

is the economic consequences on the local city and towns and communities? What does this mean for their taxes? What does this mean for future royalties? What does this mean to Indian tribes? What does it mean for him to take these millions of acres and designate them a national monument? I may agree with each one. I disagree with the process.

Again, I think it is very much in violation of the Antiquities Act, very much in violation of the intentions of the Antiquities Act, very much an abuse of his office as President of the United States. There is no comparison to previous Presidents and what they have done.

I will have printed in the RECORD a list of all Presidents since the inception of the Antiquities Act, starting with Theodore Roosevelt, all the way through listing every President and the number of acres they had designated during their terms of office as national monuments. It shows no President has done as much as President Clinton, with the exception of President Carter when there was an enormous amount of land in the State of Alaska that was declared a national monument.

Other than that one act, President Clinton had exceeded any other President by multiples of at least two, three, four, or many times more. President George Herbert Walker Bush had zero acres. President Ronald Reagan had zero acres. President Jimmy Carter, I mentioned Alaska lands issued, so that was different. Gerald Ford had 86 acres. Richard Nixon had zero acres. Lyndon Johnson had 344,000 acres. President Clinton did more than 10 times L.B.J. John Kennedy did 26,000 acres; President Clinton did almost 5.7 million acres. John Kennedy did 26,000 acres. This was a Land grab, a power grab, but more than that, I believe it was an unconstitutional expansion of the Antiquities Act.

I think he exceeded his constitutional power and I regret it. I think it was a mistake. I think it shows contempt of Congress. Why did he wait until after the election? Possibly because there would be a real significant uproar in these States for failing to consult them.

Under the way President Clinton has misused and, I believe, abused the act, he has acted more like a emperor than President of the United States.

I ask unanimous consent a list showing President Clinton's use of the 1906 Antiquities Act and other Presidents and their use of the Antiquities Act in addition to copies of the Antiquities Act and the limitations and the situation dealing with Alaska and Wyoming be printed in the RECORD.

There being no objection, the material was ordered to be printed in the RECORD, as follows:

PRESIDENT CLINTON'S USE OF 1906 ANTIQUITIES ACT

William Jefferson Clinton (1993–Present)	Estimated acreage	Date established
Grand Staircase-Escalante National Monument ..	1,700,000	09-18-96

PRESIDENT CLINTON'S USE OF 1906 ANTIQUITIES ACT—Continued

William Jefferson Clinton (1993–Present)	Estimated acreage	Date established
Aquaria National Monument ..	71,100	01-11-00
California Coastal National Monument ..	7,000	01-11-00
Grand Canyon-Parashant National Monument ..	1,014,000	01-11-00
Pinnacles National Monument ..	7,900	01-11-00
Giant Sequoia National Monument ..	327,769	04-15-00
Canyon of the Ancients ..	164,000	06-09-00
Cascade-Siskiyou National Monument ..	52,000	06-09-00
Hanford Reach National Monument ..	195,000	06-09-00
Ironwood Forest National Monument ..	129,000	06-09-00
President Lincoln National Monument ..	2	07-07-00
Vermilion Cliffs National Monument ..	293,000	11-09-00
Craters of the Moon National Monument ..	661,000	11-09-00
Upper Missouri River Breaks ..	337,000	01-17-01
Pompeys Pillar ..	51	01-17-01
Carizzo Plain ..	204,000	01-17-01
Sonoran Desert ..	486,000	01-17-01
Kasha-Katuwe Tent Rocks ..	4,100	01-17-01
Minidoka International National Monument ..	73	01-17-01
U.S. Virgin Island Coral Reef National Monument ..	12,708	01-17-01
Buck Island Reef National Monument ..	18,135	01-17-01
Total ..	5,683,838	

PRESIDENTS AND THE ANTIQUITIES ACT

President	Total acreage
Theodore Roosevelt ..	1,529,418
William H. Taft ..	32,631
Woodrow Wilson ..	1,202,913
W.G. Harding ..	9,555
C Calvin Coolidge ..	2,634,226
Herbert Hoover ..	2,125,720
Franklin Delano Roosevelt ..	2,626,559
Harry S. Truman ..	27,954
Dwight D. Eisenhower ..	-22,530
John F. Kennedy ..	26,128
Lyndon B. Johnson ..	344,674
Richard M. Nixon ..	0
Gerald R. Ford ..	86
Jimmy Carter ..	55,975,000
Ronald W. Reagan ..	0
George Herbert Walker Bush ..	0
William Jefferson Clinton ..	5,683,838

ANTIQUITIES ACT

16 USC Sec. 431

TITLE 16—CONSERVATION

CHAPTER 1—NATIONAL PARKS, MILITARY PARKS, MONUMENTS, AND SEASHORES

Subchapter LXI—National and International Monuments and Memorials

Sec. 431. National monuments; reservation of lands; relinquishment of private claims

The President of the United States is authorized in his discretion, to declare by public proclamation historic landmarks, historic and prehistoric structures, and other objects of historic or scientific interest that are situated upon the lands owned or controlled by the Government of the United States to be national monuments, and may reserve as a part thereof parcels of land, the limits of which in all cases shall be confined to the smallest area compatible with the proper care and management of the objects to be protected. When such objects are situated upon a tract covered by a bona fide unperfected claim or held in private ownership, the tract, or so much thereof as may be necessary for the proper care and management of the object, may be relinquished to the Government, and the Secretary of the Interior is authorized to accept the relinquishment of such tracts in behalf of the Government of the United States.—(June 8, 1906, ch. 3060, Sec. 2, 34 Stat. 225.)

LIMITATION ON FURTHER EXTENSION OR ESTABLISHMENT OF NATIONAL MONUMENTS IN WYOMING

16 USC Sec. 431a

TITLE 16—CONSERVATION

CHAPTER 1—NATIONAL PARKS, MILITARY PARKS, MONUMENTS, AND SEASHORES

Subchapter LXI—National and International Monuments and Memorials

Sec. 431a. Limitation on further extension or establishment of national monuments in Wyoming

No further extension or establishment of national monuments in Wyoming may be undertaken except by express authorization of Congress.—(Sept. 14, 1950, ch. 950, Sec. 1, 64 Stat. 849.)

ALASKA NATIONAL INTEREST LANDS CONSERVATION

16 USC Sec. 3213

TITLE 16—CONSERVATION

CHAPTER 51—ALASKA NATIONAL INTEREST LANDS CONSERVATION

Subchapter VI—Administrative Provisions

Sec. 3213. Future executive branch actions

(a) No further executive branch action which withdraws more than five thousand acres, in the aggregate, of public lands within the State of Alaska shall be effective except by compliance with this subsection. To the extent authorized by existing law, the President or the Secretary may withdraw public lands in the State of Alaska exceeding five thousand acres in the aggregate, which withdrawal shall not become effective until notice is provided in the Federal Register and to both Houses of Congress. Such withdrawal shall terminate unless Congress passes a joint resolution of approval within one year after the notice of such withdrawal has been submitted to Congress.

(b) No further studies of Federal lands in the State of Alaska for the single purpose of considering the establishment of a conservation system unit, national recreation area, national conservation area, or for related or similar purposes shall be conducted unless authorized by this Act or further Act of Congress.—(Pub. L. 96-487, title XIII, Sec. 1326, Dec. 2, 1980, 94 Stat. 2488.)

Ms. STABENOW. Mr. President, I ask unanimous consent to speak for 15 minutes as in morning business.

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

PATIENTS' BILL OF RIGHTS

Ms. STABENOW. Mr. President, it is a great honor and privilege for me to be standing before the Senate to speak for the first time since becoming a Senator from the State of Michigan. I also am very humbled to be only the 40th Senator from our great State to ever serve in this institution. I am very proud of that.

I wish to speak about an important health care issue today and reference the fact that I have been involved in health care issues for over 20 years, starting, in fact, with my public service and involvement in politics, having been involved in an effort in my community, in Lansing, MI, to save a nursing home. We brought citizens together from all across the community, spoke out, and were able to keep that nursing home open that had been slated for closure. It was that beginning that got me

involved in the important issues of health care that affect our families.

As we begin the 107th Congress, I think we have a great opportunity to get things done for the people we represent. We have a 50/50 Senate, a divided House, and one of the closest elections we have seen in our history. Now is the time for us to reach across the aisle to colleagues on the other side, to work together on behalf of the families all of us represent.

I come to the floor today to talk about one of the most important issues confronting us as a Congress and one of the best ways for us to start the new year providing health care for the families we represent and that is the enactment of a strong Patients' Bill of Rights. I strongly believe that every one of our citizens, child to senior, has the right to quality, affordable health care. Whether we are talking about access to nursing homes and home health care or lowering the cost of prescription drugs for seniors and our families or a Patients' Bill of Rights, I am pleased to have been involved in those efforts, and will continue to be so, with my colleagues here in the Senate. In fact, health care is one of the top priorities because this is what I have heard from the people I represent in Michigan.

I would like to share a story with you, Mr. President, about the Luker family and their daughter, Jessica, of Royal Oak, MI. The Lukers' experience is a compelling example of the need for a strong Patients' Bill of Rights. I want to point to a replica of a picture of Jessica that I have with me here today.

Jessica was born in 1975 with a rare metabolic disorder that required vigilant medical care. In the spring of 1999, Jessica's condition had worsened and she was having an average of 60 seizures a month. Her doctor recommended surgery to prevent further seizures, and on May 12, 1999, she had this successful surgery. Her seizures were once again under control.

Unfortunately, a week later, on May 17, Jessica's family received a letter saying her insurance had been changed retroactively. The insurance company refused to cover the surgery because the Lukers had not received preapproval.

Jessica's mom, Tricia Luker, spent hours on the phone with the insurance company explaining the situation. They, in fact, did not find out about the change that had occurred May 1 until May 17. It was not possible for them to get preapproval for the surgery.

After hours and hours on the phone, unfortunately, the Lukers were forced to pay for the surgery out of their own pocket. And they are still paying today in 2001.

How could the Lukers know their insurance would change without receiving any advanced notice? How could the insurance company refuse to pay, using the bureaucracy to stand in the way of common sense?

The insurance change meant more difficulties for the Lukers. Jessica's specialist, who had been treating her for 14 years, was not a part of the HMO and was not allowed to continue to serve her. Again, the Lukers were forced to deal with the insurance company, to try to find a new doctor, and Mr. And Mrs. Luker spent hours on the phone, page by page, name by name, going through, calling doctors, hearing: No, no, no, to serving and treating Jessica.

Jessica's parents continued with her regular doctor and paid for the appointments out of their own pocket, while having insurance under an HMO.

On September 10, 1999, Jessica passed away. In the final days of her life, Tricia Luker talks about the fact that she wanted to be on the front porch, blowing bubbles and reading books to Jessica, which she loved, but instead she was fighting the insurance company bureaucracy to get her the treatment from the doctor who had been with her for 14 years.

Today, Tricia Luker's daughter Jessica is gone, but they are still paying the bills from the insurance company that refused to cover the treatment that Jessica needed. Jessica's tragic story demonstrates why we need a strong Patients' Bill of Rights, a bill that will help patients like Jessica who have complicated medical problems with access to specialists.

The bill would make insurance companies accountable for their decisions. It would afford the Lukers the opportunity to appeal what on its face seems unreasonable and lacking in common sense.

Throughout my campaign for the Senate, I shared Jessica's story with the people of Michigan. I pledged to bring a picture with me to the Senate and to keep my promise to Jessica's family, and to all of the families of Michigan, to do everything I can to pass a Patients' Bill of Rights.

Today I am taking my fight for Jessica to the Senate floor, and I hold great hope that this Congress, that this Senate, will do what others have failed to do—pass a strong Patients' Bill of Rights.

A small version of this picture of Jessica sits on my desk in my Senate office. It will remain there with me until, in fact, we pass a Patients' Bill of Rights. No family should ever have to go through what Calvin and Tricia Luker went through, trying to get their daughter care. In the memory of Jessica, I call on my Senate colleagues to make passing a strong Patients' Bill of Rights one of our top priorities.

I am very proud today to join with my colleagues, with our leader, Senator DASCHLE, to cosponsor the Patients' Bill of Rights and, in fact, this is the first bill that I am cosponsoring as a new United States Senator.

The bill today is the same legislation commonly known as the Dingell-Norwood bill that was passed overwhelmingly in a bipartisan way in the House

of Representatives. I was proud to be a cosponsor in my service in the House of Representatives last session, and I am proud to be an original cosponsor of this bill in the 107th Congress.

The legislation provides basic rights for patients to ensure access to care. Again, these are basic rights so that, regardless of your insurance, you know what the basic protections are for your family: Guaranteed access to emergency room care at the nearest facility; direct access for women to OB/GYN care; direct access to pediatricians; a guaranteed option for patients to select doctors outside of their plan, if necessary; coverage for clinical trials; access to medically necessary prescription drugs; and the right to an independent appeal for any denied claim.

Most importantly, this legislation will hold insurance companies accountable for decisions they make regarding patient care, and this is the most critical point.

I have spoken with families throughout Michigan and received countless letters, e-mails, and phone calls from people pleading with us to help them and to pass this bill. Jessica's is just one of the many tragic stories I have heard.

I want to mention just a couple of other names of people with whom I have worked in the State of Michigan who have been struggling with their families to get the care they have paid for and they deserve. Ardath and Frank Reagan of Holly, MI. Mr. Reagan became paralyzed from the waist down from a rare disease. His insurance company refused to pay for his surgery, saying he was not a good candidate. They told Ardath to put her husband in a nursing home. The insurance company's foot dragging forced her husband to wait before starting treatment and severely aggravated the situation. Today, fortunately, Mr. Reagan is making a full recovery after intense work on his behalf by his family.

Michael Pesendorfer from the Metro Detroit area—Michael's mother died of cancer. He has joined me on a number of occasions as well to speak out for a Patients' Bill of Rights. The insurance company delayed approval for treatment. They finally did get the approval for the procedure, but it was too late, and she died shortly after.

Susan and Sam Yamen from Birmingham, MI—I read their story on the floor of the House of Representatives last year—are an example of why we need the commonsense policy of saying you go to the nearest emergency room in a medical emergency.

Sam cut his leg with a chain saw from a business he operated. He had a severe leg injury and went to the nearest emergency room. The doctors were ready to operate to save his leg. They called the HMO, which said: Stop, you are in the wrong emergency room. They would not approve the surgery. The doctors said it was critical that it be done immediately to save the nerve endings in his leg. They would not approve the surgery in this emergency

room and he, unfortunately, had to be placed into an ambulance and taken across town to another emergency room where he sat for 9 hours before he could get any care and did not receive the surgery he needed. In fact, Mr. Yamen has lost his tree trimming business and much of the nerve endings and feeling in his leg. His family has been in great economic struggle as a result of this.

What these stories tell me is that patients enrolled in an HMO need basic protections and guarantees of adequate coverage. Our families are paying for the insurance. They need to get the care, and they need to know it is going to be there in an emergency.

I believe a strong Patients' Bill of Rights provides those protections and guarantees for coverage. Certainly, Jessica and her family and the families I mentioned and all of the others I talked to all across Michigan have stories that need to be addressed because they are not just stories; they are reality for too many people.

I am committed to reaching across the aisle to work with our colleagues

to pass this critical health care legislation. I know that in order to keep my promise to Jessica's family, we have to get to work and we have to work together. I am ready to work with everyone who shares my goals and the goals and the needs of the families whom I represent. I look forward to working on the legislation that has been introduced today and the opportunity for us to show clearly that we intend to work together for the people of our country by passing a strong Patients' Bill of Rights as quickly as possible.

Mr. President, I yield back the remainder of my time.

The PRESIDING OFFICER. The Senator from Missouri.

Mr. BOND. Mr. President, I ask unanimous consent that I be permitted to speak as in morning business for 6 minutes.

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

Mr. BOND. Mr. President, first, on behalf of my colleagues, permit me to extend a warm welcome to our new Senator from Michigan. It was an honor to be on the floor as she made

her first speech. I appreciate very much her dedication and enthusiasm and her expressed commitment and interest in working together. I assure her we will have many opportunities in the months to come. All of us are going to have to work together if we are going to make the kind of progress we wish.

(The remarks of Mr. BOND pertaining to the introduction of S. 29 are located in today's RECORD under "Statements on Introduced Bills and Joint Resolutions.")

ADJOURNMENT UNTIL 11:30 A.M.
TOMORROW

Mr. BOND. Mr. President, is there further business to come before the Senate at this time?

The PRESIDING OFFICER. Under the previous order, if there is no further business to come before the Senate, the Senate stands adjourned until 11:30 a.m. tomorrow.

Thereupon, the Senate, at 3:03 p.m., adjourned until Tuesday, January 23, 2001, at 11:30 a.m.