which protects all of the United States, including Hawaii, Alaska and our territories. He conclusion is that:

If the \$32 billion infrastructure [associated with oil production in my State] in Prudhoe Bay—which produces 1.6 million barrels of oil . . . is subjected to a credible missile threat . . . then the cost to the American economy of a missile threat as economic blackmail would reach \$4 billion—\$6 billion in the first ten days.

Well Mr. President, I for one do not think it is far fetched to think of Prudhoe Bay as a potential target. After all, it accounts for approximately 20 percent of the total domestic production of crude oil in the United States. While I have not reviewed how the professor reaches the \$4 to 6 billion figure, I think it should serve as a wake-up call to those who continue to oppose a National Missile Defense System. It is not just Alaskans, Hawaiians and those in Guam who should be concerned about the launch. Monday's test was the first of a multistage missile. According to experts, the ability to build rockets in stages opens the doors to intercontinental missiles that would have virtually unlimited range and which would carry payloads capable of nuclear, chemical or biological weapons. Such missiles, and the threat of them, certainly puts U.S. citizens at risk as a consequence of any attack coming from North Korea or any other area with a missile that carries weapons of mass destruction.

I think we have to reflect a little bit on the North Koreans. Some would dismiss the threat from North Korea because that country is on the verge of an economic collapse. But I remind my colleagues that North Korea has a history.

Mr. President, we have seen in the past, irrational actions by the North Koreans. You recall this is a country that in 1950 launched an invasion on South Korea, resulting in the deaths of 3 million of her countrymen and 54,000 American troops.

Recall the detonation of a bomb in Rangoon killing 16 South Korean officials; a country whose agents blew up a Korean Airlines flight killing 115 passengers and crew; and a country whose military hacked U.S. personnel to death in the DMZ.

I think we have to recognize there is still a great deal of uncertainty relative to the objectives of North Korea.

Furthermore, as we look at the crisis on the Korean peninsula, the United States has given over \$250 million in combined food aid and support for KEDO. The North Koreans have received 1.3 million metric tons of heavy fuel oil.

While the United States has provided humanitarian assistance from time to time, as well as technical assistance, we have also promised large contributions to the \$5 billion light water reactor program and also have given food and aid and contributed over \$50 million to KEDO.

What have the North Koreans done in return for this assistance? They launched a missile in August. Intelligence photos show work on vast underground construction complexes.

In July of 1998, GAO reported that North Korea has taken actions to hinder work of international inspectors sent to monitor North Korea's nuclear program.

It goes on and on.

As a consequence, I think it is fair to say the administration has treated each of these incidents as if North Korea is merely an innocent child throwing a harmless tantrum, not a terrorist nation home to the world's fourth largest army, just miles away from the 37,000 American troops.

Incident after incident is dismissed by this administration as "not intentional" or not "serious" enough to derail U.S. assistance under the Agreed Framework.

The administration called latest missile launch "a matter of deep concern to the U.S. because of its destabilizing impact in Northeast Asia and beyond," but reiterated its commitment to provide funds under the Agreed Framework.

The administration refuses to say that newly disclosed evidence of underground facility would violate the 1994 accord because "concrete has not been poured."

When a sub full of North Korean commandos landed in South Korea, the administration asked both sides to "show restraint"—as if South Korea was in the wrong.

The administration responded to violations of the Military Armistice Agreement by asking that the issue not be "blown out of proportion."

Issuing polite reprimands from the State Department, while the Administration continues to seek increased funds for activities that benefit North Korea, only encourages bad behavior.

Mr. President, enough is enough. Congress should block further funding for KEDO until the President can certify that North Korea's nuclear program is, indeed, frozen and not simply an ongoing clandestine operation. The United States is a global power with vested interests both politically and commercially all over the world. We simply cannot allow policy to be determined by those who practice missile blackmail.

Mr. President, I yield the floor, and wish the President a good day and a good weekend.

Mr. GRAMM addressed the Chair.

The PRESIDING OFFICER. The Senator from Texas.

Mr. GRAMM. Mr. President, I ask unanimous consent to proceed as in morning business for 25 minutes.

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

Mr. BYRD. Mr. President, reserving the right to object.

The PRESIDING OFFICER. A reservation of the right to object is heard.

Mr. BYRD. Mr. President, I will not object. I have been waiting here and

am very happy to wait longer. I understood the Chair wanted to be recognized for 2 or 3 minutes, also.

The PRESIDING OFFICER. The Chair did, but it has gotten too late and he has abandoned that desire.

Mr. GRAMM. Is the Senator from West Virginia waiting to speak? I will be glad to withhold and let him speak and then I will speak.

Mr. BYRD. Mr. President, the Senator is very kind and considerate. I was waiting to speak, but the Senator from Texas may have to go farther, a greater distance than I would have to go if I were going to West Virginia today. I ask unanimous consent that I may be recognized at the completion of the remarks by the distinguished Senator from Texas, Mr. GRAMM.

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

Mr. BYRD. I am delighted to listen to what the distinguished Senator from Texas has to say.

Mr. GRAMM. Mr. President, let me reiterate, in fact, when the Senator from Alaska finished his speech, Senator BYRD and I were having a conversation. I had thought as I left my office that he had spoken. I assumed that he was simply here listening to the Senator from Alaska.

Again, I reiterate, if the Senator from West Virginia had come over to speak, he was on the floor before I was, and I believe he should be recognized.

Mr. BYRD. No, no, Mr. President, I hope he will not be under the burden of thinking that I have a feeling about this. I am perfectly agreeable to wait a little longer, just so I can get in line immediately after the Senator from Texas.

The PRESIDING OFFICER. The Senator from Texas has the floor.

Mr. GRAMM. Mr. President, this reminds me of the time when I was on the elevator for the first time with Senator THURMOND, and Senator THURMOND insisted that I get off the elevator before he did. I determined when I was on the elevator with Senator THURMOND again that I would not get off the elevator before Senator THURMOND did. But I was wrong. I stood there for almost 2 minutes insisting that Senator THURMOND get off the elevator before I did. In the end, Senator THURMOND had more patience. I got off the elevator first.

Mr. BYRD. Mr. President, will the Senator yield?

Mr. GRAMM. I will be happy to.

Mr. BYRD. I like to try to live according to the Scriptures, which say that the first should be last and the last should be first. I thank the Senator.

The PRESIDING OFFICER (Mr. SESSIONS). The Senator from Texas.

#### HEALTH CARE

Mr. GRAMM. Mr. President, our dear colleague from Massachusetts came over today and responded to a speech I gave yesterday. As he always does—and

I think it is one of the things we admire about him—he spoke with great passion because I think he clearly is one of our Members who cares deeply about these issues. Whether he is right or whether he is wrong, I think we all respect that in one of our fellow Members.

What I would like to try to do is to briefly respond and make the key points that I made yesterday, given that so much reference has been made to the speech of yesterday, and try to make all these points in such a way as to deviate from my background as a former schoolteacher and be brief so that Senator BYRD can give his speech and we can both go home for the weekend.

Yesterday, I made the point, which I am continually struck by, that 5 years ago in the Senate, we were debating a proposal to have the Government take over and run the health care system. A substantial majority of the Members of the Senate at the beginning of that debate, following the lead of Senator KENNEDY and President Clinton, had decided that the problem we had in American health care was access; that 40 million Americans didn't have health insurance and that a price we should be willing to pay to solve that access problem was to deny people the freedom to choose their health care provider and force every American into a health care purchasing cooperative or health care purchasing collective which would be one giant HMO run by the Government.

I have on this desk—and I want to be careful because one of these bills fell on my foot over there and I want to be sure all of them don't fall—but I have here those bills from 5 years ago. Each one of these bills denied the American people freedom to choose their health care provider, forced them into a Government-run collective in order to deal with the problem of access.

Each one of these bills, this massive pile of bills—Kennedy I, Kennedy II; Moynihan I, Moynihan II; Mitchell I, Mitchell II, Mitchell III and Mitchell IV—each of these bills was about denying Americans the freedom to choose their doctor, choose their health care, choose their hospital, and we had a big debate about it 5 years ago. The argument from the sponsors of these bills was that the denial of this freedom was a small price to pay in order to guarantee access to health care.

I had an alternative then. It was a very modest bill. Here is a copy. I want people to see what freedom looks like. It is simple.

It was a small bill, as these kind of bills go. Basically, what it did was deal with the access problem by helping people who didn't have health insurance to get it without denying freedom to everybody else. It established risk pools at the State level where we would help people with preexisting conditions get health insurance.

But the point is, the same people who are saying today that we should be

willing to drive up costs and deny access to people in the name of guaranteeing freedom are the same people who 5 years ago said, "Let's deny freedom in the name of access." Now, 5 years later, after we debated the original Kennedy-Clinton bill—and I am very proud to have played a small role in seeing that effort defeated—5 years later, now we have the same people saying, "The problem is not access—don't worry that by driving up costs millions of Americans might lose their health coverage—the problem now is HMOs."

Five years ago, the same people were saying, "HMOs are so wonderful that we ought to have one HMO run by the Government, and it will be great for everybody." Now they say HMOs are evil and what we have to do is, we have to regulate HMOs.

What I would like to do is simply explain why the new approach is not the approach that I believe we should follow. Let me first define the real problem with HMOs, then what I believe the solution is. And then I want to say a little bit about the bill, and I will be finished.

Fifteen years ago, almost every American had a low deductible health policy funded by either Medicaid, Medicare, or by themselves and their employer through private health insurance. These were health insurance policies where the person who bought health care, using this coverage, paid relatively little of the cost.

Fifteen years ago, the average American who went to the hospital was responsible personally for paying only about 5 percent of the bill. And this was a wonderful system. It produced the greatest quality health care the world has ever known. It created wonderful new technology, but it had one terrible problem, and that is, we could not afford it. And it is easy to see why we could not afford it.

If you can imagine—imagine you had grocery insurance that, when you went to the grocery store, paid 95 percent of the cost of the food you put in your basket. If we had grocery insurance like we have health insurance, when we went to the grocery store, we would end up eating differently, and so would our dog. The grocery stores we know today would be totally different. You would have 20 or 30 times as many people working at the grocery store. You would have all kinds of precooked foods. You would have all kinds of specialty items. And grocery costs would be exploding. We would all be cussing the cost of grocery insurance.

So it is not surprising that our old fee-for-service medical system, with low deductible insurance where the patient did not care about controlling costs, the physician did not care about controlling costs, and so nobody controlled costs—it is not surprising that that system did not work.

The Government talked about it for 15 years, but we never did anything about it. There are a lot of things we