included education cuts of \$1.76 billion, which would eliminate 40 programs and cut an additional 16. I am thankful to my colleagues on the Senate Appropriations Committee for restoring much of this funding. Going forward, we must continue to use fiscal restraint, but we must balance this with the need to invest in critical priorities.

I look forward to working with my colleagues on initiatives to encourage job growth, provide assistance for workers who have lost their jobs, and help alleviate the economic strain that has impacted most Americans. I urge all of my colleagues to add their energies to these efforts.

The PRESIDING OFFICER. The Senator from North Dakota is recognized.

Mr. DORGAN. Mr. President, my understanding is that the Senator from Nevada is going to propound a unanimous consent request. I will yield to him for that purpose and ask unanimous consent that I be recognized immediately thereafter.

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

The Senator from Nevada is recognized.

UNANIMOUS CONSENT REQUEST— S. 2538

Mr. REID. Mr. President, I ask unanimous consent that the Senate proceed to the immediate consideration of Calendar No. 385, S. 2538, a bill to provide for an increase in the Federal minimum wage; that the bill be read the third time and passed, and that the motion to reconsider be laid upon the table.

Mr. GREGG. I object.

The PRESIDING OFFICER. Objection is heard.

Mr. REID. Mr. President, I do this following the statement of the Senator from Hawaii, who has certainly laid out a timetable and a reason for doing the minimum wage bill. Senator KENNEDY was on the floor yesterday and did a magnificent job in explaining the need for it. I am sorry that my friends objected.

I yield the floor.

The PRESIDING OFFICER. The Senator from North Dakota is recognized.

Mr. DORGAN. Mr. President, are we in morning business at the present time?

The PRESIDING OFFICER. Yes.

Mr. DORGAN. I ask unanimous consent to speak for as much time as I may consume.

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

UNFINISHED BUSINESS

Mr. DORGAN. Mr. President, I mentioned yesterday that the two most powerful words in the Senate are "I object." They have been used repeatedly in recent months, and especially in recent days, as we have tried toward the end of this Senate session to pass legislation that really does need doing. We

are discovering that we have a number of people in the Senate who just don't want to move forward on some of these issues.

I think the American people wonder, from time to time, whether this Government is very relevant in their lives. I think prior to September 11, 2001, people wondered. Then, when the terrorist attacks occurred, I think people understood that on homeland security and a range of other issues, they do rely on the Government to do certain things to protect them.

We have come to a point now where there is so much unfinished business, so much left undone, as we near the end of this session of the Congress. I think the American people have a right to ask some pretty tough questions about who is doing what and who is objecting to what. Most families sit around the supper table—or the dinner table in some parts of the country-and talk about their lives. What they talk about are not statistics or abstractions; they talk about the things that are important in the lives of their families. They wonder, do we have good jobs? Do our jobs have good security? Are we paid a fair wage? Do grandpa and grandma have access to good health care? Do our kids go to good schools? Do we live in a safe neighborhood?

These are the issues that people care about in our country, and families want something done about them. One of these critical issues is health care. We tried to pass a Patients' Bill of Rights in this Congress and could not get it done. The Patients' Bill of Rights is pretty simple, actually. It is, with the growth of the managed care industry, trying to give a voice to consumers so they have a say in their own health care.

For example, a woman falls off a cliff in the Shenandoah Mountains and is taken into a hospital on a gurney, in a coma. She is very seriously injured, with broken bones and internal injuries. She ultimately recovers after a long convalescence. She is told by her managed care organization that they will not cover her emergency room treatment because she did not have prior approval to access the emergency room. Now, this woman was carried into the hospital on a gurney while in a coma, yet the managed care organization said she should have gotten prior approval for emergency room treatment.

So we tried to pass a piece of legislation that gives patients a voice in their own care, legislation that says patients have a right to know all of their medical options for treatment, not just the cheapest; patients have a right to emergency care when they have an emergency; patients have a right to see the doctor they need for the medical help they require. Pretty straightforward. We could not get it through. We could not get it through a conference committee and to the President for signature. Why? Because too

many people in the Congress said: Let us stand with the insurance companies and the managed care organizations on this subject.

We also face urgent issues dealing with Medicare and Medicaid. Yesterday, we were on the floor of the Senate talking about that. Everybody in this Chamber knows we have to do something to provide fair Medicare reimbursement for physicians, hospitals, nursing homes, and other providers.

We now come to the end of this legislative session, and we know the Medicaid reimbursement for our nursing homes on October 1 was cut. That cut is going to be accentuated with an even deeper cut in 2004, beyond the fiscal year 2003. We know we have to do something to deal with that situation. We know it has to be done, and yet some act as if there is no urgency at all, this will be just fine.

It is not just fine to have a cut in the quality of care of nursing homes in this country. That is exactly what is going to happen. And it is not just fine if the Medicare reimbursement is not adequate to keep rural hospitals open and keep some of the hospitals in inner cities—that are stretched so thin and whose reimbursement was cut so deeply during the Balanced Budget Act—open. It is not just fine to say: Let that go.

We are talking about the quality of health care delivered in hospitals through Medicare, delivered in nursing homes through Medicaid. It is not fine with me when we try to fix this at the end of the session, not having received the cooperation to get it done during the session, and people stand up and say: I object.

What is their plan? What do they propose? Just diminished health care, diminished quality of care in our hospitals and nursing homes? Is that something the American people believe they want? Is that something families say: We aspire to nursing homes that provide diminished care because we would not meet our obligation under Medicaid? We aspire to have hospitals close their doors because we will not own up to our requirements under Medicare? I do not think that is what the American people want or expect of this Congress.

Senators BAUCUS and GRASSLEY have introduced legislation, S. 3018. It is bipartisan. It addresses these issues—Medicaid, Medicare, hospitals, nursing homes, physician reimbursements.

The provider reimbursement we know we have to do, and what happens? The two most powerful words in the Chamber once again: "I object," they say. "I object."

It is the easiest act in the world to do, but we are faced with very significant challenges in health care, Medicaid, and Medicare, and everyone in this Chamber knows we have to fix it.

Here we are on a Thursday at a time when the Congress should have been adjourned, trying to finish some of these last items, and we have people on