

pierce 6-percent unemployment without having a rekindling of inflation. They were wrong. The unemployment rate has remained below 6-percent for nearly five years with low inflation.

Now the Fed will say it has finally seen a demon in a closet somewhere called inflation that they can use to justify increasing interest rates. I think they are wrong. The American people, and especially producers, are already paying a higher economic rent for money than is currently warranted, given the core rate of inflation.

Organizations such as the National Association of Manufacturers believe it is not appropriate to have the Federal Reserve Board once again increase interest rates. The National Association of Manufacturers sent a fax sheet last Friday to 535 Members of the House and the Senate detailing why they think interest rates are already high enough and that an increase in the rates is not justified in light of an already slowing economy.

I happen to agree with that; I know others do not. I also happen to think the Federal Reserve Board and these Members ought to have some basic accountability. We ought to at least give them credit if you think they have done a wonderful job. Here are their names, addresses, pedigrees, and grey suits. Here are their salaries.

If you think, however, they are pursuing an unreasonably high interest rate policy, given the rate of inflation, here is who they are. Here is how much money they make. Here is who the regional Fed bank board of directors have appointed to be in charge of public policy. They come on a rotating basis, galloping into Washington, DC, shutting their large oak doors and make a decision on behalf of America. They will decide they think interest rates aren't high enough.

They have decided for a long while that too many people were working in this country—a decision I did not quite understand. They serve their own constituents; their constituents are their member banks. Perhaps some day we can have a debate about monetary policy in this Senate. A century ago it used to be debated in barber shops and bars.

Not too long ago, I studied money and banking in graduate school. Lyndon Johnson was President and William McChesney Martin was head of the Federal Reserve Board. He was going to increase interest rates by one-quarter of 1 percent. Lyndon Johnson sent for him to come down to the ranch in the Perales in Texas for a barbecue. He put his arms around him and almost squeezed barbecue juice over that fellow—all over one-quarter of 1 percent.

Now it is not a big deal. The Fed shuts their door and everybody says: Hosanna—whatever the Fed thinks is what the economic doctrine ought to be.

Not with me. I think there is no justification with respect to the rate of

inflation for the Fed to put this additional charge on American producers or the American people. When the Fed meets this week behind closed doors—and this is who they are, where they live, how much money they make—give them credit or blame them, depending on your economic doctrine.

My policy is interest rates are higher than is justified, or higher than justified at this point, given the rate of inflation in this country. The economic rent now charged for money exceeds the economic rent by historical standards over a long period of time. For the Fed to shut its doors and decide the economic rent ought to be higher, in my judgment, is fundamentally wrong.

That is probably a minority view these days, given the reverence for Fed policy, but it is at least therapeutic for me to say it on a Monday, preceding the Fed's meeting. If they increase interest rates at their meeting this week, I will come back with more to say. I hope perhaps they will surprise me and others and decide there is no data to justify an increase in interest rates given the rate of inflation in our economy today.

I yield the floor.

The PRESIDING OFFICER (Ms. COLLINS). The Senator from Texas is recognized.

#### HEALTH CARE

Mr. GRAMM. Madam President, we have had a health care debate for the last couple of weeks. The problem is that we are on appropriations bills. We are trying to pass a bill that will help stabilize the condition of farms and ranches all over America.

However, our colleagues on the Democrat side of the aisle have seemed determined to talk about health care. I will talk about health care today.

I begin by saying, first of all, this is not the beginning of the health care debate. Here are some bills we have debated on health care since President Clinton has been in office. This is the Clinton health care bill. We were told in 1993 there was a crisis in America and we needed to deal with it. The way to deal with it was setting up health care collectives where every American would be forced to buy their health care from one in their geographic region that would be set up with a local collective leader, appointed by the Government. Then all the doctors would work for this health care collective and the Government from Washington would issue mandates.

Then people such as myself said that this is a terrible loss of freedom. When you adopt the Clinton health care bill that I have on the desk, when my mama is sick, she will end up talking to a bureaucrat instead of a doctor. We were told by Senator KENNEDY and by President Clinton we have to give up this freedom because we have 30 million American families who have no health insurance.

So in 1993, we were told if we would pass these bills and let Government

run the health care system, if we would force every American into a health care collective where Government could run it efficiently and where Government could guarantee our health care, that we would lose some freedom, but we would deal with the problem of lack of coverage. We were told that the problem in 1993 was access.

We had a big debate. At one point 82 percent of the American people thought these health care collectives were a great idea. Finally, a few Members of Congress stood up and said, "Over my cold, dead political body." It was like somebody had taken a pin and stuck it in a big, fat inflated balloon. It just went whoosh, and suddenly everybody decided this was not a debate about health care; this was a debate about freedom.

The reason I go back to this history is two things. First of all, please remember when we are debating the so-called Health Care Bill of Rights, it has the same authors who wrote the Clinton health care bill setting up health care collectives. They have not changed their minds about what kind of American health care they want. They really believe the Government knows best. They really believe if the Government ran the health care system that everybody could have access and everything would be better because the Government, through these health care collectives, could make decisions for us and we are basically ignorant people and we do not know how to make decisions for ourselves. This was and is still their goal.

We defeated the Clinton health care bill because the American people decided it may have been Senator KENNEDY's goal, it may have been Bill Clinton's goal, but it was not their goal. In fact, I would have to say that during the months I debated this bill by talking about cost and about efficiency, it was similar to throwing rocks at a tank. But suddenly when the issue changed to freedom and the right to chose, we blew the tank up.

The same people who several years ago said give up your freedom because the problem is access changed their minds once we defeated them. Now they have a new health care bill they call the Patients' Bill of Rights. Oh, it does have something I guess you could call rights. Let me explain the basic problem and then I want to explain what they call rights and then I want to explain what I call rights and what I think Main Street America would call rights.

Here is the problem in a nutshell. First of all, having spent 2 years trying to sell us on the idea we should give up our freedom to get access, they now say: Access is not a problem. Forget the 30 million people who do not have health insurance. In fact, Senator KENNEDY's bill would take health insurance away from another 1.4 million Americans by driving up costs. These are estimates by the Congressional Budget Office. For the people who did not lose

their health insurance, they would pay \$57.2 billion more in costs. And by losing their health insurance—by the way, that would mean next year, if we pass the Kennedy health care bill this year, there would be 150,220 fewer breast examinations given to people who might have breast cancer; it would mean there would be 42,194 fewer mammograms; it would mean there would be 107,628 fewer Pap tests; it means there would be 18,458 fewer screenings for prostate cancer.

When I am saying Senator KENNEDY's bill, by the CBO estimates, would take insurance away from 1.4 million people, and for the people who got to keep their insurance because they had enough income, it would cost them \$57.2 million, don't think I am just talking about money. Don't think I am just talking about a piece of paper that says "Insurance Policy." I am talking about breast examinations, mammograms, Pap tests, and prostate screenings. I am talking about lives. I am talking about families. I am talking about your mama. I am talking about people you care about. This is a big issue. It is an important issue.

What is the problem that Senator KENNEDY wants, or tells us he wants, to deal with this year. The problem several years ago was too much freedom, and we had to get people in these health care collectives where Government could provide health care. Now the problem is the private HMOs, after which these Government collectives were modeled, are not giving people enough choices. The same things the Kennedy bill denied when it was the Clinton health care bill, such as the right to sue the Government when it was providing health care, now, all of a sudden, Senator KENNEDY wants to give you the right to sue your doctor. So under the Kennedy plan, if your baby is sick and running a 104 fever, you may not be able to get a doctor, but you can sue. For most people, that is not what they want. But it is interesting that Senator KENNEDY, who denied you the right to sue when he was going to let Government run the health care system, now is willing to attack the private sector and to expand lawsuits.

What does he claim he wants to deal with? What he claims he wants to deal with is the following problem. People join HMOs to try to hold down medical costs. You have two people who are working, they have three children, they are trying to make ends meet in their family, they are sitting down the first day of the month at the kitchen table writing those checks, trying to figure out how they are going to pay the bills. So they join an HMO because it is cheaper. The one thing they are very much unhappy about is that the HMO too often gets in between them and their doctor.

Let me just do a little analogy, if I may. It is similar to going into the examination room with your doctor—even with your doctor you feel a little bit uncomfortable taking off your

clothes; everybody has had that experience. But with an HMO it is almost like the HMO gatekeeper is in the examination room with you. What you really want is to get him out of the room and leave you just with your doctor. What you want is what we show here—if you will just forget the symbols for a minute and just look at this stethoscope—what you want is you at one end of the stethoscope and your doctor's ears at the other end and you want to get any HMO gatekeeper out of the examining room.

Senator KENNEDY looks at this problem and here is his solution. His solution to the problem is: OK, you are unhappy because you are in the examining room and you have this gatekeeper in there with you and your doctor. Here is how he solves the problem: He solves the problem by saying, OK, you have your doctor in there, you have your HMO in there, and then what he calls your rights—his Patients' Bill of Rights—your right is not to get the gatekeeper from the HMO out of the examining room. That is not your right. Your right is to have a Government bureaucrat join the HMO gatekeeper and your doctor in the examining room with you, and then to have a lawyer join the Government bureaucrat who joins the HMO gatekeeper in getting between you and your doctor.

So Senator KENNEDY's solution to your problem is he puts two more people in the examining room with you. What kind of freedom does he give you? It is an interesting concept of freedom. I do not want to sound too partisan, but it sure defines the difference between the two parties. Freedom to Senator KENNEDY is having a Government bureaucrat who is there who might take your side. Freedom to Senator KENNEDY is freedom to hire a lawyer and sue somebody.

That is not the freedom most Americans are talking about when they talk about freedom. Freedom is the right to choose. Freedom is the right to fire your HMO. Freedom is the right to make your own decisions. That is what freedom is about. This so-called Kennedy Patients' Bill of Rights may be about rights, but it is not about freedom.

The Republican alternative, which we would like to debate and hope to adopt—in fact, to facilitate the debate, our leader has suggested over and over the most eminently reasonable proposal I can imagine. The eminently reasonable proposal is, let the Democrats write the best bill they can write, where they pick exactly the bureaucrat they want who will be there with the gatekeeper in the examining room with you, and then set up the system where you can hire the best lawyer you want to be there, all of them listening to your heartbeat with your doctor—the bureaucrat ready to regulate and the lawyer ready to sue. Let them write the best program they can write, and let us write our best program, and then let's put them before the Senate and let Members choose.

Our Democrat colleagues do not want to do that because they know what will happen. They know that ours will be chosen. Now we have spent weeks and weeks fooling around with this thing.

To get to the point I want to make, because I know our leader is coming over in a minute to start the debate, the Democrat bill is not what people want. This is not freedom. What people want is the right to fire their doctor, if they want to fire their doctor, to fire their HMO, if they want to fire their HMO, and choose for themselves. On a dark night when their baby has a 104-degree fever, they do not want to be given the freedom to call a lawyer, they want to be given the freedom to call a doctor. What good does calling a lawyer do after the fact? They want the ability to call a doctor to get the best medical care they can for their child.

Our bill goes back to this chart. That is, there are two people in the examining room, and you choose to put both of them there under our bill. No. 1, you choose to put yourself there; and, No. 2, you choose the doctor who is in the examining room with you.

How does it work? Under our bill, we give people freedom. We give people the right to choose. One of the choices—and I can go through many provisions of our bill. I am just going through one today, and it has to do with medical savings accounts.

When we first started debating medical savings accounts, a lot of our Democrat colleagues were for them, but now that they understand them, they hate them, and they hate them because they empower people. They empower mothers and they empower fathers to make decisions rather than governments or HMO's.

This is how it works. You have a choice, and one of the choices you can exercise is to set up a medical savings account. You would buy an insurance policy, and you would choose that insurance policy from the company you want to provide the services. It would guarantee your medical expenses beyond, say, \$3,000 of expenditures, so that if somebody gets really sick, you have an insurance policy. But then you and your employee would together over time put \$3,000 into a medical savings account, and that money would belong to you.

Each year, if you had medical expenses, you could spend it out of the medical savings account, where you choose how to spend it on health care and who provides the service, and if at the end of the year you have not spent the money, it belongs to you. So you have an incentive to be cost conscious and efficient and to have a stake in your health care system. But also, you have the right to choose.

Here is how Senator KENNEDY's plan works. Under his plan—and let me take the Washington phone book because it is on top—under his plan, you have total freedom to look under "lawyer" and hire any lawyer you want to sue,

but you do not have the total freedom to look under "physician" and hire any physician.

Under Senator KENNEDY's plan, assume, to make a long story short, it is 2 o'clock in the morning. My youngest son Jeff, let's say he is 3 years old—actually he is 22 now, but he was 3—and let's say he has a 103-degree fever. I am never spooked fever until when I see it in my own children. When my children are sick, like any father, I begin to get nervous.

Under Senator KENNEDY's plan, I get out the telephone book and I look under "physician." I am not interested in a lawyer. A lawyer cannot do me any good. If I do not get help quickly, I may want to look up and call a preacher. I figure he might do me good, but a lawyer is not going to do me any good.

Under Senator KENNEDY's plan, I get out the phone book and look up "physician" and "services." Under his plan, I have to call people up and say: I know it is 2 o'clock in the morning, but I am in such and such HMO. Are you a member of my network? Do you participate in the program I participate in? They may or they may not. Most of them do not. In fact, if one goes down the list and picks the biggest network available in Washington, DC, only a very small fraction of the doctors listed in the phone book are members of that network.

How does our plan work? My wife and I have put money into our medical savings account. We can have it in one of three forms. We can do it with a checking account. This is an actual medical savings account program by Golden Rule Insurance. They give you a checking account, out of which you pay medical bills.

This card is through Mellon Bank, and this is a medical savings account. It is a MasterCard.

This is through Visa, and it is a medical savings account from American Health Value.

It is 2 o'clock in the morning, and I have a sick child. Under our plan, I call up and I have to ask only one question: Do you take a check? Do you take MasterCard? Do you take Visa? If he does, that doctor is my doctor.

I picked a page of the phone book and had my trusty aides call. This is on page 1017 of the DC phone book. On page 1017 of the DC phone book, there is not one doctor on that page who will not take a check. There is not one doctor on that page who will not take a MasterCard. There is not one doctor on that page who will not take Visa. In other words, under the Republican plan, if your baby is sick, you can go to any doctor. If your baby is sick, you choose.

What is freedom? Freedom in health care is not the ability to have a Government bureaucrat second-guess the HMO which is second-guessing your doctor. That is not what freedom is about. Freedom is not being able to have a lawyer who can sue the HMO

which is second-guessing the doctor and sue your doctor. That is not what freedom is about.

Freedom is about the ability to fire your HMO. Freedom is about the ability to choose. Why don't we have a situation where we make everybody go to one kind of grocery store and we have the Government regulate it? We can set up the ability to sue them. We do not do that because, basically, it does not work. That is how we run Government, and that is why it works so poorly.

If a grocery store does not sell what I like, I do not go there. If people do not clean my shirts or if the gas I put in the car makes it run poorly, I go to another station and buy another kind of gasoline. All through my life I exercise my freedom to choose. What the Republican plan brings to health care is the freedom to choose.

We have gone so far down this road, where we are making American health care look like this, that even our hometown doctors are talking about joining labor unions because they want somebody to help them negotiate with the bureaucrat, they want somebody to help them negotiate with the HMO, and they want some ability to protect themselves from lawsuits.

Is that what we want in American health care? I don't think so. I think we want freedom. We want people to have the right to choose. What our bill does is do that. It gives you an opportunity to hire anybody you want to hire, to pick up any phone book in any city—I have here a phone book from Atlanta, GA. Again, you open up the part of the phone book that has to do with the listing of physicians, and any time you pick up the phone, when you have a medical savings account, you can say: Do you take a check? Do you take MasterCard? Do you take Visa? If they do, you are in.

Under our bill, you do not find yourself without health care because you are a member of some medical group in Washington but you happen to be in Atlanta when you get sick. Under our plan, the basic currency we use, which is U.S. currency, is taken everywhere.

So that is the choice I think people want. This Democrat bill is not freedom. It almost abuses the English language to call this a Patients' Bill of Rights.

What kind of right do you have in health care when you are guaranteed the right to pick your own lawyer? The right you want in health care is the right to pick your own doctor. The right you want in health care is the right to pick your hospital. The right to choose in health care is the right to say: I don't like how I am being treated. I don't like the kind of service being provided. I think your cost is too high, I think your quality is too low, and I am going to leave.

Those are not freedoms guaranteed in Senator KENNEDY's Patients' Bill of Rights. His freedoms are: Look, if you are not happy with the quality of serv-

ice, then you wait right here—it may take several hours or you may have to come back on Tuesday at 4 o'clock—but we will have a person from Health and Human Services, and they will listen to you and they will talk to you. If you are not happy, you can meet with them. You will have to sign some forms. They will want to look at your medical records; they will go through them.

It may take weeks and weeks and months and months and years and years, but under Senator KENNEDY's bill you will have these bureaucrats who will be protecting you. That is freedom to Senator KENNEDY.

Then if that fails, Senator KENNEDY said: Well, another freedom you have, you have the freedom to sue.

So let's say you have this terrible health care problem, and you or someone you love may be on the verge of death. What Senator KENNEDY's freedom is that first of all, you can talk to this bureaucrat. You may have to come back next Wednesday. You may have to wait in line. You will have to fill out a lot of forms, but he will be there for you at some point. But if that doesn't work, then you can hire a lawyer, and you can sue. You may die, your loved one may die, but you will have a bureaucrat who will have been there. Maybe they did not make it in time—they meant to be there—but they were there for you. And then you can sue somebody if all that happens. That is what their "freedom" is about.

Our freedom is the right to choose, not a lawyer, but a doctor. If your baby is sick, you have the right to choose the doctor. You can pick up the phone, pick up any Yellow Pages across America, look up in the Yellow Pages under "physician," and then you can pick whoever you want. Under our bill, you can call them up and say: Do you take a check? Do you take MasterCard? Do you take Visa?

If you are covered under our plan, you have the right to choose a program that will let you choose a doctor. So if you think your HMO is doing a good job, you can stay in your HMO. But if you do not think they are doing a good job, you do not have to wait in line to talk to a bureaucrat, you do not have to hire a lawyer, you just simply say to them: You are not doing a good job, and you're fired.

If you like Senator KENNEDY's freedom, you want his bill. If you like our freedom, then you want our bill.

What is real freedom? It is the right to choose.

I thank my colleagues for their patience.

I see the leader is here on the floor. I yield the floor.

Mr. LOTT addressed the Chair.

The PRESIDING OFFICER. The majority leader is recognized.

Mr. LOTT. Would the Senator from Texas respond to a couple questions?

Mr. GRAMM. Sure I would.

Mr. LOTT. This is the Kennedy-care stethoscope you have there demonstrated on that board?

Mr. GRAMM. If I may, what I first have here is the Kennedy bill that we call the Clinton health care bill which, as our leader will remember, we debated on the floor for 2 years. This bill was their bill where, if we would just force every American to go into a health care purchasing collective and let Government make the decision for them, they were going to guarantee that everybody would have coverage. This is what they wanted 3 years ago. We defeated that because we did not want our mama talking to some bureaucrat when she got sick.

What they want to do is set up a system where if you have a patient who wants to be in the room with their doctor, they find themselves in a room with their doctor and a gatekeeper. Senator KENNEDY would help them by putting a bureaucrat and lawyer in the examining room with them.

Mr. LOTT. Let me ask you the critical question. For the average person out there—senior citizen who is worried about their health care—they are in an HMO or managed care organization and they have a problem and they want that problem dealt with, this very graphically shows what the problem is with the bill. It winds up that a bureaucrat is involved and a lawyer is involved.

What I want to know is, the alternative bill that has been developed by you and Senator NICKLES and Senator COLLINS and Senator SANTORUM, Dr. FRIST, and others, does it provide a way for that patient's problem to be dealt with? Is it a timely issue? Is it dealt with in a way where lawyers are not necessary?

Mr. GRAMM. Let me give you a concrete example. Under the Kennedy bill, if you are not happy with the kind of health care you are getting, you can meet with a Government bureaucrat. You may have come back—

Mr. LOTT. I know that makes everybody feel good.

Mr. GRAMM. You might have to wait in line and fill out a lot of forms, but they will be there, potentially, to help you. Then if that does not happen, you can hire a lawyer, you can choose any lawyer you want, and then you can sue.

Under our bill, what we do is we get rid of this. Under our bill, we give you this. What we let you do, if you are not happy with your HMO, instead of fooling around with a bureaucrat and lawyer, you just simply say to your HMO: You're fired. You set up a medical savings account, where for care beyond \$3,000 a year you have an insurance policy; and then you and your employer put money in, up to \$3,000 a year, out of which you pay medical expenses, through a check. These are various medical savings accounts that are now available through MasterCard and Visa.

So what it enables you to do is, if, at the end of the year, you did not spend the \$3,000, it belongs to you, and you spend it on other things.

Mr. LOTT. You give the patient that choice. They can choose to go with an

MSA account. They can choose the doctor they want.

But again, I want to ask the question, what if that person decides to stay in their managed care organization and a problem develops? Under your bill, there is a review process—an internal and external process—that has a specified period of time in which action has to occur; is that correct?

Mr. GRAMM. That is exactly right. We have a time-sensitive system for decisionmaking. But beyond that, we give the people, if they are not happy with their HMO, the ability to go somewhere else.

As you know, Mr. Leader, nothing makes somebody providing a service do a better job than to know that you can say to them, if they are not doing the job: You're fired.

Mr. LOTT. All right, sir. I just wanted to emphasize those points. You always do an excellent job with your cards and even your unusual stethoscope.

Let me talk about the issue of where we are. First of all, I think it is very important that we in the Senate act to do the people's business. This time of year, every summer, the Senate is very much involved in passing the annual appropriations bills—the bills that do keep the Government going, bills that have many programs that the administration has asked for and, quite frankly, many programs that the American people rely on.

We are going to have four votes this afternoon, trying to bring up four different appropriations bills to try to get the people's business done: the agriculture appropriations bill, the transportation appropriations bill. So many of us in this country depend on an improved transportation infrastructure. I know that is true in my State and a lot of other States. We have dangerous bridges, narrow, two-lane, hilly roads. We have interstate systems that are in disrepair. We have mass transportation systems that need additional systems. All of that is in the transportation appropriations bill, which we hope to have considered in short order by the Senate.

We have the Commerce-State-Justice appropriations bill. This is a bill that has to do with everything from fisheries in this country to foreign policy to law enforcement. Certainly, we need to get that bill up. We need to have all three of those bills done before this week is out.

Another one is the foreign operations appropriations bill, a bill that has been masterfully put together by the members of the appropriations subcommittee in a bipartisan way, under the leadership of Senator MCCONNELL of Kentucky, a bill that probably could go through here on a voice vote. Yet it appears that these appropriations bills are going to be delayed or obstructed.

The one that is presently pending before the Senate, and has been here now for this being the third week, is the agriculture appropriations bill, a bill that

is so important to our farmers in America and important to our consumers and to our children and to the poor people in this country. This bill does provide the farm programs, but it also has programs such as food stamps and school lunches and the Women, Infants, and Children Program. It is the one that determines whether or not in many instances the American people get access to the farm products from our farmers, who are the geniuses of the world in terms of production and what they have done in our lifetime to provide quality high protein food. They have done a magnificent job.

Right now, they have fallen on somewhat hard times. For the second year in a row now we will see a significant downturn in farm production in terms of money that comes to the farmers. This is being brought about by depressed prices, by the fact that we have not been opening up new markets, the fact that we have let countries block our farm products from China to Japan as well as Europe and get away with it. In the case of Europe, they are systematically ignoring WTO decisions with regard to bananas. Now we have the impending problem with beef.

So at a time when our markets are not being expanded and opened up, at a time when prices are depressed, farmers are looking for any sign of hope and encouragement. And yet here we are, for the third week, tangled up with an unrelated issue to agriculture.

This is not a small bill. This is \$60.7 billion for agriculture in America. There is a strong feeling that there is probably going to be a need for additional disaster assistance. I saw where some States right now are looking at another serious drought. You add that on top of depressed prices, declining markets instead of growing markets, and now a drought on top of that, you have the prescription for a disaster.

So we may have to come back and take a look at that later on this year. But farmers need some encouragement right now. They need to know what they can depend on.

The schools need to know what they are going to be able to count on in the next school year that begins in August, by the way, not at the beginning of the next fiscal year. They need to know what they are going to be able to count on.

So we have had this delay because an agreement can't be reached as to how to bring up the Patients' Bill of Rights. Frankly, for 8 months I have been trying to find a way to do just that. I have offered repeated suggestions—the fairest one of all probably just to have a jump ball and say, OK, we will begin here and at a date certain, after a reasonable period of time, we will be through with it. But we tried all kinds of variations.

I read into the RECORD last week the complete unanimous consent agreement I had suggested on Thursday that would have allowed us to bring it up, would have had a reasonable time for

consideration, 2 hours on first-degree amendments, 2 hours on second-degree amendments. I don't know how I could be any fairer. That, too, was rejected.

So I have tried repeatedly to make this happen. Add to that that this is a charade. This is a farce. This is not for real. So not only are the farmers being taken advantage of, they are being played with. They are being laughed at. Every Senator knows, men and women, Republican, Democrat, regardless of region, no amendment that is added from the Patients' Bill of Rights to the agriculture appropriations bill will ever see the light of day. It will be sheared like wool from a sheep before it gets to the conference just the other side of the Rotunda. It will not happen—not the Feinstein amendment, not some other amendment, not the Kennedy alternative. It will not be a part of the agriculture appropriations bill and shouldn't be. It is still legislating on an appropriations bill. It is an unrelated, nongermane amendment that is being insisted on by, I think, really a few on the Democratic side of the aisle.

So this is a farce, ladies and gentlemen. We should no longer allow the people's business to be shunted aside and delayed and obstructed and held up by this kind of activity. We should treat it for what it is. It is a charade. It is a farce. But it is not a happy one. It is a sad one.

I encourage my colleagues today on both sides of the aisle, don't be a part of this. We should summarily dismiss as frivolous these amendments that are being added or offered to be added to this agriculture appropriations bill. Maybe they are substantive. Maybe some of them have merit. But to offer them here, who are we kidding? Nobody, nobody in this room. I think most Americans know this is not a serious effort.

Can we work out a way, an agreement to bring this up for a reasonable period of time and still get our work done in terms of the appropriations bills and other legislation that is pending, some of it in conference, some of it waiting to come before the Senate? The bankruptcy reform package is waiting for action. The flag burning constitutional amendment has been passed by the House of Representatives. Yet we are over here tangled up in a procedural activity.

I think we should not be a part of that. I am going to insist that we dismiss it and that we move on and get our work done. I really hope and reach out to the leadership on the other side of the aisle and say: Let's see if we can't find a way to deal with this at another time in a way that is fair to all sides. Let's go on and pass these appropriations bills. Several of them that I have not even mentioned here today we could probably move through very quickly, in a limited period of time, with limited amendments, because there are just not going to be a lot of amendments offered, and do some of the other business, including the nomi-

nations that we all know should be at least given an opportunity to be considered.

I just wanted to lay that marker down and get that word firmly planted in our lexicon. This procedure is a farce. It will not happen.

And by the way, just to make sure I was on totally safe ground, it always behooves one to check with the appropriations chairman to make sure he agrees. He agrees. He obviously is offended and upset that his bills out of the Appropriations Committee are being delayed, and he agrees we should not have these legislative matters, these extraneous matters being used to delay very important appropriations bills so that we can get our work done.

By the way, the President is out there saying: Let's work together. Great, let's do. I am ready for deeds, not words. I want us to have Medicare reform, but the commission, the bipartisan commission's work was basically rejected. The President didn't allow one of his nominees of the commission to vote for it. Yet we had Democrats and Republicans who were for it. The Finance Committee, I believe, is willing to move forward in a constructive way. If he wants to work on some of these issues, we would certainly be glad to find the time to do it.

Madam 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. LOTT. Madam President, I ask unanimous consent that the order for the quorum call be rescinded.

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

Mr. LOTT. Madam President, what is the pending business?

#### CONCLUSION OF MORNING BUSINESS

The PRESIDING OFFICER. Morning business is closed.

#### AGRICULTURE, RURAL DEVELOPMENT, FOOD AND DRUG ADMINISTRATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2000

The PRESIDING OFFICER. The Senate will resume consideration of S. 1233.

The legislative clerk read as follows:

A bill (S. 1233) making appropriations for Agriculture, Rural Development, Food and Drug Administration, and Related Agencies programs for the fiscal year ending September 30, 2000, and for other purposes.

Pending:

Feinstein Amendment No. 737, to prohibit arbitrary limitation or conditions for the provision of services and to ensure that medical decisions are not made without the best available evidence or information.

The PRESIDING OFFICER. The Feinstein amendment is the pending business.

AMENDMENT NO. 1103 TO AMENDMENT NO. 737

Mr. LOTT. Madam President, I send a second-degree amendment to the desk to the pending Feinstein amendment.

The PRESIDING OFFICER. The clerk will report the amendment.

The legislative clerk read as follows:

The Senator from Mississippi [Mr. LOTT] proposes an amendment numbered 1103 to amendment No. 737.

Mr. LOTT. Madam President, I ask unanimous consent that reading of the amendment be dispensed with.

The PRESIDING OFFICER. Is there objection?

Mr. FEINGOLD. I object.

The PRESIDING OFFICER. Objection is heard. The clerk will read the amendment.

Mr. LOTT. Madam President, I ask unanimous consent that reading of the amendment be dispensed with so that I may explain briefly what is in this amendment, and if the Senator from Wisconsin wishes, he can continue the objection. I will clarify it for those who are curious about exactly what that amendment is.

The PRESIDING OFFICER. Is there objection?

Without objection, it is so ordered.

Mr. LOTT. Madam President, I just offered the Kennedy health care bill, the identical text of amendment No. 703, which was offered by Senator DORGAN to the agriculture appropriations bill. I hope that our colleagues on the other side of the aisle will let this go forward so that we can take appropriate action.

I wanted to explain that. If the Senator insists, the reading can continue.

Mr. FEINGOLD. I thank the majority leader. I have no objection at this point.

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

Mr. LOTT. Madam President, again, I did offer the Kennedy health care bill to the agriculture appropriations bill. My thinking is that rather than doing this piecemeal, let's go ahead and deal with the overall Democrat bill dealing with the Patients' Bill of Rights. In order to make sure it is properly considered, I will advocate cloture and I will, in fact, vote for cloture. I think that way we can deal with this issue straight up, not playing around with it.

I emphasize again that this is a farce. I am treating it accordingly. When both sides really want to get serious about sitting down and working out a way to consider this bill separately as a legislative vehicle, I will be glad to do that. But it should not continue to tangle up the appropriations bills. I believe Senator DASCHLE and I really want to get some work done this week for the benefit of the country. I am convinced that he has that intent. By taking this action, I think we can still pass some appropriations bills this week and clear our calendar of a lot of nominations.