

These facilities are the same ones in my State who provide the lion's share of uncompensated care to the uninsured.

One of the hardest hit hospitals in my State is Mt. Sinai Medical Center in Manhattan. They stand to lose \$4.1 million by 2010.

This lost funding means Mt. Sinai Medical Center will be forced to take cost cutting steps:

First, delay completion of their inpatient electronic medical record rollout; second, they won't be able to expand their already crowded emergency room that provides over 100,000 patient visits a year; and third, they will scale back many free medical screenings and other programs for patients.

These are not the actions we want hospitals to take.

Hospitals need our help. The Medicare Payment Advisory Commission, MedPAC—which is a nonpartisan group—has said that in 2006, hospitals' Medicare margins nationwide were in the red at negative 4.8 percent.

In New York in 2006, rural hospitals were hit the hardest by low Medicare reimbursements with even lower margins of negative 8.2 percent.

After 7 consecutive years of overall negative margins, the hospitals in my State did little better than break even in 2006. It doesn't make sense to me that we would gut a source of training for high-paying jobs in this country at a time when we are bleeding jobs.

This is not just a New York issue. In July, 51 Senators signed a bipartisan letter to the Centers for Medicare and Medicaid Services, CMS, that opposed implementation of the capital IME. We need to pass my bill so that these cuts don't hurt all U.S. hospitals.

Now I want to speak briefly about the Medicaid Outpatient Clinic Regulation that my bill places a 6-month moratorium on.

For months I fought with CMS about this regulation. Unfortunately, they finalized it last week.

But, I am pleased that in the final version free-standing health clinics were saved from massive cuts. There were many clinics in New York that were saved from either closing their doors or saying no to their patients.

I want to talk about Ed, a 62-year-old Buffalo resident, who can only move his head due to his cerebral palsy. With the help of a free-standing clinic in Buffalo, called Aspire, Ed learned to operate his power wheelchair with his chin.

Even more amazing he can operate a computer using his chin. Ed spent 5 years mastering desktop publishing and then formed his own successful business.

If free-standing clinics were included in the final regulation, Ed could not attend Aspire of WNY's wheelchair clinic, where physical, occupational and speech therapists customize all sorts of things for him. Without that service, Aspire tells me that he would be completely immobile and not as independent.

Let me discuss another New Yorker that the Buffalo-based Aspire Clinic helped. In 1998, Aspire wanted a woman named Alice to have a colonoscopy. When she did, it was revealed that she had colon cancer. But luckily they found it in time and she had surgery to remove the cancer and now, 10 years later, she is doing fine.

Alice is just one of hundreds of individuals who receive primary medical care through these essential primary care clinics.

Enable, a Syracuse agency that serves children and adults with disabilities, told my office that they would have to stop providing physical and occupational therapy to more than 300 clients on Medicaid if the Rule had included freestanding clinics.

I wish CMS hadn't made this regulation final, but at least it isn't as bad as it could be. We will know the extent of pain that other clinics and hospital outpatient services may face on December 8, when the rule must be implemented.

Therefore, I hope that the Senate will pass the PATH Act. As we have heard, there are just too many terrible cuts underway in health care, and we need to be doing all we can right now to stop the bleeding.

I understand my colleague has objected. That is unfortunate. To wait another 3 months or 6 months at a time when our economy is in such dire shape will do severe damage to health care throughout the country. In my State of New York, for instance, the new Medicare Hospital Capital Indirect Medical Education payment policy is a disaster for teaching hospitals. It runs counter to what works in American medicine. It affects large and small communities. We have a desperate shortage of physicians, from primary care to surgeons. The country relies on academic medical centers. This clobbers them at a time when it should not have happened. Many of us believe this regulation was not within the purview of CMS to enact. They went ahead and did it. I would hope that maybe my colleague will reconsider. We will return to this issue when we come back in January, but some damage, unfortunately, will be done.

I understand why my colleague has objected. I regret it. There was no time to move in the Finance Committee because this regulation didn't take effect until very recently, having many bad affects. I will work hard and not rest until we overturn the regulation.

I yield the floor and suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mr. REID. I ask unanimous consent that the order for the quorum call be rescinded.

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

# UNANIMOUS-CONSENT REQUEST— S. 3689

Mr. REID. Madam President, with the daunting challenges we face on our road to economic recovery—and that will come; it is a question of when—there is no reason to wait for a new year, a new Congress and a new President. We could vote now. We could take action now. We can't solve our economic challenges with one vote, but we could get started. So I say, why wait. Every day that goes by, thousands of Americans lose their jobs. Thousands of homes are lost. Scores of companies file for bankruptcy. So why don't we staunch the bleeding, stop some of the pain, and begin to turn things around? We have before the Senate a comprehensive economic stimulus plan worked out with the Appropriations Committee, the Finance Committee, and the Agriculture Committee, that we could pass and we should pass. I wish to express my appreciation to the members of the Appropriations, Finance, and Agriculture Committees. They have worked very hard to put this package together under the leadership of Senators BYRD, BAUCUS, and HARKIN.

What do I mean by "comprehensive"? Instead of addressing just one part of our economic crisis, this legislation takes many steps that economists agree we need.

I ask unanimous consent that the Senate proceed to the consideration of Calendar No. 1122, S. 3689; that the bill be read a third time, passed, and the motion to reconsider be laid on the table, and there be no intervening action or debate.

The PRESIDING OFFICER. Is there objection?

The Senator from Arizona.

Mr. KYL. I object.

The PRESIDING OFFICER. Objection is heard.

Mr. REID. Madam President, we have a matter on which the objection was made. I did not cover it all, of course, in that matter. We have significant things in that piece of legislation that were objected to dealing with infrastructure; unemployment benefits; FMAP, which is the matter to give some fiscal relief to our States; and it would give help to the auto industry. So this is the type of issue on which I wish we could move forward. I understand my colleagues. They are not going to accept this.

I think the provision we have dealing with taking the money out of the financial bailout that we have, that the White House has, the Treasury Department has—I have talked on the floor over the last 2 days about that. There is no need to belabor that point. But it is too bad we could not move forward on that basis.

It is my understanding Senators LEVIN and BOND are going to try to come up with some alternative proposal. When they come up with that, I would be happy to see if there is any way we can move procedurally. That is not going to be easy with what is going

on in the House and, actually, what is going on here. But I will confer with my counterpart, Senator McCONNELL, and we will do what we can to move forward.

#### UNANIMOUS-CONSENT REQUESTS

Mr. REID. Madam President, I ask unanimous consent that we move forward on this bill, S. 3689—there is a provision in that dealing with what we call FMAP—that the FMAP provision be taken out, that it be considered as separate legislation, be read three times and passed, the motion to reconsider be laid on the table, and there be no intervening action or debate.

The reason that is so very important is that FMAP is something that every State—every State, all 50—is in desperate need of. No part of our country has proven immune from our economic struggles. We are all sharing the heavy burden of these difficult times. But few places are suffering, though, more than we are in Nevada.

Budget shortfalls in Nevada are causing deep cuts in bedrock programs the Government must provide, programs that help and protect children, senior citizens, and people with disabilities.

The State of Nevada has been forced to cap enrollment in Nevada Check-Up, our form of children's health insurance. The State recently had to institute cuts to provider reimbursement. What is worse, these cuts will not end here unless we act to provide fiscal relief by increasing the Federal Medical Assistance Percentage; that is, FMAP.

What are the consequences of inaction? It was reported in the media this weekend that due to the provider rate cut, University Medical Center in Las Vegas, our public hospital, is discontinuing outpatient cancer treatment. And that is not just for Medicaid patients, it is for all patients. It is not clear if all those patients will be able to afford chemotherapy elsewhere, but it is pretty clear they will not be able to.

Low-income children who need orthopedic treatment will have to leave Las Vegas altogether for services elsewhere. They will likely have to leave the State.

There is more to come. The cuts are not over. This is the way it is in many States around the country. The budget shortfalls are deep. When States have to cut provider reimbursement for some of the things I have outlined, they have real difficulties in making the safety net not be one that has big holes in it. States have found no choice but to look at cutting services such as mental health and cutting actual people from the program, adding to the ranks of the insured at the worst possible time.

We have been working in the Senate to provide help. The stimulus bill we introduced includes a temporary 8-percent FMAP increase to stave off these cuts. It will not fix the problem, but it may make a difference in ensuring that

our children are not without the care they need. I hope we can take that step.

The PRESIDING OFFICER. Is there objection?

Mr. McCONNELL. Madam President, reserving the right to object, this is a spending measure of \$37.8 billion which has not been considered by the Finance Committee. We should be asking the States to pay it back. We should require the States to agree to not raise taxes. For all of those reasons, Madam President, I object.

The PRESIDING OFFICER. Objection is heard.

Mr. REID. Madam President, I have one final consent request on which I would like to move forward. This is the matter dealing with automobiles. We know the issue before this body. There have been speeches given the last several days about where the automobile industry is. We have watched on national TV the congressional hearings that have taken place on this side of the Capitol and on the other side of the Capitol. We need to try to figure out some way to move forward.

We believe the best way to move forward is taking the money, as I have indicated, out of the so-called TARP money. I do not believe we need the legislation. I think—well, I don't know. I have talked to Secretary Paulson twice today. He knows he has authority to take money out of that; he just does not want to do it.

So I ask unanimous consent that the Senate proceed to the consideration of a bill I have at the desk, which is the text of title VI of S. 3689 regarding automotive industry assistance; that the bill be read a third time and passed, the motion to reconsider be laid on the table, and there be no intervening action or debate.

The PRESIDING OFFICER. Is there objection?

Mr. KYL. Madam President, reserving the right to object, the longer this legislation has been lying around, the more objections have been heard to it. So, yes, I do object.

The PRESIDING OFFICER. Objection is heard.

The Senator from Missouri.

Mr. BOND. Madam President, the distinguished majority leader was kind enough to mention the fact that several of us on our side have been working with leading Members on his side of the aisle to come up with a compromise proposal that would come to the aid of the auto companies which are facing a very serious situation, without mentioning specific ones or others, but to say this is a critical time to move to prevent perhaps the bankruptcy or the disappearance of a major auto company, which would cause chaos in our country. Over 3 million jobs are related to the auto industry—from the auto assembly plants, to the auto dealerships, to the parts suppliers.

So we have been working on a bipartisan basis. On my side of the aisle, Senator VOINOVICH and I have been

working with others on the Democratic side. We took the basic construct of the measure the majority leader had introduced. We took the money out of a previously passed bill, which would not cause as much concern down Pennsylvania Avenue, and we provide that the money will go back into that program as it is returned.

In my view, it is essential we work something out. I will tell the majority leader we have made great progress. We are down to the point now where wording challenges are about the only remaining things to deal with. I strongly believe it is in the interest of the country, particularly all of those families whose jobs depend upon the auto industry, and the States, the local governments, and the Federal Government to move something forward.

So I ask unanimous consent that at a time to be determined on Thursday, November 20, the Senate proceed to the immediate consideration of a bill to be introduced by Senators BOND and VOINOVICH and others; I further ask that there be no amendments in order, with 2 hours of debate equally divided, and following the use or yielding back of the time, the bill be read a third time and the Senate proceed to a vote on passage, and that if there are not 60 votes in the affirmative, the bill be placed on the Senate calendar.

The PRESIDING OFFICER. Is there objection?

Mr. REID. Reserving the right to object, Madam President, we have had no hearings. We have no text. I know my friend, Senator BOND, is a man of faith. I think I am too. But this is carrying it a little too far. We do not know anything about this. I look forward to a piece of legislation we can look at. Hopefully, it can be done tonight or tomorrow, and we will be happy to look at it.

I have had many conversations today and yesterday with the senior Senator from the State of Kentucky, Mr. McCONNELL, and we understand the importance of this issue. We will try to work to move forward on it. But I want everyone to understand, no matter how hard we work, how hard we try, the House of Representatives is going home tomorrow. OK. They are leaving.

I understand the importance. But I would hope that in addition to understanding the importance, we have to face reality. The reality is, we have tried a number of different approaches.

I will be happy to look at the approach my friend from Missouri has. He is a hard-working Senator. I understand how hard he works. He is a real advocate for doing what he thinks is appropriate for his State and our country.

Senator LEVIN and I have had hours of conversation regarding this issue. Every conversation I have with him he mentions the name of the Senator from Missouri. So I understand what this is all about, but, recognizing we have had no hearings, we have no legislation, I object.