

example, China agreed to a tariff rate quota on wheat of 7.3 million metric tons for its first year of membership in the WTO, increasing to 9.6 million tons in 2004. This contrasts with recent annual import of wheat at around two million tons. Ten percent of the tariff rate quota will be allocated to non-state trading entities. If state trading entities do not use their portion of the quota, the unused part will be given to non-state entities. Tariff rate quotas at similarly high levels will also be in effect for other commodities such as corn, cotton, rice, and soybean oil.

Third, tariffs themselves will be cut significantly. By January, 2004, the overall average for agricultural products of importance to the United States will drop from 31 percent to 14 percent. Beef goes down from 45 percent to 12 percent for frozen and to 25 percent for fresh. Pork drops from 20 percent to 12 percent. Poultry goes from 20 percent to 10 percent.

Fourth, foreigners will have the right to distribute imported products without going through a state-trading enterprise or middleman.

Fifth, China has committed not to use export subsidies for agricultural products. They have also committed to cap, and then reduce, trade-distorting domestic subsidies.

Sixth, there are several provisions that most people think apply only to manufactured goods, but, in fact, apply to agriculture as well. The United States can continue to use our non-market economy methodology in anti-dumping cases for 15 years, an important protection against dumped Chinese products. Also, for the next 12 years, we can take safeguard measures against specific products from China that cause, or threaten to cause, disruption in our market.

In short, once we grant China PNTR and the WTO accession process concludes, our farmers, ranchers, and food processors can begin to take advantage of vast new opportunities in China. Americans need to move aggressively to follow-up on these Chinese commitments. And we in the Congress and in the Executive Branch must put resources into monitoring closely Chinese compliance with those commitments.

Following my own advice about follow up, I will lead a delegation of Montana ranchers, farmers, and business people to China in December. I encourage all my Congressional colleagues to do likewise. I have also sent a letter to Chinese Premier Zhu Rongji insisting that China fully comply with its agriculture commitments.

We have a lot to do in the Congress this year and next to help our farm economy. Approving PNTR is one important part of that agenda.

Mrs. FEINSTEIN. Mr. President, I would like to explain why I oppose all amendments offered to H.R. 4444, a bill to establish Permanent Normal Trade Relations (PNTR) with China.

Much is at stake here; the effects of this vote may be felt for years to come.

I am convinced that amendments at this stage create a procedural problem that could derail passage of this important bill. Adopting any amendments would mean sending this bill to conference, where it could become mired in wrangling over differences of language and content. It is clear to me that we do not have time remaining in this Congress to resolve a bicameral conflict over this bill. We can allow nothing to interfere with what may be this Congress's most important decision concerning China.

I am convinced we must not let our focus be drawn away from the real point in question: pure and simple, this vote is about deciding whether or not the United States wishes to join with the world community in having normal trade relations with China, and whether we are prepared to conduct our dealings with China according to the terms and conditions established by that community under the World Trade Organization framework (WTO).

This vote is about protecting U.S. interests in an increasingly competitive global marketplace and about ensuring that American workers, managers, entrepreneurs, and investors do not miss out on the opportunities that are bound to grow as China brings itself further into the modern world.

I do not think we further U.S. interests by undermining this nation's ability to function effectively in the world's most important multinational trade organization, or by cutting Americans off from the full benefits of WTO membership.

This is what will happen if we pass a bill that does not conform to WTO requirements, or if we are forced to send the bill to conference, and fail to pass a bill, at all. I believe it is in America's best interests that this body pass a clean, focused bill establishing permanent normal trade relations with China that is the same as the House bill and does not need conferencing.

Mr. THOMPSON. Mr. President, I ask unanimous consent that at 10 a.m. on Wednesday there be 60 minutes for closing remarks for two amendments, with the following Senators in control of time: Senator ROTH, 15 minutes; Senator MOYNIHAN, 15 minutes; Senator BYRD, 15 minutes, Senator Bob SMITH, 15 minutes. I further ask consent that the vote on the pending Byrd amendment occur immediately at 11 a.m., to be followed by a vote in relation to division 6 of Senator SMITH's amendment, No. 4129.

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

#### MORNING BUSINESS

Mr. THOMPSON. Mr. President, I ask unanimous consent that there now be a period for the transaction of routine morning business with Senators permitted to speak for up to 10 minutes each.

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

#### SENATOR SLADE GORTON'S 100TH PRESIDING HOUR

Mr. LOTT. Mr. President, it is a long-standing tradition in the Senate to recognize and honor those Senators that serve as presiding officers of the Senate for 100 hours in a single session of Congress. Today, I have the pleasure to announce that Senator SLADE GORTON is the latest recipient of the Senate's coveted Golden Gavel Award.

This Golden Gavel Award is not the first or even the second for Senator GORTON but is the sixth. Senator GORTON is the first Senator in the history of the Golden Gavel Award to attain the six gavel mark. This is a great achievement.

On behalf of the Senate, I extend our sincere appreciation to Senator GORTON and his staff for their efforts and commitment to presiding duties during the 106th Congress.

#### SENATOR WAYNE ALLARD'S 100TH PRESIDING HOUR

Mr. LOTT. Mr. President, today, I have the pleasure to announce that Senator WAYNE ALLARD has achieved the 100 hour mark as presiding officer. In doing so, Senator ALLARD has earned his second Golden Gavel Award.

Since the 1960's, the Senate has recognized those dedicated Members who preside over the Senate for 100 hours with the Golden Gavel. This award continues to represent our appreciation for the time these dedicated Senators contribute to presiding over the U.S. Senate—a privileged and important duty.

On behalf of the Senate, I extend our sincere appreciation to Senator ALLARD and his staff for their efforts and commitment to presiding duties during the 106th Congress.

#### VICTIMS OF GUN VIOLENCE

Mr. ROBB. Mr. President, it has been more than a year since the Columbine tragedy, but still this Republican Congress refuses to act on sensible gun legislation.

Since Columbine, thousands of Americans have been killed by gunfire. Until we act, Democrats in the Senate will read the names of some of those who have lost their lives to gun violence in the past year, and we will continue to do so every day that the Senate is in session.

In the name of those who died, we will continue this fight. Following are the names of some of the people who were killed by gunfire one year ago today.

September 12, 1999:

Arthur Adams, 41, Philadelphia, PA; Anita Arrington, 36, Charlotte, NC; Robert Bason, 21, Detroit, MI; Keith Brisco, 23, Chicago, IL; Shiesha Davis, 19, Detroit, MI; Clinton Dias, 24, Baltimore, MD; Steve Esparza, 15, San Antonio, TX; Friday D. Gardner, 21, Chicago, IL; Tony M. Gill, 28, Gary, IN; Elaine Howard, 47, Detroit, MI; Greta

L. Johnson, 33, Memphis, TN; Rickey D. Johnson, 36, Memphis, TN; Willie Johnson, 20, Miami, FL; Roberto E. Moody, 30, Seattle, WA; Donald Morrison, 20, San Antonio, TX; Deric Parks, 23, Washington, DC; Harry R. Penninger, 69, Memphis, TN; Albert Perry, 31, Detroit, MI; Artemio Raygoza, 22, San Antonio, TX; Douglas M. Stanton, 33, Chicago, IL; Rodrick Swain, 24, Houston, TX; Ramon Vasquez-Ponti, 56, Miami, FL; Damon Williams, 21, Kansas City, MO; Derrion Wilson, 19, Memphis, TN; Margaret Wilson, 52, Dallas, TX; Dwayne Wright, 28, Detroit, MI; Unidentified Male, 18, Norfolk, VA.

One of the gun violence victims I mentioned, 20-year-old Donald Morrison of San Antonio, was shot and killed one year ago today when an irritated driver followed Donald into a convenience store parking lot and shot him in the head.

Another victim, 33-year-old Greta Johnson of Memphis, was shot and killed one year ago today by her husband before he turned the gun on himself.

We cannot sit back and allow such senseless gun violence to continue. The deaths of these people are a reminder to all of us that we need to enact sensible gun legislation now.

#### HEALTH CARE SAFETY NET OVERSIGHT ACT OF 2000

Mr. HATCH. Mr. President, I am pleased to cosponsor the Health Care Safety Net Oversight Act of 2000, which is an important step toward addressing a critical issue facing our country: the fact that over 40 million Americans lack health insurance.

While it is natural to question the need for any new commission, I believe this legislation is more than warranted given the fact that there is such a substantial number of Americans who are uninsured and there is to date no comprehensive solution to this problem.

Despite the hard work of Community Health Centers in Utah and throughout the Nation, and despite the many, many efforts of others who are working to improve health care delivery in hospitals, emergency rooms and clinics, two facts remain. First, it is deplorable that in a Nation as great as the United States, we still have so many people who lack basic health care services. And second, there is no national consensus on how this problem should be addressed by the public and private sectors.

It is obvious that we need to begin the process toward developing that necessary consensus, and I believe the Health Care Safety Net Oversight Commission's work will help us meet that goal.

I commend Senator BAUCUS and my colleagues for their work which has led to introduction of our bipartisan bill tonight. As the legislation progresses, I do want to work with them to improve a limited number of provisions in the

bill, including the funding source for the Commission.

#### THE MEDICARE BENEFICIARIES' CHOICE STABILIZATION ACT

Mr. SANTORUM. Mr. President, I rise today to address a matter of critical importance to our Nation's 39 million Medicare beneficiaries, 2 million of whom live in Pennsylvania alone. I speak of the current erosion of the Medicare+Choice program, a situation which demands attention by Congress and this administration.

Currently, more than 6.2 million Medicare beneficiaries are enrolled in the Medicare+Choice program, receiving high quality, affordable health care services through HMOs and other private sector health plans. Beneficiaries are choosing these plans because they typically provide a more comprehensive package of benefits (including coverage of prescription drugs), lower out-of-pocket costs, and a stronger emphasis on preventive health care services than the old Medicare fee-for-service system.

As my colleagues well know, for more than ten years Medicare beneficiaries have had access to this array of enhanced health benefits and options through the Medicare's risk contract program, and the success of this program was evidenced by the fact that beneficiaries signed up for Medicare HMO coverage in large numbers. From December 1993 through December 1997, enrollment in Medicare HMOs increased at an average annual rate of 30 percent. In states such as Louisiana, Pennsylvania, Ohio, and Texas, enrollment in Medicare HMOs increased even more rapidly. In December 1997, shortly after the enactment of the BBA, Medicare HMO enrollment stood at 5.2 million, accounting for 14 percent of the total Medicare population—up from just 1.3 million enrollees and 3 percent of the Medicare population in December 1990.

The success of the Medicare HMO program inspired Congress to establish the Medicare+Choice program in 1997 through the enactment of the Balanced Budget Act (BBA). In establishing the Medicare+Choice program, Congress had three goals in mind: (1) to build on the success of the Medicare HMO program; (2) to give seniors and persons with disabilities the same health care choices available to Americans who obtain their health coverage through the private sector; and (3) to further expand beneficiaries' health care choices by establishing an even wider range of health plan options and by making such options available in areas where Medicare HMOs were not yet available. Three years later, however, the Medicare+Choice program has not fulfilled its promise of expanding health care choices for Medicare beneficiaries. Instead, a large number of beneficiaries have lost their Medicare+Choice plans or experienced an increase in out-of-pocket costs or a reduction in benefits.

This disturbing trend is especially harmful to low-income beneficiaries, who are almost twice as likely to enroll in Medicare HMOs as are other Medicare beneficiaries. For many seniors and persons with disabilities who live on fixed incomes, having access to a Medicare HMO means that they can spend their limited resources on groceries and other daily essentials. Beneficiaries also like Medicare HMOs because they provide coordinated care and place a strong emphasis on preventive services that help them to stay healthy and avoid preventable diseases.

Mr. President, when Congress enacted BBA in 1997, plans were still joining the Medicare+Choice program and 74 percent of beneficiaries had access to at least one plan. But today, access dropped to 69 percent, with 2 million fewer beneficiaries having access to a plan. Next year, 711,000 Medicare beneficiaries will lose access to health benefits and choices as a result of Congressional underpayment and burdensome HCFA regulations.

In addition, many Medicare HMOs have curtailed benefits, increased cost-sharing and raised premiums. Average premiums have increased \$11 per month in 2000.

Two major problems are responsible for this outcome: (1) the Medicare+Choice program is significantly underfunded; and (2) the Health Care Financing Administration (HCFA) has imposed excessive regulatory burdens on health plans participating in the program. The funding problem has been caused by the unintended consequences of the Medicare+Choice payment formula that was established by the BBA, as well as the Administration's decision to implement risk adjustment of Medicare+Choice payments on a non-budget neutral basis. Under this formula, the vast majority of health plans have been receiving annual payment updates of only 2 percent in recent years—while the cost of caring for Medicare beneficiaries has been increasing at a much higher rate.

When plans withdraw from communities, beneficiaries are forced to switch plans, or in some cases revert back to the traditional Medicare program, which does not cover additional benefits like eye and dental care, or, more importantly, prescription drugs.

It is in response to this crisis in the Medicare+Choice program that I am pleased to be introducing The Medicare Beneficiaries' Choice Stabilization Act. This legislation will make numerous changes to the way Medicare+Choice rates are calculated and will seek to sensitize the funding mechanisms in the current Medicare system to the difficulties of health care delivery in all communities, and particularly in rural areas.

As the costs of providing care in some areas can be higher than the payments from Medicare, The Medicare Beneficiaries' Choice Stabilization Act will also give plans the opportunity to negotiate for higher payment rates based on local costs.