

such as the failure to cover recommended prescription drugs, denial of needed diagnostic tests and procedures, and unwillingness to allow referrals for specialty care.

This study provides powerful new evidence of the need for Congress to move promptly to pass a strong Patient's Bill of Rights. Millions of families are suffering because of the failure of Congress to act. Families across America deserve protection, and it is time for Congress to fulfill its responsibility and see that they get it.

I ask unanimous consent the study be printed in the RECORD.

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

THE IMPACT ON PATIENTS OF DELAYS IN PASSING A PATIENTS' BILL OF RIGHTS: A SENATE HEALTH, EDUCATION, LABOR AND PENSIONS COMMITTEE MINORITY STAFF STUDY

Delays in passing legislation to curb insurance company abuse result in injury to thou-

sands of patients daily and millions of patients annually. Drawing on two prior studies on the incidence of abusive health plan practices, this report looks at the number of patients affected daily, weekly, monthly and yearly.

The estimates are based on patient self-reports of experiences with health plans and on physicians' reports of the frequency of various abuses and the seriousness of injuries sustained by the patients they see in their own practices.

Highlights

According to patient reports, every day, as the result of actions of their health plan: 59,000 patients experience added pain and suffering; 41,000 patients experience a worsening of their condition; 35,000 patients have needed care delayed; 35,000 patients have a specialty referral delayed or denied; 31,000 patients are forced to change doctors; and 18,000 patients are forced to change medications.

According to physician reports, every day: 14,000 physicians see patients whose health has seriously declined because an insurance plan refused to provide coverage for a pre-

scription drug; 10,000 physicians see patients whose health has seriously declined because an insurance plan did not approve a diagnostic test or procedure; 7,000 physicians see patients whose health has seriously declined because an insurance plan did not approve a referral to a medical specialist; 6,000 physicians see patients whose health has seriously declined because an insurance plan did not approve an overnight hospital stay; and 6,000 physicians see patients whose health has seriously declined because an insurance plan did not approve a referral for mental health or substance abuse treatment.

Table 1 shows the incidence of plan restrictions on care and patient injuries resulting from plan actions by day, week, month, and annually, as reported in the survey of patients. Table 2 shows the number of physicians seeing plan abuses that result in serious declines in patient health each day, month, week, and year.

TABLE 1.—PATIENT SURVEY

| Health plan abuse | Number of patients affected per year | Number of patients affected per month | Number of patients affected per week | Number of patients affected per day |
|--|--------------------------------------|---------------------------------------|--------------------------------------|-------------------------------------|
| Delay in Needed Care | 12,880,000 | 1,073,000 | 247,000 | 35,000 |
| Delay or Deny Specialty Referral | 12,880,000 | 1,073,000 | 247,000 | 35,000 |
| Forced to Change Doctors | 11,270,000 | 939,000 | 216,000 | 31,000 |
| Forced to Change Medications | 6,440,000 | 537,000 | 124,000 | 18,000 |
| Results of Health Plan Abuse: | | | | |
| Added Pain and Suffering | 21,638,000 | 1,803,000 | 415,000 | 59,000 |
| Worsening of Condition | 14,876,000 | 1,240,000 | 285,000 | 41,000 |

Source: Committee Analysis Based on Helen H. Schauffler's "California Managed Health Care Improvement Task Force Survey of Public Perceptions and Experiences with Health Insurance Coverage," U.C. Berkeley School of Public Health and Field Research Corporation, September, 1997, reported in Improving Managed Health Care in California, Findings and Recommendations, Volume Two, January 1998, tables 4 and 19, projected to the national level.

TABLE 2.—PHYSICIAN SURVEY

| Health plan abuse | Number of doctors each year seeing patients with serious decline in health from plan abuse | Number of doctors each month seeing patients with serious decline in health from plan abuse | Number of doctors each week seeing patients with serious decline in health from plan abuse | Number of doctors each day seeing patients with serious decline in health from plan abuse |
|--|--|---|--|---|
| Denied coverage of recommended prescription drug | 137,000 | 111,000 | 71,000 | 14,000 |
| Denied coverage of needed diagnostic test | 149,000 | 100,000 | 51,000 | 10,000 |
| Denied referral for needed specialty care | 122,000 | 76,000 | 37,000 | 7,000 |
| Denied overnight hospital stay | 110,000 | 65,000 | 29,000 | 6,000 |
| Denied referral for mental health or substance abuse treatment | 116,000 | 63,000 | 30,000 | 6,000 |

Source: Committee Analysis Based on Kaiser Family Foundation and Harvard School of Public Health, "Survey of Physicians and Nurses," July, 1999.

METHODOLOGY

The data presented in this report was drawn from two sources. Patients' self-reports on difficulties with their health plans and illness and injury caused by actions of their health plans was drawn from a random sample survey of individuals in California with private health insurance conducted by the Center for Health and Public Policy Studies, School of Public Health, University of California at Berkeley. Helen Schauffler, Ph.D., was the principal investigator. The survey was conducted during September, 1997 for the Managed Care Improvement Task Force of the State of California, and reported in Improving Managed Health Care in California, Findings and Recommendations, Volume Two, January, 1998, Tables 4 and 19.

The survey asked whether the respondent experienced specific difficulties with a health plan. Those who experienced difficulties were asked about the impact of the difficulty on their health. The figures presented in this report assume that the incidence of such events is the same among the total U.S. population of privately insured individuals as it is among the privately insured population in California. Daily, weekly, and monthly figures were derived by dividing annual rates by 365, 52, and 12, respectively. All figures in the tables are rounded to the nearest 1,000 patients.

Data on physicians' reports of health plan practices and serious declines in health experienced by patients as the result of health plan actions were drawn from the 1999 Survey of Physicians and Nurses by the Kaiser Family Foundation and the Harvard School of Public Health. The survey was conducted between February 11 and June 5, 1999. Physicians were asked how frequently a set of plan practices occurred (weekly, monthly, every six months, yearly, never, or not applicable to my practice). Physicians who reported that the practice occurred were asked for the impact on the health of their patients.

The figures reported in the survey were converted into daily, weekly, monthly, and annual totals by adding the proportions seeing the specified event during the specified time period. For example, to derive a weekly total, the numbers of doctors reporting seeing such patients weekly was added to one-fourth of the doctors reporting seeing such patients monthly plus one-fifty-second of the doctors reporting seeing such patients annually. The proportion was then multiplied by the size of the sampling universe of 470,364 physicians. All figures reported in the table are rounded to the nearest 1,000 patients.

Note that the tables are not comparable, since one reports on numbers of patients affected, while the other reports on numbers of doctors seeing affected patients. Many doc-

tors saw numerous affected patients. Moreover, judgments of doctors who attribute health declines to specific plan practices may not coincide with patients' own conclusions. Also, the doctor survey reports on patient injuries due to specific plan practices which are not identical with the problems identified in the patient survey.

SMITH AND WESSON AGREEMENT

Mr. LEVIN. Mr. President, for the first time in the United States, a gun manufacturer has agreed to make major changes to the design, distribution and marketing of its products. In a historic settlement reached by Smith & Wesson, the Administration, and cities and states around the country, Smith & Wesson will make sweeping changes to its business practices.

Under the terms of the agreement, several cities and counties will drop lawsuits filed against Smith & Wesson in exchange for reforms designed to make guns safer and limit access to them by unauthorized users. Specifically, Smith & Wesson agreed to increased safety standards, such as the

inclusion of external locking devices on all of its guns immediately, and internal safety locks on its pistols within two years; more stringent performance standards for its handguns, including rigorous drop tests; and a commitment to include "smart gun" technology in its newly designed handguns within three years.

In addition, Smith & Wesson agreed to revamp the way it distributes and sells firearms. Smith & Wesson will conduct business transactions only with authorized distributors and dealers who abide by a code of conduct. The distributor or dealer must agree in writing to perform and complete a background check for all sales, including those at gun shows; impose limits on the bulk purchase of guns; implement a security plan to prevent firearm and ammunition theft; require juveniles to be accompanied by a parent or guardian where guns and ammo are stored or sold. Other parts of the voluntary agreement include a trust fund for a public service campaign about the risk of firearms in the home and lessons for proper home storage. Also, Smith & Wesson made assurances that their guns will not be marketed to appeal to children or criminals and will not be advertised in the vicinity of schools, high crime zones, or public housing.

Finally, with this agreement, a firearm manufacturer has agreed to the basic demands of the American people: to keep guns out of the hands of children and criminals. I hope other gun manufacturers will follow their lead and work to reduce the level of gun violence in America.

THE VERY BAD DEBT BOXSCORE

Mr. HELMS. Mr. President, at the close of business yesterday, Wednesday, April 5, 2000, the Federal debt stood at \$5,758,940,935,120.58 (Five trillion, seven hundred fifty-eight billion, nine hundred forty million, nine hundred thirty-five thousand, one hundred twenty dollars and fifty-eight cents).

One year ago, April 5, 1999, the Federal debt stood at \$5,662,955,000,000 (Five trillion, six hundred sixty-two billion, nine hundred fifty-five million).

Five years ago, April 5, 1995, the Federal debt stood at \$4,878,158,000,000 (Four trillion, eight hundred seventy-eight billion, one hundred fifty-eight million).

Ten years ago, April 5, 1990, the Federal debt stood at \$3,093,268,000,000 (Three trillion, ninety-three billion, two hundred sixty-eight million).

Fifteen years ago, April 5, 1985, the Federal debt stood at \$1,737,241,000,000 (One trillion, seven hundred thirty-seven billion, two hundred forty-one million) which reflects a debt increase of more than \$4 trillion—\$4,021,699,935,120.58 (Four trillion, twenty-one billion, six hundred ninety-nine million, nine hundred thirty-five thousand, one hundred twenty dollars and

fifty-eight cents) during the past 15 years.

ADDITIONAL STATEMENTS

NATIONAL STUDENT EMPLOYMENT WEEK

• Mr. CRAIG. Mr. President, I rise today in honor of National Student Employment Week. I would like to show appreciation for the good work that the past and present interns in my office have done, and say a few words about the mutual benefits of a congressional student internship program.

These days, as people turn to government more frequently for answers, it is especially important for young people to learn about government. It is crucial that they know how it affects their lives and the lives of others and what they can do to improve it. There is no better way for a student to discover how government works than by participating in the legislative process. Real-world experience helps a student develop optimistic, practical expectations of government.

An internship is often a student's first brush with the professional world. The congressional office gives them an opportunity to develop their professional skills. Each year, after working on Capitol Hill or in a state or district office, thousands of former student interns commit themselves to public service or choose a career path in the private sector. These young people bring the high standards with which they were trained to their first job.

Internships also allow students to gain experience specific to jobs in a congressional office. They allow students to try out different tasks, which gives them the chance to discover jobs they are well suited for and would not know about without hands-on office experience.

Many of us who hold office today credit a student internship as the inspiration for our commitment to public service. In fact, I believe that right now there are many young people who are planning to devote part of their careers to public service because of their student internships. Although not all former interns pursue a public service career, these young people are usually left with an ongoing interest in politics. The result of a student internship, is at the very least, an informed and thoughtful citizen.

I have the great fortune to work with some of the sharpest and most eager minds to come out of our colleges and universities. Among them this spring are Melissa Simpson of Blackfoot and Boise State University, Richard Andrus of Rexburg and Utah State University, Sarah Bonzer of Boise and Boise State University, Laura Atchely of Ashton and the University of Idaho, Melynda Topelian of Herndon High, Herndon, Virginia, and Holly Sonneland of Hailey and The Community School in Sun Valley, in my per-

sonal office in Washington, DC. The interns in my Republican Policy Committee office include Elisha Tiptlett from Woodbridge, Virginia, and James Madison University, Nathan Johnson of Lewiston, Maine, and Brigham Young University, Carolyn Laird of Edmonton, Alberta Canada and the University of Alberta. The interns in my state offices are: Jose Melendez, a student from Northwest Nazarene University in the Boise office; Angela Nyland of Idaho State University and Mark H. Liedtke of Century High School in the Pocatello office; Kjersta Baum of Ricks College and Kristina Pack of Skyline High School in the Idaho Falls office. Past interns in the Idaho Falls office whom I would like to recognize include Pricilla Giddings of Salmon River, Jr./Sr. High School and Jared Lords of Idaho State University.

These interns are a welcome addition to my Idaho and Washington, DC, offices. They have brought their energy and scholastic ability with them and helped make my office more responsive to constituents at home.

In return for their effort, these students gain the satisfaction of helping their fellow citizens, the reward of being a well-trained worker, and the opportunity to make lifelong political contacts. Some have incorporated their study into their curriculum and will receive academic credit for their endeavors.

For these reasons, I will continue to provide internship opportunities to Idaho students. Student internship programs are an excellent example that student employment is pivotal in the continuation of a well-trained work force.

I commend my colleagues who have done their part by opening their offices to interns. I hope that they have seen, as I have, that student internships offer numerous benefits to both the congressional office and the student.

I thank the students who have participated in an internship. Their time as interns has made them knowledgeable citizens on the subject of government, and their participation has enriched our nation's legislative process.●

16TH ANNUAL TUFTONIA'S WEEK CELEBRATION AT TUFTS UNIVERSITY

• Mr. KENNEDY. Mr. President, this month marks the 16th annual observance of Tuftonia's Week by Tufts University in Medford, Massachusetts. As part of this impressive celebration, large numbers of the 80,000-plus Tufts alumni from around the world return to honor their outstanding university. We are fortunate to have many distinguished Tufts alumni working on Capitol Hill, so many of us are well aware of the high quality of these graduates.

This celebration always has special meaning for me. My daughter, Kara, is a graduate of Tufts, and I've also worked closely with many Tufts scholars on a wide range of public policy