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Senate

The Senate met at 10 a.m. and was called to order by the Honorable ROLAND W. BURRIS, a Senator from the State of Illinois.

PRAYER

The Chaplain, Dr. Barry C. Black, offered the following prayer:

Let us pray.

Eternal One, we adore You. You have been the great companion and teacher of humanity, lifting us from the depths and permitting us to share in Your glory.

Today, fill our lawmakers with greater trust in You. May that trust bring them to a wholehearted surrender to Your will. Lord, help them to see in every sorrow and joy the stately footprints of Your loving providence, enabling them to say to the mountains of difficulties, "Be removed." Renew the strength of our Senators so that they will mount up with wings like eagles. Remind them that security and esteem come not from titles, positions, or power but from being Your servants, working for Your glory and the good of humankind.

We pray in Your sovereign Name. Amen.

PLEDGE OF ALLEGIANCE

The Honorable ROLAND W. BURRIS led the Pledge of Allegiance, as follows:

I pledge allegiance to the Flag of the United States of America, and to the Republic for which it stands, one nation under God, indivisible, with liberty and justice for all.

APPOINTMENT OF ACTING PRESIDENT PRO TEMPORE

The PRESIDING OFFICER. The clerk will please read a communication to the Senate from the President pro tempore (Mr. BYRD).

The legislative clerk read the following letter:

U.S. SENATE,
PRESIDENT PRO TEMPORE,
Washington, DC, November 3, 2009.

To the Senate:

Under the provisions of rule I, section 3, of the Standing Rules of the Senate, I hereby appoint the Honorable ROLAND W. BURRIS, a Senator from the State of Illinois, to perform the duties of the Chair.

ROBERT C. BYRD,
President pro tempore.

Mr. BURRIS thereupon assumed the chair as Acting President pro tempore.

RECOGNITION OF THE MINORITY LEADER

The ACTING PRESIDENT pro tempore. The minority leader is recognized.

Mr. MCCONNELL. Mr. President, I assume the majority leader will be here momentarily. I have a brief statement. I think I will go ahead and make that.

The ACTING PRESIDENT pro tempore. The Senator may proceed.

WELCOMING GERMAN CHANCELLOR MERKEL

Mr. MCCONNELL. Mr. President, we will all have an opportunity to hear German Chancellor Merkel speak to a joint session of Congress later this morning.

We welcome her to the Capitol. It is always an honor for us to welcome a head of state to this great symbol of democracy in which we all have the privilege to work.

We look forward to hearing Chancellor Merkel's words, and we wish her a very pleasant and productive stay in Washington.

HEALTH CARE: HIGHER PREMIUMS

Mr. MCCONNELL. Mr. President, Americans have always had a healthy skepticism about government. But the health care bill that Democrats in Congress have put together this year would

surprise even the wariest of citizens about government's potential to misread its mandate.

At a time of near 10-percent unemployment and a staggering \$12 trillion Federal debt, this bill proposes to spend at least another trillion dollars to extend the reach of government in the health care decisions of every single American.

What's worse, a bill that was meant to control costs is expected to increase them. One independent study after another has shown that the bills we have seen wouldn't make health insurance premiums go down, they would actually drive them up.

You would think this would be enough to send the bill writers back to the drawing board. After all, the primary argument that was used to marshal support for these bills was the unsustainable cost of health care. Unfortunately, it hasn't. Frankly, it is an absurd spot in which we now find ourselves.

For months and months, we heard that certain reforms were needed to drive down costs. Yet now, after analysts have concluded that these proposals would actually increase costs, the people who were arguing for them are trying harder than ever to get these proposals approved, as quickly as possible.

The irreducible fact is this: while Americans have been saying we need more affordable health care, the Democrat plan makes it more expensive—and that is not reform.

We have the testimony of the Joint Committee on Taxation, the Congressional Budget Office, the administration's own Office of the Actuary at the Centers for Medicare and Medicaid Services, and separate analyses by many others that say so. Each has said that the proposals we have seen would lead to higher premiums. And these higher premiums would especially hit the young, the healthy, and small businesses owners.

• This "bullet" symbol identifies statements or insertions which are not spoken by a Member of the Senate on the floor.



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Here is the breakdown. Premiums for young people could go up nearly 70 percent, and even more than that in places such as Kentucky. And millions of Americans who have chosen a plan that fits their needs and their budgets will be forced to buy more insurance, at a significant cost. Like most of my colleagues, I am particularly concerned about what these plans will mean for the families I represent. And what I have seen so far from these reports is disturbing.

As a result of all the various new rules, regulations, and tax increases that would come about as a result of the Democrat health care plan, a family of four in Kentucky that earns \$66,000 a year is estimated to see their insurance premium double—from \$355 to \$787 a month.

The other side will say that they intend to provide subsidies for families like these, and they do. But those subsidies would only cover about half the increase. So even after these subsidies are applied, this family ends up paying an extra \$180 a month. As any family will tell you, that's \$180 that will not go to the college fund, to the retirement account, or toward a family vacation.

New taxes on medical devices would also contribute to higher premiums.

Same goes for new taxes on life-saving prescription drugs and new taxes on insurance providers. One independent study shows that the new taxes and fees would add nearly \$500 a year to the cost of insurance for American families.

The Congressional Budget Office also predicts that a new charge to participate in so-called exchanges would lead private health plans to increase their premiums by about three percent. That is on top of all the other forces in this bill that work to drive up Americans' health insurance premiums.

The testimony of these groups is clear: the Democrat plan would not only raise taxes and slash Medicare, it would also raise health insurance premiums. This is not reform, and it's certainly not what the American people were told they could expect.

Republicans have proposed a different approach, one that responds to today's needs and one that respects the challenging economic environment we're in.

We are for helping small businesses find affordable health insurance options for their employees. We are for providing individuals the same tax benefits for purchasing insurance that businesses get.

We are for protecting doctors from frivolous lawsuits, so they can focus on treating patients—and lower their costs. We are for cracking down on the rampant waste and fraud that drive up the cost of care. And we are for the kind of wellness and prevention programs that have worked at places like the Safeway grocery chain.

Contrast that with the other side's plan. A reform that was meant to cut

costs has been shown to increase them. As I said, that is not reform. But it is also not too late. It is not too late for the parties to get together and deliver the reforms Americans really want.

I yield the floor.

RECOGNITION OF THE MAJORITY LEADER

The ACTING PRESIDENT pro tempore. The majority leader is recognized.

HEALTH CARE REFORM

Mr. REID. Mr. President, we have had, during the last 6 months, extended hearings on the need for health care reform. Every Member in the Democratic caucus believes the present system of delivering health care in America is in trouble. It is not fair to patients or to physicians. Certain classes of people are being damaged. Medicare recipients are hammered every day.

What we are doing is presenting to the American people alternatives to the insurance industry running the world of health care. We cannot continue the way we have been going. That is what the Republican plan is—to continue more of the same, with the health insurance industry controlling everything, not professionals.

We are going to continue working on this with the CBO, which now has the plan we have sent to them with different alternatives, and they will report back as to the numbers on that. We will have in the near future a program that will be open to the American people that will show that is what we are doing. We are returning the health care to the people who can do the best job in health care. Rather than the doctor having to go through some bureaucrat working for an insurance company, he or she can make a decision on their own. This is what the nurses want, this is what the physicians want, this is what the patients want, this is what the hospital administrators want, and this is what the teaching hospitals want.

Health care in America is not in good shape. All you need to do is read any fair discussion of the health care system, recognizing now that one-sixth of every dollar is spent on health care in America today. If we don't bend that curve, it will be up to 35 cents of every dollar. America cannot continue this. We are lagging behind the rest of the world, and that needs to change.

SCHEDULE

Mr. REID. Mr. President, at 10:30 a.m., Chancellor Angela Merkel will address a joint meeting of Congress. Senators are encouraged to come to the floor now so that we may proceed as a body to the Hall of the House of Representatives.

The Senate will recess from 10:15 a.m. until 11:30 a.m. for that joint meeting.

At 11:30 a.m. the Senate will resume consideration of H.R. 3548, the Unemployment Benefits Extension Act of 2009, postcloture. I hope after the vote yesterday, we will not be required to use the 30 hours. It will run out sometime before midnight tonight. We should move on. We have other things to do. I have spoken to my counterpart, the Republican leader. We have a number of things we need to do before we leave here next Tuesday for the Veterans Day holiday. We can finish that now. Each thing we need to do can be done very quickly. If not, we will have to work through the weekend. I hope that is not necessary.

Again, at 11:30 a.m., the Senate will resume consideration of H.R. 3548, the Unemployment Benefits Extension Act. It is my hope that we will be able to yield back some of that postcloture debate time and proceed to the bill this afternoon.

The Senate will recess from 12:30 to 2:15 to allow for the weekly caucus luncheons.

Mr. President, there is something wrong with the system, so the bells and lights and whistles we normally hear around here won't be heard. We are going to have to go the old-fashioned way of looking at the clock.

I ask the Chair to recess 3 minutes early.

RESERVATION OF LEADER TIME

The ACTING PRESIDENT pro tempore. Under the previous order, leadership time is reserved.

JOINT MEETING OF THE TWO HOUSES—ADDRESS BY CHANCELLOR ANGELA MERKEL OF THE FEDERAL REPUBLIC OF GERMANY

The ACTING PRESIDENT pro tempore. Under the previous order, the Senate stands in recess until 11:30 a.m., following the remarks of the Chancellor of the Federal Republic of Germany.

Thereupon, the Senate, at 10:13 a.m., recessed until 11:30 a.m., and the Senate, preceded by the Vice-President, JOSEPH R. BIDEN, Jr., the Secretary of the Senate, Nancy Erickson, and the Deputy Sergeant at Arms, Drew Willison, proceeded to the Hall of the House of Representatives to hear an address to be delivered by Chancellor Angela Merkel of the Federal Republic of Germany.

(For the address delivered by the Chancellor of the Federal Republic of Germany, see today's proceedings of the House of Representatives.)

Whereupon at 11:30 a.m., the Senate, having returned to its Chamber, reassembled and was called to order by the Presiding Officer (Mrs. GILLIBRAND).

UNEMPLOYMENT COMPENSATION EXTENSION ACT OF 2009

The PRESIDING OFFICER. Under the previous order, the Senate will resume consideration of H.R. 3548, which the clerk will report.

The assistant legislative clerk read as follows:

A bill (H.R. 3548) to amend the Supplemental Appropriations Act, 2008, to provide for the temporary availability of certain additional emergency unemployment compensation, and for other purposes.

Pending:

Reid (for Baucus-Reid) amendment No. 2712, in the nature of a substitute.

Reid amendment No. 2713 (to amendment No. 2712), to change the enactment date.

Reid amendment No. 2714 (to amendment No. 2713), of a perfecting nature.

Reid amendment No. 2715 (to the language proposed to be stricken by amendment No. 2712), to change the enactment date.

Reid amendment No. 2716 (to amendment No. 2715), of a perfecting nature.

Mr. CARDIN. Madam President, I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

Mr. CARDIN. Madam President, I ask unanimous consent that the order for the quorum call be rescinded.

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

Mr. CARDIN. Madam President, shortly, we are going to be voting on the unemployment compensation bill. I have already taken to the floor to urge my colleagues to pass the underlying bill, which provides 14 weeks of additional benefits to those who will exhaust their unemployment compensation. This is an insurance program. The funds are there, assessed through the compensation system of our country in order that we have money available for those who have lost their jobs during a recession, and that is exactly what has happened.

These are extraordinary times. I know the Presiding Officer will agree with me that we have been to our States, and we know there are people who are unable to find jobs. This past week, I was at the employment office in Baltimore and saw people coming into that office in large numbers and asking for jobs. I talked to individuals, saw the faces of people who want to work but who can't find jobs. So it is critically important for the system to work, and that means we need to provide the safety net of unemployment compensation during these times, and we need to extend it to all States.

The bill before us will provide those additional 14 weeks in every State. In my own State of Maryland, we have many counties that have unemployment rates far in excess of the 8½ percent, which was the trigger number used in the House bill. So it is appropriate we pass this bill for the people who will benefit by it, and it is also appropriate we pass it to help our economy. We know the dollars that are provided through unemployment com-

pensation work their way back into our economy, very quickly helping our economy.

I wish to talk also about the leader's amendment that will extend to first-time home buyers a tax credit that would expire at the end of this month. I had introduced legislation, along with Senator ISAKSON, to extend the credit for an additional 6 months, and I am pleased that provision is included in the leader's amendment that also expands the credit for an additional 6 months.

According to the IRS, 1.4 million people used the credit as of September 2009. As many as 40 percent of all home buyers this year will qualify for the credit. It has clearly worked according to its intended purpose; that is, to get potential home buyers off the sidelines and into the market and buying a home. It is estimated that the credit is directly responsible for 200,000 to 400,000 purchases this year. According to the National Association of Realtors, those additional sales have pumped approximately \$22 billion into the economy. It is getting our economy back on line.

The credit has succeeded in reducing the glut of homes for sale, but it needs to be extended. We still have too much inventory that is out there, and it is affecting new home starts, which are critically important for our economy. We know the real estate market was the spark that put us into this recession. We know that. We know what happened to home values. We know what happened to people who were unable to sell their homes. We know what happened with foreclosures. We know we need a healthy real estate market to get us out of this recession.

We have seen some signs of improvement and stabilization in the market, but we are certainly not out of the woods yet. Inventories are still way too high. Dean Baker, codirector for the Center for Economic and Policy Research, notes that price declines could resume later this fall.

Quoting Mr. Baker:

The uptick in sales driven by the credit has led to a substantial increase in the number of homes offered for sale at just the time that the boost from the credit is dwindling. The inventory will also be a much larger drag in the slow-selling winter months.

We know winter is notoriously a slow season, but we have too much inventory that is out there. This would be the wrong time for Congress to allow this credit to expire.

Other economists, such as Mark Zandi of Moody's, and James Glassman of JPMorgan Chase, support extending the credit.

The substitute amendment, which I have cosponsored and which is similar to the bill I introduced—S. 1678—extends and expands the credit to April 30, 2010, for binding contracts and then allows 60 more days to close. I think that makes sense. The closing period sometimes hampers the use of the credit. For example, if someone was to

enter into a contract today, even though the credit is there, it is highly unlikely they could settle by the end of the month, taking advantage of the \$8,000 credit. It makes sense to say that as long as you have a binding contract by April, you have 2 months later to close in order to get the credit.

The amendment keeps the \$8,000 credit for the first-time home buyer and then provides a \$6,500 credit available to other home buyers who have lived in their current homes for at least 5 years. These are the step-up sales. These are people who currently own homes, who have lived in their home for 5 years, and are now trying to buy another home. You can't buy a house and try to flip it to take advantage of the \$6,500 credit. It is a smaller credit than the first-time home buyers', but it is still a significant credit and it is available for homes costing up to \$800,000.

I don't think there are many homes in the area that will qualify under the income limits, but it does allow those to qualify. The income limits have been lifted slightly from \$75,000 to \$125,000 for an individual and from \$150,000 to \$225,000 for joint filers.

So it takes care of where the market needs help, where there is too much inventory, and will allow the credit to, again, tell people: Look, the economy needs your help. This is a good time to buy. The government is going to be your partner with this \$8,000 credit for the first-time home buyer and a \$6,500 credit for the person who has lived in their house for 5 years.

There are a couple more points that I think need to be underscored. The credit is fully paid for. It will not add to the deficit. That is an important point, but I would also point out that this credit will help stimulate our economy, which will generate economic activity, which will help us on our budget deficit. It really does help our economy, and it is fully paid for, so it doesn't add to the deficit, and that is one of the points I mentioned when I first introduced this bill with Senator ISAKSON—we were going to look for a way to make sure it is paid for.

I thank the chairman of the Finance Committee, Senator BAUCUS, for coming forward with an amendment that is fully paid for, that is offset. I believe that is the way it should be.

The second point I want to bring up is it includes tough antifraud language and "math error" authority for the IRS to ensure that only those individuals and families who qualify for the credit take advantage of it. I know we are all concerned about reports we read in the paper about potential fraud on this credit. Any fraud is wrong, but we know if we set up a new credit there are those who will press the point more than they should. We have to make sure the antifraud provisions are in this bill so those entitled to this credit are those who take advantage of it and it is not used inappropriately. Language is included in this amendment to

make sure that, in fact, happens. It is a bill that is properly balanced.

I wish to make one other point. I heard the chairman of the Senate Finance Committee said this, and I agree completely. Senator ISAKSON and I talked about this. The credit will end. This is not an extension because we believe this is a credit that should be there indefinitely. We do not. This credit is to help bring real estate back to where it needs to be for our economy to recover. We give until April so that people can take advantage of this credit during this tough economic time, knowing full well that the winter is going to be a slow season, normally, for home sales and in the spring people are more likely to start again looking at home sales. We want people to take advantage of this now, recognizing that come April this credit will not be extended. This is the time to take advantage of this government credit that helps you in buying a home.

As I said earlier, the slump in housing led us into this recession. A rebound in the market will lead us out of this recession. Extending the credit is a prudent and fiscally responsible measure.

I am proud to be a cosponsor of the leader's amendment, and I hope we will shortly have an opportunity not only to pass this amendment but to pass the underlying bill that will extend unemployment compensation to literally, in my State, the tens of thousands of people who otherwise will lose their benefits by the end of this month and the 1.4 million Americans who will lose their unemployment compensation benefits by the end of this year if we do not act.

For all those reasons, I urge my colleagues to support the amendment.

I yield the remainder of my time.

The PRESIDING OFFICER. The Senator from Wyoming is recognized.

HEALTH CARE REFORM

Mr. BARRASSO. Madam President, any day now the Senate will begin to debate a single bill affecting the lives, the wallets, and the health of all Americans. Three Senators from the other side of the aisle have been working behind closed doors, trying to stitch together yet another health reform bill—a bill that will restructure 17 percent of the American economy. It is unclear when the other 97 Senators will get to see the majority leader's bill.

As we wait for the opportunity to read the bill, to examine the bill, to see what is in it—and the American people are waiting as well—I am reminded of a book that I believe still has much to teach us, “The Federalist Papers,” particularly Federalist 62 authored by James Madison. He says this:

The internal effects of a mutable policy are still more calamitous. It poisons the blessings of liberty. It will be of little avail to the people that the laws are made by men of their own choice—

Let's get that over again.

It will be of little avail to the people that the laws are made by men of their own choice if the laws be so voluminous—

You have seen this 1900-page House bill—

That they cannot be read, or so incoherent that they cannot be understood; if they be repealed or revised before they are promulgated, or undergo such incessant changes that no man knows what the law is today, can guess what it will be tomorrow.

That is what we are looking at. The quote strikes a chord with everyone who hears it because it summarizes so very well what we are facing today in the Congress—in the Senate, in the House—as we are dealing with health care and health reform. The House health reform bill is nearly 2,000 pages long. The Finance Committee bill is over 1,500 pages. The HELP Committee bill is over 1,000 pages.

Some in Washington may believe that drafting a bill in secret and then rushing to enact it into law with little debate is the perfect way to avoid tough questions and public scrutiny. That plan has not gone as intended. The American people are much too smart. As the American people began to understand the details, they began to ask the tough questions. They know what the Democrats in Congress and the administration are trying to do. The American people are not buying it. They are not convinced that we should turn over the Nation's private health care system to Washington, to bureaucrats, and to the Federal Government.

Of course the American people want reasonable, commonsense health insurance reform. We need that. But the American people do not want a bill that limits their freedom and bankrupts the country. Fortunately, the American people see that the numbers simply do not add up. They know that if the reform bills we are debating become law, the health care costs are going to go up.

I go home to Wyoming every weekend. I was there yesterday. People continue to ask me: How will all of these health care bills affect me and affect my family? Inevitably, the question is followed by a statement. It says: Tell those people back in Washington that I want them to fix what is wrong with our health care system, but whatever they do, that should not make things worse for me and worse for my family. I can't afford to pay more for my family's health care.

I agree completely with the people of Wyoming. Health care costs today are rising three times faster than inflation. Especially during these economic times, rising health care costs stretch family budgets to the limit. It also makes it harder for employers to keep offering health benefits to their employees.

Now the Congressional Budget Office, the Joint Committee on Taxation, and the Health and Human Services Office of the Actuary are all telling us what the American people already know. They are telling us that if we pass the health reform bill that is coming before us, we are going to make things worse.

What exactly did all of these non-partisan organizations say? On September 22 of this year, the Congressional Budget Office sent a letter to the Finance Committee chairman, to Chairman BAUCUS. In the letter, the CBO said two important things. No. 1, premiums in the new insurance exchanges would tend to be higher than the average premiums in the current individual market. This was a bill that was supposed to lower costs. No. 2, people with low expected costs for health care would generally end up paying higher premiums. Again, that is not where we are supposed to be heading. According to the Congressional Budget Office, the Baucus bill actually causes many individuals and families struggling today to afford health insurance to end up paying more.

In the same letter, the CBO also indicated that tax increases in the Baucus bill will make monthly health insurance bills go up, not down.

During the Finance Committee debate, my friend from Texas, Senator CORNYN, asked CBO Director Doug Elmendorf a specific question. He said: “Would the new fees on health insurers be passed along to health consumers?”

Dr. Elmendorf responded, “Our judgment,” he said, “is that the new fees would raise insurance premiums”—make them go up.

The Joint Committee on Taxation confirmed exactly what the CBO Director had said because during the same Finance Committee debate, the Joint Committee on Taxation Chief of Staff said:

Basic economics is that the fee will be reflected in higher premium costs.

Who pays the premiums? Obviously the people who are being insured or their employees.

I wish to point out that, like many things in this Baucus bill, this new insurance tax system, the new taxes begin in the year 2010—next year—a full 3 years before Americans see any benefits, any coverage benefits. So they are going to start paying for this years before the benefits actually arrive. I thought the goal of health reform was to lower the cost for hard-working Americans, not to raise the costs. Instead, the respected economists who looked at this are telling us that monthly health insurance costs will go up for every single American starting next year.

Next, the Health and Human Services Office of the Actuary, which is another nonpartisan, highly respected scorekeeper, took a look at this Democratic health reform bill. On October 21, they released a memo analyzing the House bill, at the time H.R. 3200. Unfortunately for the Democratic leadership and the White House, the news was not good. The House bill bends the cost curve up. The expenses go up. According to their memo, health care spending will increase if the House bill becomes law.

Here is what they said:

In aggregate, we estimate that for calendar years 2010-2019, National Health Expenditures would increase by \$750 billion or 2.1 percent over the updated baseline projection.

Often the government uses fancy, complex language, so let me be very clear about this. They are saying that as national spending on health care increases, American families will see their monthly health insurance premiums go up.

My friends on the other side of the aisle will try to tell you the data is meaningless. They will try to tell you the taxpayer-funded subsidies included in the bill will make the health care premiums more affordable. It is fascinating to me that the Democrats do not even try to deny that premiums will go up. They admit it. Instead, they tell us not to worry about it.

We should worry about it. The people of Wyoming worry about it. The people of America are worried about it. Why? Because hard-working American taxpayers and the generations to follow will be forced to pick up the tab. I want everyone who is listening to know that the American people are not being fooled. They understand that subsidizing something does not make it cheaper.

Not only do the proposals in front of us raise taxes, they slash nearly \$500 billion from Medicare, from the hard-working Americans who have given and sacrificed and who rely on Medicare for their health care, and they raise premiums, they raise the cost for people who have insurance. They are doing it not to save Medicare but to create an entirely new entitlement program.

Again, my friends on the other side never seem to mention that most Americans will not even qualify for these subsidies that are being promised. About 160 million Americans get their health insurance through an employer. Under the Democratic health reform plans, they will not qualify for a Federal Government subsidy. You have to take the health insurance your employer gives or buy a policy on your own, whether you can afford it or not. That is going to be the law. Either way, it will cost you more if this bill becomes law.

We have not even gotten into the issue of the quality of the care you will receive under this new government-run system. The Congressional Budget Office also confirmed that almost 5 million American people who buy insurance through this new government exchange will not receive any help to pay for their insurance. What good are taxpayer-funded subsidies to help pay for premium increases when most people don't actually qualify for the promised help?

It sounds to me as if the Baucus bill will stick people with higher taxes, will take away their choices, will remove personal freedom, and will implement changes that increase their monthly health care costs. This is not reform; it is a blatant effort by Washington to take over health care in America.

It is important that Members of Congress and the American people fully understand how the Democratic health bills will increase costs, so let's go through the list one by one.

We have already talked about the new tax on health insurance providers. Experts tell us this tax will be passed on to patients. BlueCross BlueShield of Wyoming tells me this tax will raise monthly premiums of families in my State by \$500 a year.

Then there are the new requirements. The Democratic bills all have the Federal Government defining what kind of insurance can be sold and must be purchased. Well, this makes it illegal for insurers to sell certain policies that many people have today, that many people like, and that many people want to keep.

How do they accomplish this? The Democratic bills require most health plans to offer products that meet new, higher, specified what are called actuarial values and cover an exhaustive list of mandated benefits. If you do not know what the term "actuarial values" means, you are not alone. I have been in the practice of medicine for 25 years taking care of families all across Wyoming. I had never heard of it.

"Actuarial values" is a technical term. It stands for the total amount of health spending paid for by an insurance plan. In other words, the actuarial value of a health plan depends on all of the benefits, on any cost sharing that the health plan covers. Actuarial values are represented by a percentage. In insurance plans, they can range anywhere from 55 percent to 90 percent. Typically, as these values increase, the cost increases.

Well, the health care bill raised this so called actuarial value minimum to a standard of 65 percent, which actually is much higher than many policies that are sold on the market today. As a result, experts tell us that people who buy insurance will pay at least 10 percent more just to meet the new standard.

I am sure the other side of the aisle will try to say: Do not worry. We will protect you.

You know, the idea was that you should be able to keep the insurance you have so that your premiums will not go up. But what they do not tell you is that you are out of luck if your insurer stops offering coverage or if you want to change your policy in any way.

How might you change your policy? Well, you might add dental care or vision benefits. If you want to do any of those changes, you are out of luck. Any change to your current insurance policy and the promise that "you get to keep what you have if you like it," well, that promise will not come true.

Finally, there are some new rules called age rating. They are going to drive up the premiums specifically for younger folks. The age rating rules limit the amount premiums can vary between healthy younger Americans

and older individuals. Experts tell us that the Finance Committee bill, for example, will cause monthly insurance premiums for younger, healthier people who are then going to be subsidizing older folks who are sicker—to drive up the premiums of younger folks by 69 percent. These extreme price increases will force young healthy people out of the market. A young person will see that it is cheaper to pay a \$750 fine annually, what they call a tax penalty, and forget about having health insurance than it is to pay \$5,000 a year for health insurance when, as many young people believe, they will never need it. Besides, if this young person does get sick, he or she can always buy health insurance later without facing a penalty.

That is exactly how this bill is written. Without a doubt, the policies I have described will cause health insurance costs to go up for millions and millions of Americans, and specifically so very much for young Americans.

Plans that the President promised the American people that they could keep if they liked, well, we all know the President cannot and will not keep that promise. I will give a specific example. In Wyoming, a healthy 35-year-old man can go out today and buy a high-deductible health insurance policy for about \$90 a month.

Scorekeepers at the Congressional Budget Office estimate this level plan in the Finance Committee bill will cost \$392 a month. That is a huge increase because that is what they are going to be mandated to buy. Not one of my constituents can afford to pay 329 percent more for their health insurance than they can pay today.

We can solve the problem of rising medical costs without a government takeover of health care. I struggle with the assumption that people generally can be trusted to do the right thing and society prospers when government has less to say about how people run their lives. Others start by assuming that Washington knows best and should take more authority over all of us.

There are better ideas that improve our Nation's health care system, commonsense reforms on which all of us can agree. Having practiced medicine, taken care of families in Wyoming for 25 years, I would prefer a step-by-step approach to reform—simple, commonsense, affordable changes that we can implement right away. And all of those ought to be centered on the patient, patient centered, not government centered: Giving people incentives such as lower costs when they engage in healthy behaviors; prohibiting the use of preexisting condition clauses; allowing people to take their health insurance with them if they change jobs; allowing Americans to buy insurance across State lines, to shop for a policy that is best for them, best for their family; giving people the same tax breaks that big companies get when

people buy their insurance policies individually; dealing with abusive lawsuits and the situation there that involves doctors ordering many tests that do not necessarily help the patient stay healthy but help protect the doctor in case of a suit; and allowing small businesses to pool together in order to offer health insurance to their employees at a more reasonable cost to the employees as well as to the business.

The time has come to work together for meaningful reform. I think most Americans would prefer that we get these reforms right than pass a 2,000-page bill—a bill that raises taxes, a bill that cuts Medicare, a bill that costs \$1 trillion, and a bill that represents a Washington takeover of health care.

The American people want better. The American people deserve better. The American people deserve nothing less.

I yield the floor.

The PRESIDING OFFICER. The Senator from Wyoming.

Mr. ENZI. Madam President, I ask unanimous consent to speak as in morning business.

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

Mr. ENZI. Madam President, I would like to talk about health care as well, and I brought a few pages that the American people would be interested in. This stack closest to the podium is actually the House bill, the 2,000-page House bill. On this side is what we are working off of so far on the Senate side because what has been put together has been put together behind closed doors, and it has not been released yet. I assume that is because they do not know the cost and what adjustments will have to be made in order to meet the cost requirements, although it is an extension of cost of probably \$1 trillion.

I wonder if there is anybody in America who believes we can expand programs by \$1 trillion and it will not cost a dime for the rest of us. But at any rate, the stacks over here are the ones from the Senate side. The little bottom stack down there is the Senate HELP bill. Then this is the Senate Finance bill, the 1,600-page bill, although when we were actually debating this bill in committee, we did not know how big the bill would be because we worked off a 220-page summary and did summary amendments.

So this is the first time we have actually got to look at a final product. What is interesting about doing a summary bill is that the amendments are done in summary. If an amendment does happen to pass by the minority, then it is written by the majority, and the devil is always in the details. So we are very anxious to see, although there were not a lot of amendments that we got passed there.

What I mostly want to talk about today is the impact on small business. The status quo in health care is unacceptable. Health care costs are skyrocketing, insurance premiums are in-

creasing, and too many small businesses can no longer afford to offer health insurance to their workers.

While I agree we need to change our current system, the approach reflected in the current health reform bills is the wrong answer. That is these bills. Quite a stack of papers. Very encompassing. Very comprehensive. This is going to affect every single American. We have never had a bill that affected every single American, and that is why it is so complicated. That is why it is so large. That is why it is so hard to deal with. That is why there will be so many mistakes as we go through a pile like that trying to make a few amendments that will improve the bill. They need a lot of amendments that will improve the bill.

So while I agree we need to change our current system, the approach reflected in the current health reform bills is the wrong answer. I object to the current health care reform bills not because I support the status quo but because the bills do nothing to address the problems of increasing costs and premiums. These bills will not reduce health care costs and will actually increase insurance premiums for most Americans.

I have fought for years to enact commonsense reforms that would help slow health care cost growth and make the insurance market work better, particularly for small businesses. Before I entered politics, my wife and I ran a small business. We had shoe stores. We know firsthand how hard it is to meet payroll and provide meaningful benefits to employees. I understand how the current insurance market fails to meet the needs of many small businesses.

That is why I fought for real reforms that will actually help small businesses. In 2006, I introduced a small business health plan bill that would have saved the taxpayers about \$1 billion and would have provided health insurance to almost 1 million people.

The bill would have made commonsense reforms to the insurance market and given more leverage to small businesses to help them negotiate lower insurance premiums. The insurance industry, working closely with many of my Democratic colleagues fought to defeat my bill. Unfortunately, they were successful. We could not pass the cloture motion to proceed; we were short about three votes. Had we been able to get those three votes, we would have been able, with one amendment, to clear up the objections that were made during the cloture debate.

Since 2006, little has changed in the insurance marketplace. Health care costs and premiums continue to spiral upwards. The Kaiser Family Foundation reports that costs for small businesses with less than 200 employees—I consider that to be a pretty big business—rose by 4.7 percent from 2006 to 2007, 2.2 percent from 2007 to 2008, 5 percent from 2008 to 2009, and they are expected to rise next year.

Small businesses cannot continue to sustain these types of price increases.

They need and want reform and Congress should deliver reform. Congress should pass a bill that decreases the cost of health care and reduces insurance premiums across the board, not just for the poor, not just for the uninsured.

Unfortunately, the bills that Speaker PELOSI and Leader REID and President Obama are pushing through Congress will do little to address spiraling health care costs and will actually increase the insurance premiums most Americans pay for their health care.

Even worse, increases in premiums will come at a time of rising unemployment. The 2,000-page Pelosi bill and the 1,500-page Senate Finance bill will drive up costs, increase taxes, and expand the size of government. The non-partisan Congressional Budget Office, the administration's own official actuaries, the National Association of State Insurance Commissioners, and at least six other private studies have all reported that the Democratic leadership bills will drive up costs.

Actuaries at the consulting firm, Oliver Wyman, which did one of the studies, estimated these bills will increase premiums for small business by at least 20 percent. WellPoint, the largest Blue Cross Blue Shield plan in the Nation, looked at their actual claims experience in the 14 States in which they operate and concluded that premiums for healthier small businesses will increase in all 14 States; in Nevada by as much as 108 percent.

Even the Congressional Budget Office has said:

Premiums in the new insurance exchanges would tend to be higher than the average premiums in the current-law individual market.

Let me say again what the Congressional Budget Office said:

Premiums in the new insurance exchanges would tend to be higher than the average premiums in the current-law individual market.

When the 85 percent of Americans who already have health insurance hear the term "health care reform," they want Washington to do something that lowers the cost of their health insurance premiums.

Unfortunately, the bills Congress has developed will do the exact opposite. Our economy can't take the higher taxes, higher unemployment, and higher mandates these bills impose. Taken together, the new taxes, mandates, and regulations in these bills will cumulatively increase health insurance premiums for millions of Americans who currently have health insurance. These higher taxes, higher premiums, and higher costs are not the change the American people voted for. Unemployment is higher than it has been in decades. The housing market is in distress, and more and more middle-class Americans are feeling squeezed by irresponsible decisions being made in Washington. We all agree the health insurance market is broken and needs to be fixed. Everyone who wants health

insurance should be able to get it. They should not have to spend all of their hard-earned savings to do so. No American should be denied health insurance because they have cancer, diabetes, or some other preexisting condition. No one should be denied health insurance, period. These reforms are very important and long overdue.

We also need to enact commonsense reforms similar to the reforms I advocated in 2006 with small business health plans and then in 2007 and 2008 with my plan for 10 steps to transform health care in America. That was a step-by-step process that would get us to where all the promises are being made. It is on my Web site.

I urge the Democratic leadership to go back to the drawing board to develop bipartisan health care solutions that will actually reduce costs and make health insurance more affordable for small businesses and most Americans.

I yield the floor.

THE PRESIDING OFFICER. The Senator from Virginia.

NATIONAL CRIMINAL JUSTICE COMMISSION ACT
OF 2009

Mr. WEBB. Madam President, I rise to give my colleagues a progress report on the National Criminal Justice Commission Act of 2009, the goal of which is to create a blue ribbon national commission to take a long overdue and comprehensive look at our criminal justice system. This week the full Judiciary Committee is scheduled to consider this bill, and the markup would not have taken place without the strong support of Chairman LEAHY and Senators HATCH, GRAHAM, DURBIN, and SPECTER, all of whom have championed this bill. I express my appreciation to them and to other Members for all of the input and cooperation they have given.

I wish to begin by revisiting the problem that drove this legislation. This is a chart that shows the incarceration rate in the United States compared to other countries. I don't think a lot of Americans are aware that we have 5 percent of the world's population but 25 percent of the world's known prison population. When I wrote about the Japanese prison system as a journalist 25 years ago, Japan, with half our population, had only 40,000 people in prison. At that time, we had 580,000. Today we have more than 2.38 million prisoners in our criminal justice system and another 5 million involved in the process either on probation or parole. That is 7 million Americans involved in the criminal justice process.

It is important for us to understand, as we think about a way to fix it, that this is a relatively recent phenomenon in American history. We have not always had this type of incarceration rate. It stems from about 1980. Before that time—this chart goes all the way back to 1925—we had a fairly consistent incarceration rate. In this period, for a number of reasons—one of them being

the fact that as we changed a lot of our policies toward mandatory confinement of the mentally ill; our prisons have absorbed a tremendous population of mentally ill—we have four times as many people in prison in the United States who are mentally ill than we do in mental institutions today. They are not getting the care they need, and they are also clogging up the prison system. Also if we go back to 1980, when I showed on the chart the beginning of this dramatic escalation of people in prison, we only had 41,000 people in our prison system for drug offenses. Today that number is up to 500,000. This is State prisons, a comparison from 1980 to today. These are local jails, and these are Federal prisons.

At the same time—and it is important for us to say this—as we look at our criminal justice system, people don't feel any safer. This chart shows the percentage of Americans who believe crime is more prevalent than a year ago. In 2009, more than 70 percent in this country believe crime is more prevalent than it was a year ago. We have two phenomena here. We are locking up more people on a percentage basis than anyone else in the world. We have 7 million Americans involved in the criminal justice process, yet we don't feel any safer.

I have two theories about why this fear is prevalent in America's neighborhoods. Both of them speak for the need for this type of commission. The first is that we have been locking up far too many people, people whose transgressions could have been dealt with in more creative ways. As a result, we have hundreds of thousands of people who have been released from prison each year and are reentering American society hardened by their prison experience and without the kind of structured programs that would allow them to become productive citizens. They become recidivists. So we have more people involved in the criminal process than we would otherwise, and they are threatening our neighborhoods.

The second is that gangs have grown in size and impact, including sophisticated transnational drug cartels operating in cities across America. It is estimated that Mexican drug cartels alone are operating in at least 230 American cities and not simply along the border. Incidents on the border illuminate the severity of the problem, but clearly it is not a border problem. It is a national problem, and it is not simply a problem with Mexican gangs. In northern Virginia alone, it is estimated there are 4,000 members of MS-13, a Central American gang; 4,000 members is about 3 battalions of marines. Gangs are estimated to commit 80 percent of the crime in some locations. They are in many cases the primary retail distributors of drugs. Gang violence that affects so many of our communities speaks to the need to make sure our law enforcement officials have the time and the energy to

dedicate to going after the major problems that threaten communities—resources and the policies they need to go after violent crime.

The hundreds of thousands of men and women leaving prisons and jails today to return to our communities speaks volumes about the need to reexamine the availability of and the support for community corrections programs, including reentry programs, probation, and parole policies.

Once we started talking about these issues on my staff, as part of the Joint Economic Committee, holding hearings over the past more than 2 years, we began receiving messages, communications, and having contact with people from all across the country, people from every different aspect of the political and philosophical arenas that come into play wherever we talk about criminal justice and incarceration. It is an emotional issue from across the philosophical spectrum. I heard personally from Justice Kennedy of the Supreme Court, from prosecutors, judges, defense lawyers, former offenders, people in prison, police on the street. All of them agree we need an interrelated examination, a national commission to examine the criminal justice system and to come up with different types of approaches.

As former Los Angeles Police Chief William Bratton noted in his testimony in support of the commission:

We cannot use arrests as our only tool to deal with the crime problem . . . our problems are systemic, widespread, and growing, and only a singularly focused blue ribbon commission comprised of informed practitioners, scholars, policymakers and civil rights activists can adequately address the calculated formation of intervention and prevention strategies. Formation of this important commission is a major and essential step in the right direction.

That was from Los Angeles police chief and one of the most highly respected law enforcement officials in the country, William Bratton.

I introduced the National Criminal Justice Commission Act in March. The criminal justice commission would examine all of the elements involved in criminal justice in those specified areas which could then be voted on by the Congress. When this legislation becomes law, the first step for the commission will be to address a series of specific findings and to recommend policy changes. The commission will bring the greatest minds in the country together with a specific timeline to make specific findings and then give those recommendations regarding the entire gamut of the criminal justice system.

Since I have introduced the bill, we have gained the support of 35 Members of this body. We have also engaged in a dialog with more than 100 organizations across the political and philosophical spectrum, as diverse as the Heritage Foundation, the Sentencing Project, the Fraternal Order of Police, the National District Attorneys Association, the Cato Institute, the

NAACP, the American Civil Liberties Union, the American Correctional Association, the Prison Fellowship, the American Probation and Parole Association, and many others across the entire political spectrum. We have listened. We have learned. We have incorporated many suggestions and modifications to the bill.

For example, in the initial findings of the bill, we incorporated suggestions that we include the number of crime victims, advances in policing policies, decreases in violent crime and property crime, and the protection of civil rights and liberties. We added an examination of changes in policing as a result of 9/11, the cost and benefits of prevention and diversion programs, and an examination of the availability of re-entry programs. We also added requests that the commission identify effective practices in reducing crime and assisting victims; that it decrease, where possible, racial, ethnic, and gender disparities; and that it help law enforcement address the challenges stemming from combating terrorism and promoting homeland security.

We also expanded, importantly, the number of commission members to ensure better representation of State and local government. I wish to spend a minute on this for the understanding of my colleagues. This commission is designed to be bipartisan. It is to be composed of 13 members: the chairman, appointed by the President; four members coming from State and local governments, appointed by the President in agreement with the minority and majority leader and the Speaker of the House; 2 members appointed by the majority leader of the Senate, in consultation with the chairman of the Committee on the Judiciary; 2 members appointed by the Speaker of the House with the same process; 2 members appointed by the minority leader of the Senate; 2 members appointed by the minority leader of the House. It will be a 7-6 commission.

Through the course of many meetings, we found a solid consensus in support of a comprehensive review of the system. This represents our best effort to set politics aside and to find solutions that will allow us to ensure the safety of our communities while being smart about how we deal with crime in America.

Again, I appreciate the chairman of the Judiciary Committee scheduling a markup on this bill. I commend it to my colleagues and hope we can all join together in passing it this year.

I yield the floor.

THE PRESIDING OFFICER. The Senator from Missouri.

Mr. BOND. Madam President, I ask unanimous consent to speak for up to 10 minutes in morning business.

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

AFGHANISTAN

Mr. BOND. Madam President, yesterday Afghanistan's Independent Election Committee announced that a runoff election is no longer necessary, which means Afghan President Hamid Karzai has secured a second term.

Whatever your feelings about President Karzai, this peaceful resolution of Afghanistan's electoral mess should have brought a sigh of relief for anyone waiting with bated breath for our own administration's decision on whether to support General McChrystal's troop request, whether to support the President's plan for Afghanistan.

After all, according to the White House, President Obama's decision was "weeks away" because he was waiting to announce a decision until after the Afghan election was decided. But yesterday I read in the New York Times that the White House Press Secretary said the President's announcement was, once again, "weeks away." This is beginning to sound a little bit like Charlie Brown and the football, only the game the White House is playing has deadly consequences.

While the White House continues to dither and delay in Washington, American heroes and our Afghan allies are dying on the battlefield.

Last month was the bloodiest month in Afghanistan since the war started. As the people of Afghanistan see America's will waiver in Washington, the terrorists gain strength.

General McChrystal said last July we have only about 12 months to get in the troops necessary to reverse the momentum the Taliban has gained because their forces overwhelm the number of ISAF and trained Afghan troops we have on the field.

It is going to take some time, once a decision is made, to get the troops we need there to support General McChrystal's implementation of the President's plan.

So I call on President Obama to end this deadly indecision. Mr. President, please recommit to the very strategy you announced in March. Recommit to the "war of necessity," as you so eloquently—and rightly—called by name the conflict our troops are engaged in, in the villages and mountains of Afghanistan.

In addition to calling on the President to end the delay, I call on the pundits here in Washington to abandon their excuses to justify further delay. We have heard excuse after excuse, constant attempts to justify delay by some in the media and some on the far left. The latest red herring was the Afghan elections. Now that the election is resolved, the next excuse is corruption in Kabul.

Don't get me wrong. I agree that corruption must be tackled. In fact, I outlined the need to take on corruption in the "Roadmap to Success" for the region that I sent to then President-elect Obama, the Defense Department and the intelligence agencies and his national security team last November. But don't forget this critical truth: "All politics is local," and so is security.

Everyone in Washington is all too familiar with that truth, but it is undeniable in the mountains and villages in Afghanistan. The Taliban is not waiting for a Jeffersonian democracy to flourish in Kabul as they continue to

kill our troops and attack the people of Afghanistan.

Yes, we must tackle corruption at every level. There are lots of other challenges we must take. But security in Afghanistan will not come from Kabul. It has to be built village by village, valley by valley. The knowledgeable professionals who advise us in public and in classified sessions have told me, time and time again, that security must come first.

I have spoken on this floor many times about the need for smart power. That is military power backed by economic development, better governance, the provision of basic services. But that additional element—all the other things besides military force—awaits the establishment of security so the people we are working with can feel secure and not be subject to intimidation by the Taliban.

For too long, the international community has been too fixated on the machinations of Kabul and questions about various leaders who have been elected by the people of Afghanistan and not focused enough on the fights in the villages and the valleys.

I am proud to say our brave American National Guard units in provinces in Afghanistan are showing what can be done when you provide security, along with the economic development tools to provide a better life and a way forward without the Taliban control over their communities.

We will only succeed when the people of Afghanistan feel secure from the intimidation and violence of the Taliban, when Afghan forces can be developed to the point where they can protect the population for good, when local governance begins to deliver schools, wells, and fundamental institutions for economic development and justice.

These institutions, from national security forces to economic development, to the institutions of justice—courts, jails, cops—will only stay if Kabul organizes itself to support them. But the progress we must commit to now is a necessary precondition. It is imperative in the rural areas now and all the regions to establish that security. Then it is important for them to work from the bottom up to secure the government they want in the capital.

The time for excuses is over. Every day we delay, the enemy grows stronger. Our troops and allies, who are beginning to be dispirited by our delay, are essentially being told: Wait. We are not sure what you are doing is worthwhile. The people of Afghanistan whom we are counting on to side with us rather than the Taliban are beginning to wonder: Is the United States going to pull out again, like we have done too often in the past?

The President and this Congress need to send a signal today to the Afghan people that America will not abandon them in this critical fight against terrorism. Our allies need to know we will remain by their sides to defeat this

enemy together. Our enemies need to know they cannot wait us out, that America will be strong.

If we fail to deliver this message and to commit the troops General McChrystal has asked for, the dangers are very real. Let there be no doubt, from everything we have heard, everything we have learned, if we do not send the additional troops, if we try to stand off and use a fire-and-fallback policy—that failed in Iraq until we brought in the counterinsurgency strategy that our NATO allies tried without success in Afghanistan—not only will the Taliban come back in, they will come over the mountains, and Taliban rule will be established in Afghanistan. With Taliban rule comes their sometimes witting, sometimes unwitting allies—al-Qaida—which will use it to establish the same kind of base they had in Afghanistan prior to the 9/11 attacks. Failure will embolden the enemies of freedom who launched the attacks of 9/11 from Afghanistan.

I call on President Obama to end this indecision, commit to his own strategy—which he announced so powerfully last March and which I was proud to support on the floor—and show the American people and our allies the same resolve and determination I heard in his words this past spring. He said:

Our spirit is stronger and cannot be broken; you cannot outlast us, and we will defeat you.

It is time we delivered on that promise.

CZECH AND SLOVAK REPUBLICS

Madam President, I also have a statement in recognition of the tremendous success that has occurred in the Czech Republic and the Slovak Republic since 1989. When the Soviet Union dissolved in 1989, the people of Czechoslovakia joined together to oust communism and adopt democracy.

We have seen tremendous success in the past 20 years. Remarkable changes have taken place, as both the Czech Republic and the Slovak Republic have sought and achieved membership in NATO and moved to the kind of progress and peace we expected for them.

In 1989 the former Soviet Union was in the final throes of a slow demise which concluded in 1991. Many of the former Soviet republics were in a state of uncertainty as the situation deteriorated further.

In the fall and winter of 1989, the people of Czechoslovakia joined many other recently separated republics and chose to oust communism and adopt democracy through the Velvet Revolution. Twenty years ago the country then known as Czechoslovakia freed itself of communist control, instituted democratic elections, and set out to adapt its command economy to the free market.

The remarkable swiftness which ushered out the former government while maintaining relative order and peace was inspiring to the world as we watched apprehensively the events un-

folding. Czechoslovakia's move away from communism and toward greater political independence, led to the eventual separation of the country into the current Czech Republic and Slovak Republic.

During the past 20 years, remarkable change has taken place as both the Czech Republic and Slovak Republic have sought and achieved membership in the North Atlantic Treaty Organization, NATO. The Czech Republic was accepted as a member of NATO in 1999, as was the Slovak Republic in 2004. Both nations are now formal members of both NATO and the United Nations, and their military units now contribute to important missions throughout the globe and continue to play a strategic role in the region.

Furthermore, the Czech Republic has a local tie near to my heart associated with its NATO admission. The documents of admission were signed at the Presidential library of Missouri's own President Truman in Independence, MO. As we work to pursue our mutual interests, I wish both the Czech Republic and the Slovak Republic continued success and prosperity as we work toward mutual goals.

Madam President, I yield the floor.

RECESS

The PRESIDING OFFICER. Under the previous order, the Senate stands in recess until 2:15 p.m.

Thereupon, the Senate, at 12:39 p.m., recessed until 2:15 p.m. and reassembled when called to order by the Presiding Officer (Mr. CARPER).

The PRESIDING OFFICER. The Senator from Michigan is recognized.

UNEMPLOYMENT COMPENSATION EXTENSION ACT OF 2009—Continued

Ms. STABENOW. Mr. President, I wish to speak both about the substance of the amendment in front of us that I understand Senator REID and the distinguished chair of the Finance Committee, Senator BAUCUS, have put forward, the substance of it and supporting it, and also on the time it has taken us to get to this point, which is of tremendous concern to me. I know it is also to many other people, certainly people in the great State of Michigan, which I represent.

I believe we are on week 5 of trying to extend unemployment benefits for people who, through no fault of their own, have lost their jobs, are looking for work, trying to hold things together, trying to keep a roof over their families' heads and keep food on the table, and Michigan is getting cold, so the heat is coming on. They are trying to do that while looking for a job.

People want to work. People in Michigan work and they want to work. They are skilled and they are ready to work. We know that for every one job available, there are six people trying to get that job. So we are in an extremely difficult time. That is why we extended

unemployment benefits in the Recovery Act. I thank our President. We had challenges under the previous President in being able to do that. President Obama put that forward, and I am grateful for his continual support and all of our colleagues who supported that.

But now we find that even as things very slowly begin to turn in the economy, every day we still have 70,000 people who are going off of their unemployment insurance benefits and they still cannot find a job. These are middle-class Americans who have played by the rules, and what is happening is not their fault. They are trying to keep things going until they can find a job.

We have now spent weeks and weeks trying to get to this bill. Since we started debating this on the Senate floor, as of today, 186,000 more people have lost their benefits and are trying to figure out what in the world they are going to do for their families. That is the situation we are in.

We have in front of us a very important amendment that has been worked on on a bipartisan basis. I congratulate everyone who worked on this together. I hope we will pass this quickly and move on and send the right message to people in this country that we get it, that we understand what is going on for families.

Let me speak about the amendment, and then I will speak about the process.

The amendment would allow an extension of 14 weeks for anyone who is currently unemployed in their State and qualifies for unemployment insurance and an additional 6 weeks, totaling 20 weeks, for people in my great State who have been hit too hard for too long. So we need to get this passed.

There are other provisions that have been combined with this. One of the other successes—in fact, I am proud, as the original author of cash for clunkers, to have Congress talk about that and the first-time home buyers tax credit. That has helped the economy. We know there is an expiration of the first-time home buyers \$8,000 tax credit, so we extend that. There are other provisions in there as well.

There is another provision I am proud to have helped champion in the Finance Committee and now in this legislation, which is to allow companies that are struggling in this economy to keep themselves going, to keep people employed, to keep their lights on, and to be able to get immediate help with the net operating loss carryback—it is the way they calculate their losses—which will allow capital to immediately flow for small, medium, and large companies that are cash-strapped. That capital will help businesses be able to hire people, purchase equipment, or to turn their businesses around to be able to keep things going and keep their businesses going. That is in this provision as well. It is an important bipartisan effort.

According to a study by the National Bureau of Economic Research, the expansion we are talking about would inject \$34 billion into businesses and our economy immediately.

This is about jobs. This is about supporting our small businesses that are having a very tough time getting capital. The CEO of the Home Builders Association claims that tax credits from the tax provisions would provide midsize and larger homebuilders enough funding to save 30,000 jobs that would have been lost without this change. So we have an important provision that has been worked on in a bipartisan way.

These items were something that we as a majority—our leader had come to the floor to support now for some time, to say let's get on with it; we need to support these provisions for homeowners, businesses, and help those who are currently unemployed. Let's get on with it. We are now at a point to vote on this amendment. What concerns me is the time it has taken us to be able to do that.

Over and over again, we have seen a pattern this year. In fact, we have seen 85 different times that the party of no has objected over and over to bringing up legislation—to even bringing up the unemployment legislation. It is a very simple thing for the leader to come to the floor to ask unanimous consent to go to a bill. But we are seeing objections over and over. Every time there is an objection, we are required to go through our own process. We find we have to file a motion called a cloture motion. You have to wait 2 days, and at the end of that 2 days, you vote. If there are 60 people who vote to proceed, you do that. We are finding over and over that we are getting overwhelming support to proceed.

At different times, we object to things with which we substantively disagree. That is our right as Senators. But we got to this cloture vote, and 87 people voted to go to the unemployment benefits legislation and to this amendment. So there is not an objection. This is about winding out the hours on the clock so we cannot get to health care, we cannot get to other jobs measures. And health care is about jobs, certainly in my State. When you lose your job, you lose your health care. We have seen that over and over.

Now we are in the process of this 30 hours. We voted to bring the debate to closure on this amendment we have, which is bipartisan, dealing with housing and support for businesses and the unemployed. Yet we have to go another 30 hours, which won't end until about midnight tonight, before we can actually vote. Then we will turn around and again there will be something else. The next move the leader tries to make, there will be an objection and we will have to wait 2 more days. We will vote on whether to proceed. Most of the time, everybody votes to proceed. Then we start a 30-hour clock,

and then we vote on it. It goes over and over. Eighty-five different times, we have either had this process or an objection.

Mr. President, I just wanted to raise this for the American people as we move forward now. Everyone knows we have big problems. We can have honest differences about how to address those. That is our job. But we are seeing over and over a party of no, no, no stopping things. Heaven forbid that this President be successful or this Congress be successful. That is of great concern to me, in a State with the highest unemployment in the country, where every day we have people saying: Why in the world can't you act? Why can't you get things done?

The reason we are finding ourselves in this position now is an effort to slow-walk the entire year. It is amazing. We have actually gotten more done in this year than at any other time since FDR and the Great Depression despite all of this. Now we have come to a point where, by the end of the year, we want to have something extremely important accomplished on health care, and that relates to jobs and the economy. We are seeing objection after objection.

I am hopeful there will be a willingness to step up and debate our differences and have a vote. Let's just have a vote and work together to be able to solve problems. The American people are very tired of this. They want us to get something done. We want to get something done. We are committed to it whether it takes 30 hours and days and objections or whether we can just do this and come together. Either way, we are going to get this done. It is important to understand that real people are being impacted every single time there is an objection. Right now in this economy, the American people deserve better than what has been happening.

The PRESIDING OFFICER. The Senator from Idaho is recognized.

Mr. CRAPO. Mr. President, I ask unanimous consent to speak as in morning business.

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

HEALTH CARE REFORM

Mr. CRAPO. Mr. President, I wish to talk this afternoon about health care and specifically the impact of some of the proposals we have on the cost of health care insurance. Before I do so, I think I must respond to some of the comments that were just made by the Senator from Michigan accusing the Republican Party of being the party of no. It seems we are starting to get to a point here where bipartisanship is not being achieved. But it seems the definition of bipartisanship is becoming "either do it our way or you are the party of no."

It seems to me what we need to really do is step back and take a couple of deep breaths and start working together on legislation. I will use the example the Senator from Michigan used, the unemployment insurance com-

pensation legislation. As she correctly indicated, there were 87 votes to move forward with this legislation. This is not an effort to obstruct the legislation. The effort that caused us to slow down a couple of days on this legislation was an effort to improve it. In fact, had we not slowed down a couple days, the bill would have gone through and would have been passed, but it would not have the home buyer tax credit in it for the purchase of homes. It wouldn't have the net operating loss carryback provisions in it. They are both important provisions for creating jobs rather than just providing a safety net for those who lost jobs. The bill has been improved, and I think it will be further improved by the time we have the final vote.

It is that process of give-and-take, trying to work on and improve the legislation, that occasionally causes the Republican side to say: No, we are not going to move forward until we have an opportunity to present some amendments and until we have bipartisan work to help improve the legislation. That is what happened in this case.

In reality, the majority party has 60 votes. If they want to proceed on anything, they can do so. In this case, on the unemployment insurance bill, they did stop and allow us another couple of days to work on it and improve it with the home buyer tax credit and the operating net loss carryback provisions.

Mr. President, I will now address the question of health care. It is interesting. One of the comments the Senator from Michigan also made was that we cannot get to the health care bill because we are spending our time on the unemployment compensation bill. The reality is that we don't even know what the health care bill is yet. The bill was crafted behind closed doors in the Capitol Building, and it is being scored by CBO. We don't know when CBO will have the full bill to score or whether the full bill has even been drafted. We don't know what it contains.

That is in stark contrast to the President's commitment on how this process would proceed. The President stated in the San Francisco Chronicle in January of last year:

These negotiations will be on C-SPAN . . . and the public will be part of the conversation and we will see the choices that are being made.

He indicated that everybody should be in the room and it should be broadcast on C-SPAN. Instead, there is a very small group of people from the White House and the majority leader's office and probably a couple of senior Senators he is working with who know what is in the bill. The rest of us don't know.

Frankly, the reason we are not moving to the bill has nothing to do with procedural maneuvers on the floor. It has to do with the fact that the bill is not drafted yet or prepared and ready to bring forward.

Let me move to the actual bill itself. In this context, I have great concerns

with the legislation that is being brought forward on many different fronts. It expands the Federal Government by about \$1.2 trillion, depending on how you count it; some say up to \$1.8 trillion. It imposes massive new taxes and cuts in Medicare of equal amounts to balance it off and make it appear it is not increasing the deficit. By cutting Medicare, it seriously jeopardizes the quality of health care we provide to our seniors in this Nation and, as I indicated, the massive new taxes that are involved, which fall squarely on the backs of the middle class, violating another one of the promises President Obama made. In doing so, it does not achieve the very objectives our citizens in the United States ask of us in health care reform.

What am I talking about? That is what I want to focus the rest of my remarks on today.

When you ask most Americans, Do we need to reform health care in the United States, they will say yes. What they mean when they say that is they are tired of the double-digit, skyrocketing inflation of the cost of their health insurance and the cost of medical care in the United States, and they think Congress should do something about it, that Congress should "bend the cost curve down"—that is the phrase that has been made popular—and they believe Congress can do something about it and help control these skyrocketing costs of health care.

They also believe we should try to find a way to get access to those who are needy and unable to purchase their own insurance. They know we are providing for the cost of health care for those who do not have insurance and they do get it in a much more expensive way and in a way that does not give them the quality of health care they should get. That is what Americans think of when they are asking for health care reform. But center in the focus of the American people out of what they want out of health care reform is control of the costs of health care and control of the skyrocketing costs of the insurance they pay.

On that issue, the bills before us fail dramatically because not only do they grow the Federal Government, not only do they increase taxes, and not only do they deeply cut Medicare, they will increase the cost of health care insurance and increase the cost of medical services in our country beyond what growth they would have seen without the legislation.

I will go through a couple of examples, focusing on the bill that went through the Senate Finance Committee. It includes, as I have indicated, significant amounts of taxes and different kinds of taxes on different parts of the economy. Both the nonpartisan Congressional Budget Office and the Joint Committee on Taxation have stated that a number of the taxes included in the Senate Finance Committee bill will be passed on to consumers in the form of higher premiums.

During the Finance Committee markup, CBO Director Douglas Elmen-dorf stated:

Our judgment is that that piece of legislation—

Referring to the provisions increasing taxes in this legislation—would raise insurance premiums by roughly the amount of the money collected.

Meaning in one of the particular cases there is a \$6.7 billion tax imposed on insurance companies. His point is that \$6.7 billion tax is going to raise the cost of insurance.

Another example in the bill, there is a tax on medical devices. Both CBO and JCT have said this tax on medical devices will be passed on to patients, increasing their health insurance premiums and increasing the prices on everything from powered wheelchairs to pacemakers.

Another example is the tax on insurers. I mentioned the tax on insurers is what generated this answer. CBO and Joint Tax have said this tax will be passed through, and some estimates on this passthrough show this tax on insurers could raise premiums for American families by as much as \$500 a year.

The Congressional Budget Office sent a letter to Senator GRASSLEY last week in response to his inquiry about this provision and stated:

While uncertainty exists, we assume that a very large portion of this excise tax on purchased insurance will be borne by consumers in most markets, including in some markets with a high level of concentration among market participants covered by the proposed excise tax.

Still quoting the letter:

While consumers or employers may respond by changing their insurance coverage from more expensive coverage to less expensive plans to offset any potential price increase, this behavior, too, is properly characterized as the consumers bearing the burden of the excise tax by accepting lower quality (for example, a more restricted physician network) for the same price rather than paying a higher price for the quality [that they would have had had there been] no tax.

Again, still quoting from the letter:

Our estimate is that the premiums for purchased health insurance policies, including the tax liability, would be between 1.0 and 1.5 percent greater than they otherwise would be as a consequence of the industry fee for calendar years 2010, 2011, and 2012.

Joint Tax did not estimate the years beyond that and were not able to do a distributional analysis based on income as to where those with higher premiums would most likely fall. But we know, again, it is almost certain it will hit those in the middle class.

Premiums are also going to rise because of the new excise tax on so-called Cadillac health plans. Many believe that companies will respond to this new tax by either passing the costs on to consumers or cutting benefits so the plan can avoid the tax. Inevitably, like the AMT, the alternative minimum tax, the impact of this tax will be passed along to more and more people, not just those with Cadillac plans, either in the form of higher costs or lower benefits.

That is how the tax-and-fee provisions portion of the bill impact health insurance. And there are many more. But what other provisions in the bill impact the cost of insurance? The insurance mandates in the bill will have similar impacts on raising the cost of health care insurance for Americans.

The Finance Committee bill also contains a number of market reforms that will result in these higher premiums. For example, the new federally mandated rating rules will result in a huge premiums increase for younger and healthier individuals.

In my home State of Idaho, studies have shown that a 20-year-old male can go out today and buy a policy in the individual market for \$67.63 a month. A 20-year-old female can buy a policy for \$94.35 a month. If the insurance rating reforms in the Finance Committee bill are enacted, those exact same policies would rise to a level of \$166.75 per month. That is a 147-percent increase for a 20-year-old male and a 77-percent increase for a 20-year-old female.

These figures, frankly, are optimistic for several reasons. They assume that the young and healthy will continue to purchase insurance. If they do not continue to buy insurance, the premiums would likely be even higher than those which were shown in the studies.

In addition, these rate estimates assume a 4-to 1 age rating band. The House bill introduced last week contains a 2-to-1 age rating band mandate, meaning that the rates for the young and healthy, again, would be made significantly worse.

In addition, many of the proposals in Congress contain mandates about what an insurance policy must include. Here is an example of what we can see in that context: An older gentleman wanting to purchase insurance in the new exchange to be created may not be able to save money by enrolling in a more basic plan. Instead, it would not be possible for him to enroll in a policy that does not include maternity care and newborn care, something he may not want or need to purchase.

The actuary firm of Oliver Wyman, in a study commissioned by Blue Cross/Blue Shield, concluded that insurance reforms in the bill and the minimum required benefit levels in the Baucus bill could drive up family premiums for new coverage by as much as \$3,024.

My point is, both the taxes and fees and the insurance mandates will generate higher premiums, not lower premiums, for Americans, exactly the opposite of what Americans are asking for in health care reform.

Similarly, both the House bill and the Baucus bill, and what we expect to see in the Senate bill when it finally comes out, will have a significant expansion of moving those in lower income categories into Medicaid rather than providing a way for them to obtain insurance.

The Baucus bill contains an enormous expansion of Medicaid, up to 133

percent of poverty. That means 14 million more people are going to be enrolled in the Medicaid Program, the largest expansion since it was created in 1965, a program that financially is going to hit the cliff soon. We know we are undercompensating for medical services in Medicaid, which ultimately results in those undercompensated costs of health care being borne by the rest of the insuring population in the United States with higher premiums.

So what are we going to do? We are going to expand a program that drives a lot of its costs off onto the private sector so we can avoid the need to identify the way to move forward and develop a true reform that will enable those who are needy and uninsured to be able to obtain insurance. Instead, we are going to push them onto the Medicaid system and, again, drive up premiums.

Those who are pushing this legislation have responded to some of these arguments by saying: The subsidies we are providing in the bill for those with lower incomes will help to reduce insurance costs. If you focus on those who receive the subsidies, of course, their insurance costs may go down. But this is true for only a very small number of Americans.

The reforms in the Finance bill will raise health care costs for most Americans while lowering them for some through subsidies. But there are several important points to make on the subsidy argument.

First, the credits and subsidies are only available for those who receive insurance through the new exchange. In other words, if you get your insurance through your employer, which most Americans do, you do not qualify for any subsidy support.

CBO has estimated that only 23 million Americans will receive insurance in that fashion. If you do the math, that represents 8 percent of the 282 million nonelderly Americans. Why do we take the nonelderly number? Because elderly Americans are covered by Medicare.

Let's put up a chart. The subsidies are not available for individuals who get insurance through their employer and, instead, those individuals will pay higher premiums for those who receive the subsidies. Here is the way it works out. You have about 185 million Americans who will be paying more taxes and higher health care premiums, and about 18 million Americans who will actually see their health care premiums go down because they will receive a Federal subsidy.

While it is true that the subsidy will help reduce the health care costs of those who receive it, it is not true that the health care costs for every other American are going to go up, again I want to point out, in two significant ways. The 185 million Americans who are not participating in the subsidy will pay more in taxes—and significantly more in taxes—and will pay more in their health care insurance

premiums. That is not the kind of reform, again, that the people of the United States are asking for.

One last point, and that is about this proposal to have the Federal Government step in and create a government health care company. A government-run health care insurance company is promoted by saying we need a competitor for the private sector. I think most Americans see through that. But last week, CBO released their score of the House bill which creates just such a government-run health care company. Their score shows that the new government plan would typically have premiums that are higher than the average premiums for private plans.

What is CBO saying? The CBO letter then states that although the government plan would likely have lower administrative costs than the private plans—which is one of the key arguments that is often made—the government plan would—and I am quoting from CBO—“probably engage in less management of utilization by its enrollees and attract a less healthy pool of enrollees,” resulting in higher premium costs in the government plan.

So now what do we have? We have a government plan into which we are going to push a lot of Americans, unwillingly, which will charge higher premiums than the private sector. We have taxes, penalties, fees, and mandates being imposed on the private sector that are going to drive up their premiums as well. It is all justified by the argument that we need to somehow create a government control of health care so we can reduce the costs. There are other ways to reduce the costs. I don't have time in my remarks today to get into those, but there are a number of proposals we do know about for which we have bipartisan support that will help us address that cost curve.

It is my hope we will reject these proposals that take us down the wrong path and result in the wrong solutions for Americans in health care reform and begin focusing on what I started out with—that cost curve about which most Americans are so concerned. We can drive down that cost curve without raising taxes, and that is where this Congress ought to be spending its attention.

With that, I yield the floor.

The PRESIDING OFFICER. The Senator from Tennessee.

Mr. ALEXANDER. Mr. President, how much time do I have remaining?

The PRESIDING OFFICER. There is no order on time, so the Senator is free to proceed.

Mr. ALEXANDER. I thank the Presiding Officer.

I noticed the Senator from Michigan was on the floor earlier, and she had a chart which said: “85 Times No.” I think she should have turned it around and faced it toward the Democratic leader. That means that 85 times the Democratic leader has said no to Republicans: No, you can't offer amendments and we are going to cut off de-

bate. We have had this discussion many times. The Senator from West Virginia, Mr. BYRD, is the expert on this. There are two things that make the Senate unique. One is virtually unlimited debate and virtually unlimited amendments. So if you are from a smaller State, such as Tennessee or Delaware or anywhere in this country, your citizens can send you here and, even if you are in the minority, you are allowed to speak. Your voice can be heard and you are allowed to offer amendments.

We have procedures for cutting that off, but we only do it on rare occasions. So what the Senator from Michigan is basically saying is—and I don't believe I would bring this up, if I were she—that 85 times the majority leader has cut us off and said: We are not going to hear from you. So I think that argument is an argument we should have at the appropriate time, but I have a different point I would like to make.

I would like to continue the health care discussion because I think we are making some progress. One of the most eloquent and effective speakers on the Democratic side of the aisle is the assistant Democratic leader, the Senator from Illinois, who is a good friend and a person I admire a great deal. Yesterday, he came to the floor and asked: Where is the Republican alternative on health care and how many pages does it have? He heard me say the other day that the era of the 1,000-page bill is over because we have a 2,000-page bill from the House of Representatives on health care. So he says: Well, where is the Republican health care plan? How many pages in it?

The Senator from Illinois was quite proud of the fact that I couldn't say how many pages were in the Senate Democratic plan, but of course I haven't seen it. Almost no one has seen it. It is being written behind closed doors. This was supposed to be the era of great transparency; that we would all know what was going on. President Obama, to his great credit, said: We will have all this on C-SPAN so you will know if the drug companies or if the insurance companies or if the lobbyists are in there writing the bill. So what do we have? We have the majority leader and two Democratic Senators and some people from the White House behind closed doors writing the health care bill.

Of course, we don't know exactly how many pages it will have because we aren't let in the room. We can't see the bill. We can't count the lobbyists, if they are there; we can't count the companies with which deals might be made, if they are there. We don't know. But here is what we do know. We do know the HELP Committee, on which I serve, passed an 839-page health care bill. We do know the Senate Finance Committee passed a 1,502-page bill, and we know the House of Representatives is working on a 1,990-page bill, not counting the physicians reimbursement fix, which is bound to push it over 2,000 pages.

The pages in these bills are going up faster than the national debt, and it is an issue with the American people. So until the various writers emerge from behind closed doors, we are going to have to go with what we have, which is a 2,000-page congressional Democratic health care bill, of which the Wall Street Journal editorial said yesterday, when fully implemented, would cost \$2 trillion over a 10-year period of time.

Here is what else we know about the 2,000-page bill. It will raise premiums. The Senator from Idaho just spoke to that. It will cut more than \$500 billion in Medicare, and it will cut it from Medicare to spend it on a new entitlement program, even though the Medicare trustees say Medicare is going broke in 2015 to 2017. The Senator from Kansas said it is akin to writing a check on an overdrawn bank account to buy a big, new car. The banker wouldn't let you do it, and the American people shouldn't let us do it.

There will be higher taxes. Everyone understands that the \$1 trillion, fully implemented over 10 years, will mean higher taxes. Who is going to pay those? Not the medical device companies, not the insurance companies. They are going to pass them right on to whom? The American people—the 250 million of us who have health insurance premiums. So our premiums are going to go up.

There will be more debt. Fortunately, on the first vote we had on health care the other day, 13 Democrats, with all 40 Republicans, said: No, we are not going to start off this debate by adding $\frac{3}{4}$ trillion to the national debt, even for the worthy purpose of fixing the physicians reimbursement problem, which we all want to fix. We are going to have to find some way to pay for that within the health care bill, within the spending we have.

We now have a government-run plan. I have always thought that was a little like President Obama saying: In order to keep Ford Motor Company honest, I am going to put the government into the car business. Well, we nearly have, but that usually isn't the way we do things in the United States. But we are going to have a government-owned, government-run health care plan. Of course, we already have two—one is Medicare for seniors, and we have a government-run plan that States can “opt out of” called Medicaid.

The Presiding Officer, the former Governor of Delaware, and I both know from our previous experience it is a big problem. Medicaid and Medicare have been going up at the rate of 8 or 9 percent a year for many years. State budgets dealing with Medicaid only go up 2 or 3 percent for schools and roads and universities. So what happens is, when the Governor of Delaware or the Governor of Tennessee or the Governor of California sit and make up the budget, you get to the end of the line and there is no money left for higher edu-

cation because we put it all into Medicaid. That means tuition goes up or services go down.

With a government-run plan—and this is something the American people are just now beginning to realize—millions of people who now get their insurance from their employers are going to lose it. They are going to lose it because their employer is going to look at this big, new bill and say: I can't afford this. I am going to pay the penalty. I am out of the health care business, and you can go into the government plan. So all 177 million people who have employer health care insurance run a risk with a government plan—under this framework we are discussing, that we haven't been able to see yet—that an increasing number of employers will say: I am out of here. We will let the government provide the insurance. Suddenly, you will find yourself in the government-run plan.

What happens in the government-run plan? Some things are good about Medicare—the government-run plan for seniors—and some things are bad about Medicaid, which is the largest government-run plan. One thing bad about it is, 50 percent of doctors will not see new patients because their physician reimbursement is at about 60 percent of what physicians make when they go to a private insurance company. In Medicare, it is not as bad as that. It is about 83 or 84 percent of doctors are paid what they would get paid if they saw a patient with private insurance. So if you lose your insurance and you end up in the government-run plan, you may end up in a plan such as the Medicaid plan, a government-run plan where 50 percent of the doctors will not see new patients.

The Governors of the States are in a state of apoplexy—would be about the only word to describe it—because they are in the worst shape they have been in dozens of years. I know in the State of Tennessee there are \$1 billion in just cuts. Everything has been cut, prices are going up, and people are being laid off, even though we have a very conservative, well-managed State. Yet one of the ways being proposed to pay for this bill is to shift some of the cost—about \$34 billion at least—to States. Governors—both Democratic and Republican—are saying: Please don't do that to us. We can't afford that. We don't have the money for it. We have to balance our budget. If Washington wants to expand Medicaid, Washington should pay for Medicaid.

Higher premiums, Medicare cuts, higher taxes, more debt, government-run plan, millions losing coverage, inevitable rationing, States complaining, some going bankrupt, and a \$2 trillion cost is not health care reform. But the assistant Democratic leader asked a good question. He asked: What is the Republican plan? If our plan has 2,000 pages, how many pages does your plan have? Well, I would say, with all respect for him, that if he is looking for someone with a wheelbarrow to wheel

into the Senate Chamber a competing 2,000-page Republican bill costing \$2 trillion, he is never going to see it. He will be looking in vain because that is not what we propose. We have been saying, over and over again on the Senate Floor and in other places, we are going in the wrong direction; we need to start over; our goal should be to reduce costs—the cost to each of us who pay premiums, the cost to all of us who have to pay the Federal Government debt. We should set a clear goal of reducing costs and move step by step toward that goal of reducing costs to reearn the trust of the American people.

Americans instinctively distrust these comprehensive, change-the-world, never-mind-the-cost, 2,000-page risky schemes, one of which is the health care plan that is coming toward us. We have proven in this Chamber we don't do comprehensive well. We had our best Senators on both sides of the aisle working hard on immigration—Senator Kennedy, Senator MCCAIN, Senator KYL, Senator Martinez—and what happened? It fell of its own weight. We bit off more than we could chew. The economy-wide cap and trade is running into the same problem. So is health care.

With taxes, mandates, surprises, debt, and more Washington takeover, we are scaring the daylight out of the American people with these proposals. Instead of that, we on the Republican side believe we should have health care reform, but its goal should be reducing costs, and we should go step by step toward that goal. Going step by step in the right direction is one good way to get our country where it needs to go.

So instead of a 2,000-page congressional Democrats' health care plan, here is the Republican plan, and I have counted the pages. No. 1, small business health care plans. This leverages the number of small businesses and allows them to pool their resources and offer health care to more Americans. That is 88 pages, proposed by Senator ENZI. No. 2, allow Americans to purchase health care across State lines to encourage competition—30 pages, proposed by Senator DEMINT. No. 3, reduce junk lawsuits. Medical malpractice lawsuits drive up the cost of health care. There is some question how much it drives it up, but there is no question it drives up the cost. That is Senator GREGG's bill on that, and it is 19 pages. No. 4, equal tax treatment for health care. That is Senator BENNETT's bill, which is 21 pages. No. 5, health information technology—a subject we should be able to agree on in a bipartisan way—is 13 pages, by Senators COBURN, BURR, and ENZI. No. 6, health care exchanges, creating more of those for people to look for the lowest cost insurance. That takes eight pages in the bill, proposed by Senators COBURN and BURR. No. 7, Senator LEMIEUX, one of our newest Senators, proposed a bill on the subject of waste, fraud, and abuse. We know that is a scandal, particularly with Medicaid and Medicare.

The Government Accountability Office has said that \$1 out of \$10 in Medicaid is waste, fraud, and abuse, accounting for \$32 billion a year, which is \$320 billion over 10 years.

So there are seven steps in the right direction of reducing cost. Taking just one of those steps—the small business health care plans, S. 2818, leveraging strength in numbers—here is what the Congressional Budget Office says about the small business health care plan: 750,000 more Americans would be covered. These would be people working for small businesses. It would lower the premium costs for three out of four employees. It would reduce Medicaid spending—and that is the program that is causing the States so many problems—by \$1.4 billion.

So why don't we pass that? Why don't we pass it? Why don't we take that one step toward reducing costs and then take a second step and a third step and a fourth step? Gradually, as we reduce costs, as the small business health care plans will do, we can add uninsured people to the rolls. That would reearn the trust of the American people. That would be something we could actually get done. That would be something that would be bipartisan, would create confidence, and help us reach the goal we have set for ourselves.

We have clear choices. We have 2,000-page bills or the bills I just added up—those seven steps proposed by Republicans, many of which have Democratic support as well—that would be 200. So 2,000 pages or 200 pages; reduce premiums or increase premiums; reduce debt or increase the debt; reduce Medicare or make Medicare solvent; higher taxes or no tax increase.

The American people want real health care reform. They want to reduce costs and add coverage, as we can afford it. They are properly skeptical of grand and risky schemes that claim we in the Senate and the House are wise enough to solve everything at once. They know if we try to do that, we are more likely to mess up everything at once. They know about the law of unintended consequences.

To re-earn the trust of the American people, we should set a clear goal. That goal should be reducing the cost of health care; the cost of health care when you pay your premium and the cost to your government, the cost of its debt. We should move step by step in that direction. That is the Republican health care plan.

I yield the floor.

The PRESIDING OFFICER (Mr. UDALL of Colorado). The Senator from Rhode Island is recognized.

Mr. REED. Mr. President, I again rise to urge my colleagues, particularly from the other side, to join us in passing the extension of unemployment insurance, without delaying action through more procedural votes. We are in the midst of a very complicated and important debate on health care and we are being urged to move forward on

that. But something that is pressing, in my view, is the need to extend benefits to the people who are running out of the ability to support their families. By my count we on this side of the aisle have been trying for days to do something that the other body did, with bipartisan cooperation, in a vote of 331 to 83 under Suspension of the Rules.

As the President of the Senate knows, this is the way the House moves noncontroversial legislation forward without any delay. It is not used for major legislation such as this, typically, so that underscores the bipartisan solution the House proposed to us more than 25 days ago.

To compound matters, the other side is now doing more than just delaying unemployment benefits for millions; they are also needlessly delaying tax cuts for small businesses and first-time home buyers. This is a very disturbing precedent. The American people, as my colleague was talking about, want to see some results. They want to see us move on issues that are critically important to them. What could be more critical and more important than extending unemployment benefits to those who have lost their jobs and are in a very difficult economy? What could be more important to our economy, and to so many people, than extending the further benefits of the tax treatment of new home buyers, which has produced an increase in sales and investment? This is the time to move forward and to also help small businesses. The legislation before us includes not only the extension of unemployment benefits and the tax break for home buyers, but also the preferential tax treatment for small businesses in terms of their ability to access losses in the past.

With the winter and the holidays approaching, this legislation cannot come soon enough for millions of Americans who are feeling the effects, not of the last 8 months but of the last 8 years, of the Bush economy. This legislation will help people literally put food on the table. It will give them a sense of support and substance as they go forward. It will also help continue the expansion of the economy we have seen. Last quarter for the first time in a year we saw growth in the American economy—3.5 percent GDP. To sustain that we have to keep incentivizing our economy in many different ways. Two of the provisions included—again with bipartisan support—provide those incentives. Small business will get relief in terms of net operating losses. Individual purchasers in the real estate market will get the stimulus of the addition and extension of the tax treatment of purchase of homes.

But we could anticipate another cloture vote this week, another procedural burden to do something that everybody says we should have done weeks ago. My colleagues on this side have suggested amendments that are not germane—some that we have re-

peatedly taken up already, indeed have passed. But this should be something more than about messaging. This should be about helping the American people. We have legislation before us which incorporates, as mentioned, not just unemployment extension but two other benefits, for small businesses and for new home buyers. This compromise before us should not face these delaying tactics. The reality is that 4,000 people in my State need this help right away. They need the unemployment benefit extension. There are thousands more Rhode Islanders who will exhaust their benefits in the next several weeks. Indeed, 3,000 Rhode Islanders are receiving extended benefits, which is the final tranche of unemployment benefits for most. They will be without any real support if we do not move this week, if we do not move promptly, in a timely fashion.

The latest compromise provides 14 weeks of unemployment insurance for jobless Americans in all States, and 20 weeks in those States that have the highest unemployment rates, above 8.5 percent. As I mentioned before, it also provides help to the home market and help to the small business community.

These are amendments that are important. They are important to all of us. We can look back with some sense of progress on our recent GDP numbers. But you cannot feed your family on GDP. When you are unemployed, looking for work, not finding it, you need unemployment compensation benefits. You cannot keep this recovery in the housing market going, as robust as it has been, without some further assistance. You have to create further benefits for small business so they can begin once again to hire Americans. The key to our economic crisis is not growing GDP, it is growing employment. These latter efforts will be pointed in that direction as we help people who are without jobs today.

This crisis is nationwide. It is not a red State, blue State problem. It is our problem. Too many Americans will exhaust their benefits by the end of the year. Hundreds of thousands have already exhausted benefits. So this delay has real consequences in the lives of all of our constituents in every part of this country. It has already been over a month since the House passed their legislation. We could have passed this promptly. In fact, if you look at the record, the number of cloture votes and everything else, we passed yesterday a cloture vote on a substitute amendment by 85 to 2. Typically when we have 85 votes we do not go through further procedural amendments. We, by unanimous consent, take up the measure and pass it routinely. What is lacking here is not the 60 votes for cloture, it is unanimous consent; i.e., the consent of our Republican colleagues to move forward.

They are not denying us, they are denying the American people. We should take this measure up immediately. With 85-to-2 cloture votes, 85 people

will come down, perhaps even all 100, and vote for this bill. But it will be a month after we should have accomplished this task.

While we wait, our economy suffers and thousands of Americans do. So I urge passage as quickly as possible. I hope Leader REID would propose that we move to the measure as quickly as possible, that we could avoid another cloture vote, another 85-to-2 vote confirming what we all know, that eventually when we are allowed to vote on final passage, this measure will pass overwhelmingly.

I yield the floor.

The PRESIDING OFFICER. The Senator from Nevada is recognized.

Mr. ENSIGN, I thank the Chair.

(The remarks of Mr. ENSIGN pertaining to the introduction of S. 2724 are located in today's RECORD under "Statements on Introduced Bills and Joint Resolutions".)

The PRESIDING OFFICER. The Senator from Alaska is recognized.

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

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

ALASKA NATIVE PEOPLE

Mr. BEGICH. Mr. President, I rise today to honor thousands of our fellow citizens who do not receive adequate recognition for their enormous contributions to our nation, Alaska Natives and Native Americans.

President Obama has declared this month Native American Heritage Month. He also hosts an important summit Thursday with our Nation's tribal leaders.

I salute the President's initiative, which is designed to strengthen the special relationship between the Federal and tribal governments.

This week, many Alaska Native leaders have traveled long distances to participate in this summit because they recognize the great significance of the Obama administration's historic initiative.

These events are especially important to Alaska because we proudly claim the highest per person number of Native Americans in the Nation.

Nearly 20 percent of Alaska's population, about 120,000 Alaskans, are Alaska Natives.

From time immemorial, Alaska's Native people have developed a rich cultural heritage and sustained themselves by living close to the land in some of the most challenging geography and climate on Earth.

Today, the diversity in Alaska's Native community is broad.

In scores of tiny villages in some of the most remote regions of our Nation, Alaska Native people feed their families with subsistence hunting, fishing and gathering. This is a way of life practiced by their ancestors for generations.

At the same time in downtown Anchorage, prosperous Alaska Native corporations help fuel our State's econ-

omy and employ thousands of Alaskans and other Americans from gleaming modern office buildings.

This is thanks, at least in part, to actions taken by Congress to help lay a foundation for success by America's first people and to provide the opportunity for self-determination.

The story of Alaska's Native people is one of great success against enormous odds.

For me, this story is also personal because I was born in Anchorage barely 3 years after Alaska became a State in 1959.

In that era, the status of Alaska Natives was bleak. Fewer than 20 percent had a high school diploma; less than 1 percent a college degree.

Half lived below the poverty line. Fifty percent of Alaska Natives lived without indoor plumbing, collecting their waste in what we call a "honey bucket."

And nearly two-thirds lacked what we define today as a job. Most hunted, fished and lived off Alaska's land and waters to feed their families.

Today, the lives and achievements of Alaska Native people have improved dramatically. The 1971 Alaska Native Claims Settlement Act was a completely different model than the reservation system of the lower 48.

It established 13 regional for-profit Native corporations, hundreds of village non-profit corporations and empowered Alaska's Native people to take their destiny into their own hands.

Subsequent amendments to the act, such as those permitting Alaska Native corporations to participate in the SBA's minority business 8(a) program, helped even more.

I am proud to note that the Settlement Act was among my dad's proudest accomplishments during his single term in the House of Representatives.

Now, educational attainment is growing, with about half of Alaska Natives earning high school diplomas and nearly one-third with at least some college.

Less than 25 percent now live below the poverty line. Three-quarters live in homes with the basic clean water and sewer facilities we all take for granted.

What is most impressive to me is the success of Alaska Native corporations and tribes. They were formed to help fulfill the Federal Government's obligation to Alaska's indigenous people.

After struggling in their early years, all 12 of Alaska's in-state regional profit corporations are profitable, generating about \$4 billion in revenues for their Native shareholders.

ANCSA corporations are among our State's top employers, providing jobs for more than 30,000 people. And I submit that these companies are among the most socially conscious in the world.

Alaska's Native non-profits and tribal organizations partner to enrich our State and their members in many ways.

They provide the resources that help schools, families and individuals pre-

serve 10,000-year-old languages, values and ways of life.

They help address the health needs of Alaska Natives through local clinics and hospitals, research centers and by building coalitions with local, State and Federal partners.

They empower self-sufficiency with short-term financial assistance when it is needed, helping low-income families afford heating fuel and electricity, nutrition services for elders and even burial assistance so that family members are treated with dignity and respect.

Through increased self-governance, Native tribal organizations in Alaska can provide even more essential services, from law enforcement to tackling crippling social problems.

One of my most rewarding moments so far as a member of this body was making sure that two dozen brave members of the Alaska Territorial Guard all distinguished Alaska Native elders, finally got the recognition they earned for their courageous service to this Nation more than a half century ago.

Long before Alaska was a State and our country was engaged in World War II, men like Wendell Booth of Noatak, Paul Kiunya, Sr. of Kipnuk, and Victor George of Nulato answered their Nation's call on America's most remote front lines.

Last month, the Senate approved an amendment to the National Defense Authorization Act of 2010 I sponsored with my colleague, Senator LISA MURKOWSKI.

With President Obama signing that bill into law last week, these 25 surviving Territorial Guardsmen finally will receive the retirement pay and recognition they earned so many years ago.

Great progress has been made over the years in helping establish the means for rural and Native Alaskans to succeed. Yet much work remains to be done.

At the top of my Senate agenda are three specific areas of focus to ensure Alaska's Native people continue to flourish.

First, we must make energy affordable for rural Alaskans.

Some residents of my State pay the highest energy prices in the Nation. Electricity in some Alaska villages exceeds \$1 a kilowatt hour, compared to just a dime here in Washington.

When east coast residents complain about high gas prices, consider that a gallon costs \$11 in Noatak, one of Alaska's villages.

This is a bitter irony when you consider that Alaska has long prided itself as America's energy storehouse, providing the lower 48 States up to a quarter of their domestic oil production.

We are working to address these problems here in Washington.

My off-shore oil development legislation is unique by providing that local governments and tribes get a share of any revenues from Federal Outer Continental Shelf Development. Also try-

ing to kick-start the Alaska natural gas pipeline with Federal loan guarantees and other provisions in the Senate energy bill.

Fortunately, local Alaska leaders are not waiting around for Washington to act.

Regional leaders like Ralph Anderson of Bristol Bay Native Association, Tim Towarak through his position with the Bering Straits Native Corporation, and Michelle Anderson of Ahtna Development Corporation, already are developing comprehensive, regional tribal energy plans.

A second major issue facing Alaska's Native people is subsistence, the time-honored practice of harvesting Alaska's rich fish and wildlife resources to put food on the table.

For the last 10,000-plus years, Alaska's Native people implemented a subsistence model that worked to create abundance for subsistence users. That system is now in disarray.

The Obama administration announced plans just last month to revamp that system and I welcome their initiative.

We must preserve the rural subsistence priority in Alaska at all costs.

Finally, a continuing major issue in rural Alaska is the lack of basic infrastructure. This includes water and sewer systems, so Alaskans don't have to live in Third World conditions.

It includes expanded broadband technology, so all Alaska children have equal access to the educational wonders of the Internet.

We are working to address these needs in Congress. One model for economic development in rural Alaska is the Denali Commission.

For more than a decade, this innovative agency has been addressing vital needs from health facilities and energy to roads and water and sewer systems.

I will be seeking the continued support of my colleagues for the Denali Commission.

Mr. President, the largest annual gathering of Alaska Native people convened in Anchorage just last month as the Alaska Federation of Natives convention.

Thousands of Alaska Natives from across our State met in Anchorage's new Dena'ina Civic and Convention Center, named in honor of the first people of that region.

Their theme spoke to the historic journey of Alaska's Native peoples. A journey of overcoming enormous obstacles; a journey full of accomplishment and pride.

I am honored to join my fellow Alaskans on that journey, and to salute the enormous contributions of Alaska's Native people on this, the first week of Native American and Alaska Native Heritage Month.

The PRESIDING OFFICER. The Republican whip is recognized.

Mr. KYL. Mr. President, I want to speak briefly to the issue of the unemployment extension, the benefits that would be provided to those who find

themselves unemployed today. I note that as we speak, the rate now stands at 9.8 percent and climbing toward 10 percent or double digits.

Those are the latest numbers we have in September, and it is pretty clear there have been more people laid off since the end of September. There were about 15.1 million unemployed persons in September, and that number has risen by 7.6 million since the start of the recession.

In Arizona, my own State, 77,300 jobs have been lost just since the so-called stimulus package was passed. Overall about 2.7 million jobs have been lost in the United States since the stimulus bill. Yet Dr. Christina Romer, the Chair of the President's Council on Economic Advisers, predicted with the stimulus bill unemployment would never exceed 8.1 percent; and, further, that without the stimulus bill unemployment would reach a peak high of 9.1 percent in the first quarter of 2010.

Obviously, unfortunately, both predictions were far too rosy. As Robert Samuelson wrote in the Washington Post:

The rap on stimulus one is that it hasn't yet, as promised, reduced unemployment.

I found it interesting that President Clinton's Labor Secretary, Robert Reich, recently wrote:

Obama's focus on health care, when the economy is still so fragile and unemployment is moving toward double digits, could make it appear that the administration has its priorities confused.

That is precisely what public opinion surveys show, as the majority of Americans wish that we would address the problem of joblessness and the economy first and worry about doing something about health care after that is fixed.

It is interesting that one of the President's economic advisers, Jared Bernstein, was asked recently on "The Early Show" on CBS by Harry Smith:

When does this country start to create jobs on its own?

Here is what he replied:

As far as the overall economy is concerned, private sector forecasters tell us that by the second half of next year, net job growth should be positive. Unemployment should be coming down.

I hope this is "expectations management" because the beginning of the second half of next year is still 8 months away. So this is one of the reasons I support the extension of unemployment benefits. We are going to continue to see unemployment increase, as I said, undoubtedly to get above the single digits up into the double-digit atmosphere.

There is a problem that makes this worse, and it is one of the reasons Republicans have been seeking to have the authority, the ability to offer an amendment to this legislation. So far, even though this is supposed to be the world's greatest deliberative body, a body in which members of both parties get to offer amendments to legislation, not one Republican amendment has been allowed on this legislation.

The majority leader makes the call. He says no, I guess; I do not want to hear any Republican ideas on how to deal with the problem. The reason this bothers me is because I think at least one of those amendments is a very good Republican idea on how to deal with the problem.

The problem is doing something about unemployment. How could we best deal with the problem of unemployment? Obviously, put people back to work. What are some of the reasons it is hard for businesses to put people back to work? One of them is that we have a tax on an employer putting people back to work. It is the unemployment tax itself. How do we pay for the extension of benefits in this legislation? We extend that tax. So what we are doing is, in order to pay for the extension of unemployment benefits, we tax the very employers when they hire someone and tax them for keeping on their rolls the workers they currently have. We continue that tax in existence in order to pay for the extension of benefits.

Republicans had a better idea. Let's find another mechanism to pay for an extension of benefits. But no, the majority leader says, you cannot offer that amendment.

This hurts workers in a variety of ways. Let me explain briefly how the FUTA surtax actually works. This is a \$2.6 billion extension that is used to pay for the extension of unemployment benefits. It is a tax amounting to 0.8 percent of payroll that applies to the first \$7,000 of a worker's wages. It is a direct payroll tax. The revenues are then deposited into the Federal unemployment trust fund. It is composed of two parts: a 0.6-percent permanent tax rate and a 0.2-percent temporary tax rate. FUTA only hurts unemployment and job creation since it taxes employers for each employee they hire.

According to Mark Wilson of the Heritage Foundation:

Legally mandated benefits like unemployment insurance are not "free" to workers.

He goes on:

Studies indicate that, on average, over 80 percent of the cost of all employer-paid payroll taxes is shifted to workers in the form of lower real paychecks.

So who is going to pay for the cost of extending the unemployment benefits? The workers themselves.

Republicans had a better idea, but we have been prevented from offering that idea in the form of an amendment.

When we take into account the other mandated requirements on employers, the other private sector mandates such as increasing the minimum wage, the resulting higher labor costs will affect an employer's decision about whether and when to hire workers, which worker to hire, how much cash to pay the worker, and how long to keep that worker on the payroll. This rise in mandated labor costs paid by employers is one of the most important forces leading companies to lay off workers or use part-time or temporary workers or

contract labor instead of full-time employees.

As I said, while I support extending the benefits, I believe it is essential that we address the underlying problems of job creation and unemployment. The FUTA tax only makes those problems worse, especially for small businesses. This is why Republicans wanted to offer an amendment that paid for the benefits extension without the FUTA tax on job creation. Why would the majority leader be frightened of this? Why would he not want to even debate this obviously legitimate question? That is one of the reasons action on this bill has been delayed. This bill could have been completed 2 weeks ago.

I have heard some of my colleagues from the other side come down and say: Why are Republicans holding up the extension of unemployment benefits? I voted for cloture to proceed. I voted for cloture to proceed to the substitute. I am not holding up anything. But the majority leader is not holding up his part of the bargain, which is to at least allow some amendments—three or four—that Republicans have offered. We can't even offer this amendment to offer an alternative way to pay for what almost all of us want to do and will end up voting to do.

I find it disappointing that a very good Republican idea, an obviously legitimate debate to have, whether workers themselves should have to pay for the extension of these benefits and whether that puts more people on the unemployment rolls, to have to pay for the extension of benefits as time goes on here—I am very disappointed that not only have we not had the opportunity to offer that amendment but colleagues from the other side have actually come to the floor and complained that Republicans are somehow to blame for the extension of unemployment benefits not being permitted. When Republicans are not allowed to offer these kinds of amendments, then, yes, we will insist upon a debate which points out a better idea for solving a problem that every one of us wants to solve, the fact that we are not even being allowed to offer the amendment in order to have that debate and challenge our colleagues from the other side to see whether they want to continue to support this program with a tax on workers or they would like to find a better way, the way the Republican Party has proposed.

The PRESIDING OFFICER. The majority whip.

Mr. DURBIN. I ask unanimous consent to speak as in morning business.

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

VA HOSPITAL IN MARION, IL

Mr. DURBIN. Mr. President, I will respond to the Senator from Arizona after I speak to an important issue in my home State.

My first comment relates to an important VA hospital in Marion, IL. In

the fall of 2007, there was an alarming number of deaths at the Marion VA hospital, causing a thorough investigation to be initiated in Washington. At the end of the investigation, they found that nine veterans who had gone into this hospital for surgery had died under what were considered extraordinary circumstances. The investigation went deeper. As it went deeper, they found clear evidence of malpractice on the part of doctors at this veterans hospital and mismanagement by those who brought these doctors to the hospital and by those responsible for supervising them in their activities.

As a result of that startling and shameful disclosure in the treatment of the veterans, the surgical unit was basically closed—at least inpatient surgery and many other medical activities were restricted until the investigation was complete, changes were made, and new personnel were brought in so that veterans receive the kind of protection and care they deserve.

That investigation resulted in several doctors being dismissed. After the most cursory examination, we found that doctors had been brought to this hospital—at least a particular doctor who had been the subject of malpractice complaints in another State had not been thoroughly reviewed in terms of his background before he was brought into this veterans hospital, and he, in fact, was performing surgeries at this hospital beyond his competency and beyond his authority. That was a fact.

We started this thorough review with new people at the Marion VA Center.

I might say to the Presiding Officer and those following this debate, southern Illinois is a long way from Chicago. It is 400-plus miles away from Chicago. It is an area I know well. It is where my family roots are. It is an area once represented in Congress by Paul Simon, when he was a Member of the House, and then, of course, he later served in the Senate. Paul Simon used to say southern Illinois is the land of grits and gospel music. There are parts of southern Illinois that are south of Richmond, VA, in terms of latitude, to give an idea. It is the South.

I say that because I want to let people know, in following this particular development, that for many of the people who live in southern Illinois, in small towns in southern Illinois, in northern Kentucky, and in eastern Missouri, the Marion VA Medical Center is critically important. It is a long drive from where they live to St. Louis or to Indianapolis or some other place. They count on the Marion VA hospital. We told these veterans they could count on it, that it would be there to help them when they needed it. So this scandal which came out 2 years ago caught everyone's attention and focused all of us on solving this problem as quickly as possible.

We responded in the Senate. I had a colleague in the Senate then, a fellow Senator by the name of Barack Obama.

He and I introduced a bill that went after the systemic weaknesses at the VA medical center structure that allowed these deaths to occur. Our bill imposed an accountable quality management system on VA medical centers, on regional networks that monitor and manage the medical centers, and the VA health care system as a whole. We proposed designating a person at each level who would be directly responsible for quality management and only quality management of health care for veterans. The Veterans' Affairs Committee, under the leadership of Chairman AKAKA of Hawaii and Senator RICHARD BURR, a Republican, approved the legislation last Congress and reported it out of committee and to the full Senate, where it died on the floor.

Yesterday, I was shocked to learn that a new inspector general's investigation of the Marion VA Center in August of this year by a medical doctor and his team found that problems identified 2 years ago have not been addressed at the Marion VA Medical Center. Despite this national scandal and the concern we all had about the treatment of veterans, many of the concerns and many of the issues that led to the deaths of these innocent veterans have still gone unheeded. In 2 years' time, the medical center responsible for treating veterans living in southern Illinois has not been able to meet the required standards in facilities safety, patient safety, peer review treatments, and, yes, limiting surgeries to those surgeons who are only approved and licensed to perform them. These continued failures are shocking and inexcusable.

I and my staff and my colleagues in the House have pressed the VA and the medical center itself repeatedly about bringing this center up to the highest standards. We have visited the facility, convened meetings with employees, administrators, and written letters. We have done all we can think of to make sure our veterans have access to the highest levels of medical care in Marion, IL. We have been told time and time again that Marion's quality of care is being closely monitored and all appropriate steps are being taken to rectify the problem. I don't know what went wrong here, but I know now that these efforts have failed.

The inspector general's report of this August is an indictment of all of the efforts undertaken by the previous administration and this administration to remedy the problem. I am deeply disappointed that yet another report identifies entrenched and serious problems at Marion.

In the report finally released yesterday, the inspector general details appalling failures of quality management and patient safety standards. I have read the report. Some failures they found are the same ones they found 2 years ago: physicians performing procedures without required privileges and authority; review of treatment records

that is not regular or systematic; where there were reviews of treatment records, no one followed up on questionable treatment decisions as they were made; and, in fact, substandard, unacceptable record keeping of the deaths after treatment.

Other failures in patient care the inspector general found: not complying with guidelines for patients with a history of methicillin-resistant staff infection, known as MRSA. It is a deadly infection that can claim lives. They found an example where an individual who had a history of this infection was left in an environment where he was exposed to other innocent patients. Totally unacceptable. Not grounding electrical equipment in bathrooms, raising the danger of patient electrocutions at one of our veterans hospitals. That is what the inspector general found.

After 2 years to focus on bringing the Marion VA Center up to the basic standards we should expect of every VA facility, those in the direct line of command at Marion have violated the public trust and should be relieved of their duties until serious questions about this management have been answered and resolved.

Secretary Shinseki called me on the phone last night, and we had a lengthy conversation about Marion. When I first met the general and told him I would support him because of his service to our country and his obvious leadership skills, I talked about the Marion center. I told him it had to be high on his priority list. He said he would take the initial step of removing the Marion director and naming a replacement with a long and respected record of leadership.

I wish this new director the best and offer all the help I can to provide and assure veterans in southern Illinois they will receive the best possible care. However, since the problems at Marion have not been fixed, more comprehensive and immediate action is required.

Yesterday's inspector general report is only one of several revelations of quality-of-care issues in VA facilities to gain notice this year. In June, the inspector general reported that several VA facilities were not properly cleaning endoscopy equipment, potentially exposing veterans to infection. In July, weak oversight led to errors in cancer treatments at the Philadelphia Veterans Affairs Medical Center, resulting in mistreatment of several veterans. Taken together, the series of problems raise serious questions about how quality of care in the veterans health system is monitored and enforced.

Since that initial, awful discovery of these unnecessary, shameful deaths in Marion, IL, 2 years ago, we have asked a lot of questions about quality of care that have gone unanswered. We have learned some things. We have learned that VA health care quality assurance programs at every level—Federal, regional, and local—could be better. Where good policy is in place, not all health care officials and practitioners

are following the guidance fully. The shortage of health care professionals means VA hospitals are not doing all they can to weed out mistake-prone doctors.

I wish to go back to the legislation Senator Obama and I introduced in the last Congress. This bill would create a network of health quality assurance officers. The idea is we need one designated person at each VA facility, in their VISNs and in VA's headquarters, to pay attention, strictly, to quality and patient safety issues.

So the bill establishes quality management officers at the national, VISN, and medical center levels. These officers would be responsible for peer-review mechanisms and for confidential reporting systems, so VA employees can literally blow the whistle when they see things happen that endanger the lives and treatment of our veterans.

The bill also requires potential VA physicians to disclose their employment history—that is not too much to ask—including negative elements in their resume, before they are hired.

It also mandates that directors of the regional Veterans Integrated Service Networks—or VISNs—investigate and personally approve the candidates.

Again, this year, as it did in the previous Congress, the Senate Veterans' Affairs Committee has reported the bill. They agree with me. They know it is a bipartisan bill, and they support it on a bipartisan basis. This year it is part of the Caregiver and Veterans Omnibus Health Services Act of 2009.

Where is this bill? Why wasn't it passed before this inspector general came and found the same problems at Marion VA today that led to the deaths of nine innocent veterans 2 years ago? What happened to the bill after it was reported to the Veterans' Committee?

Well, I can tell you. The bill is sitting on the Senate calendar. It is being held by one Senator who opposes moving to the veterans bills. He says it costs too much money. Well, what is a veteran's life worth? We lost nine 2 years ago. The latest report is that there is another one whose death has not been investigated, which has not had the appropriate level of review we would expect in a veterans facility, and this Senator says it is too much to ask that we would put someone in place at that Marion VA, and every VA facility, who would focus on patient safety.

I want to tell you, that is unacceptable. Putting a hold on a bill that, if it is not passed, could endanger the lives of veterans is absolutely unacceptable. I hope this Senator will have second thoughts now that this inspector general's report is out. We need this quality management network in the veterans health system. If this were in place and working properly, we could catch those who are taking shortcuts and compromising the quality of care our veterans deserve.

But we also have to acknowledge that policies are only as effective as

the people who implement them. Good practices depend on the professionals on the ground, so we have to educate and hold professionals accountable, as well as enacting appropriate quality control measures. We have to make veterans hospitals attractive employers so the scarcity of doctors does not create a perverse incentive to overlook potential shortcuts.

In the overwhelming majority of cases, the Veterans' Administration of the United States of America provides veterans with care of the highest quality. VA personnel—and I have met hundreds of them—similar to all health care workers, enter their professions because of a genuine personal desire to heal the sick and mend the wounded, particularly those women and men who have served our country. They do outstanding work for our veterans every single day, and they deserve our gratitude for that effort. We want to help them provide the very best care for veterans everywhere in America.

I wish to thank Chairman AKAKA and Senator BURR for noting that quality management in the VA needs to be restructured to ensure accountability. I agree with them completely. But despite the good work of the VA, and the wonderful people involved in the VA, clearly, at the Marion VA Center our veterans deserve better.

I hope we can pass this bill and put in place the kind of safeguards that are needed so we will never have to face another inspector general's report such as this. You would think after nine veterans have lost their lives, and all the effort that has gone in to understand why—and stop it from occurring—that we would not be facing an inspector general's report that says we are still harboring people who are not of the highest quality, in terms of their talents, and protecting procedures and approaches which jeopardize the lives of many of these veterans.

This bill should be removed from the calendar, brought to the floor, and passed immediately. I hope it will pass in an overwhelming fashion with bipartisan support.

Mr. President, as to the Unemployment Compensation Extension Act, I heard the Senator from Arizona come out and talk about the unwillingness of the Democratic majority to allow the Republicans to offer amendments. He used that as his reason to explain why, for 26 days, the Republicans have held up the extension of unemployment benefits to thousands of people across this country.

During that 26-day period of time the Republicans have stopped us from extending unemployment benefits, 180,000 Americans have seen their unemployment benefits end. We know because many of us have heard from them. They are people who have been out of work for a long time and looking for a job without luck. When the unemployment check ends, they know it because that is the check that puts bread on the table. That is the check that pays

the mortgage and the utility bills. It keeps their family together.

So for almost one calendar month, the Republicans in the Senate have stopped the extension of unemployment benefits. Why? The Senator from Arizona said: Well, because we had some amendments we wanted to offer.

Well, this is a legislative body. It is not unreasonable to offer an amendment. But what he did not say is that some of the amendments had nothing to do with unemployment or the state of the economy. Some people may have heard of this organization ACORN. They have been in a lot of news recently—videotapes of ACORN employees doing bad things. They were fired. Some are being investigated.

We have had about four or five amendments on the floor about ACORN. Are we going to investigate them? I am for that. I put an amendment in to do that. Are we going to cut off all their government contracts? Are we going to limit the work they can do on this agency or that agency? Amendment after amendment after amendment. At a time when we are in the midst of a deep recession, with high unemployment, fighting two wars, debating health care, some Senator thinks this is all about ACORN.

So one of the Senators from Louisiana said: I am going to hold up unemployment benefits for people across America until I can have another chance to have another debate on another ACORN amendment. Well, forgive me, but I think the majority leader was right. That does not relate to unemployment. It does not relate to the state of the economy. It is simply one Senator who is stuck on one theme that has nothing to do with the economy and that Senator was insisting on his amendment or unemployment benefits would not move forward.

So when the Senator from Arizona talks about the decision of the majority not to allow every amendment to be offered and tie up the Senate for days or weeks at a time, it is understandable. I do have to take exception to remarks that were made by my minority whip and friend from Arizona when he said we are not offering amendments to the Republicans on the unemployment compensation benefits bill.

I call his attention to the amendment he voted for yesterday. It was a cloture motion, which means ending debate on a substitute known as the Reid-Baucus substitute. The Reid-Baucus substitute, which is being added to this unemployment benefits bill, includes, within its pages, two Republican amendments, the major Republican amendments that have been offered; one by Senator JOHNNY ISAKSON of Georgia about the home buyers credit. It is in here. A Republican amendment is in here. He and Senator DODD have worked out the details. It is included. The second is an amendment by the Senator from Kentucky, Mr. BUNNING, and it relates to some net op-

erating loss tax treatment, which we think may help some businesses hire people back. Senator BUNNING is a Republican. The amendment was incorporated as a part of it.

So for the Senator from Arizona to argue that we are not allowing any amendments is to ignore the very amendment we voted for yesterday. There are Republican amendments here, and they were worked out, as they should be.

Does that explain why we have waited almost 4 weeks to extend unemployment benefits? The Senator from Arizona takes exception to the idea that we would use the insurance fund that is collected from employers and employees across America for unemployment to extend unemployment benefits. Well, this is an insurance fund we all pay into, in the unlikely event we lose our job, so we can get unemployment insurance.

The Senator from Arizona says we should not do that. It is unfair to collect that tax—or FUTA tax, as they call it—to fund unemployment benefits. I think it is perfectly fair. I have never used it once in my life. I do not mind paying into it. I think it is reasonable. If the day comes when I need it, it is there. So to say we should stop funding this kind of unemployment insurance benefit is, in my mind, to jeopardize a safety net many people count on across America.

I have received calls from people in my State telling their stories. I hope the Senator from Arizona can receive a few of those calls, too, from his State. I am sure there are people who would contact him on this issue.

One lady wrote me and she said:

I am a 57 year old professional woman [with a masters degree] who was laid off in November 2007, before things got really bad. My unemployment ran out in mid September.

When this debate had not started, but it was beginning here in the Senate. She said:

I have closed my 401K, my retirement accounts and have spent all my savings to survive thus far—and without having had the help of unemployment benefits, I would have lost everything I have long ago.

And don't get me started on my health insurance issues.

As Congress debates, people lose everything. Good people who worked their whole lives. Please help pass this bill. It will be too late for me, I am totally tapped out next month, but it will save others.

A man writes me:

I am 60 years old. My wife is 56. We were both laid off. Me first, then her.

We have worked all our lives. Our unemployment benefits have expired.

We were unable to continue paying for Cobra—

Which is a health insurance option for those who are out of work—

so we lost that. So now we have no health coverage for the first time in our lives and no benefits.

We try to stay optimistic, but the reality is things are tough. We look for work, to no avail. What will happen?

Benefits should be extended indefinitely until the job situation improves to the point

where people can get a job. In the meantime we'll take what we can get, and hope something good happens.

This woman, who has never contacted a public official before, writes me and says:

This is my first time writing to any political figure. I will keep my thoughts and concerns short and sweet.

I am currently unemployed, a mother of 3 and live in a suburb in Illinois. I have been looking for work for over 1 year now to no avail.

It is my hope that you will vote YES in the Senate this week to pass the unemployment extension and hopefully there will be no more delays.

My husband and I have been struggling to make ends meet for months now and with the money I would collect from unemployment, my family would be able to stay afloat [until I can get another job].

My son has some major medical issues at this time and even though we carry insurance, it's just not enough to pay the bills.

I pray the Senate makes a positive and quick decision about extending unemployment benefits.

I appreciate your time.

How do you explain to this woman, and others who wrote to me, what we are doing right now on the floor of the Senate? Are we debating a bill on the floor of the Senate? No. We are burning 30 hours off the clock because the Republicans insist we delay this as long as the Senate rules will allow. They do not want us to extend unemployment benefits 1 minute sooner than they can extend this debate. Under the Senate rules, they have extended it now for 26 days. So another 2, 3 or 4 days are necessary before the Republicans use up all the time they could possibly use.

What happens in the meantime? Well, for the three people who wrote me from Illinois, I am not sure. I do not know how they will get by in the meantime. I hope they will. But for them, it must be hard to understand why they have to be held captive to the procedural rules of the Senate that I think, in this case, are being clearly abused.

We have adopted now Republican amendments that they have asked for. At least we have cleared them to be adopted. The vote last night had only two dissenters. Two Republican Senators dissented. Everyone else voted for it. This is now, apparently, a wildly popular bill but not popular enough for us to vote on it and get it done. No, we are going to have to wait for another day or two or three under the scenario that has been created on the Republican side.

Last week, one of my Republican colleagues was talking on the floor about how we should be in no rush to do anything on unemployment insurance. He said:

The benefits haven't run out yet. We're going to pass this before the benefits run out. That's not the question.

Well, unfortunately, that is not true. When you hear statements such as that, the Republican delays start to make a little more sense. Americans need help right now, but some Republican Senators do not understand that.

Some Republicans, apparently, do not know that 600,000 Americans have already lost their unemployment insurance benefits—Americans who would be benefited if this bill passed—extending the coverage for an additional 14 weeks across the country and for 20 weeks in areas of higher unemployment.

These 600,000 families have no place to turn. Their benefits are exhausted. The job market is still weak and the Senate talks and talks and talks and, even worse, goes into these quorum calls, where people do not even talk.

We sit in our offices waiting to reach a point where we can take the next vote the Republicans will allow. We finally managed to make a little progress last night to move the bill forward. Now Republicans have said let's wait another 30 hours before we consider what we even passed last night. We have to wait so the Republicans can talk more about whatever it is they think is more important than helping the victims of this recession and dealing with the safety net we desperately need. So America waits and waits some more.

I hope the Senate can finally provide the assistance that hundreds of thousands of Americans are waiting for. There is no excuse for us not to do it right now—today.

MAJOR OPPOSITION TO HEALTH CARE REFORM

Mr. President, the Senator from Tennessee was here earlier. It appears now that the major Republican opposition to health care reform comes down to something very basic, which I never would have guessed.

It turns out the Republicans object to the length of the bill. It turns out they are offended, and are carrying that offense to an extreme, because they believe the Senate bill for health care reform is over 1,000 pages long. I don't know if the Republicans can help me understand this. Maybe there are a number of pages that they think would be appropriate. I don't know if it is 900 or 500. But, apparently, in their mind there is an appropriate number of pages for a bill. When the bill goes beyond a certain number of pages, whatever it says is unacceptable. That, apparently, is the new approach being taken by the Republicans.

Last week, I asked one of the Republican Senators how many pages the Senate Republican health care reform bill comprised. He didn't answer me, because he knows, and I know, that no such bill exists. There is no Senate Republican health care reform bill. Maybe some day there will be. I hope so.

We have taken two major committees of the Senate and put them to work for weeks to devise health care reform bills. Now we are trying to blend those bills into a final product, which is in the works. Yet they come to the floor and complain it is too long. It turns out that one of the committee bills they are objecting to for being too long contained 150 Republican amendments. Guess what. Those amendments comprised 300 pages.

Am I supposed to be outraged that we would have 300 pages of Republican amendments and say they should not be considered because I have in my mind a number I cannot quite disclose to you as to what a maximum number of pages might be for a bill? In a debate as serious as health care reform, have we reached these depths, where the only complaint we can find from the Republican side is that the bill has too many pages in it? I think that is a sad state of affairs.

People across this country, and family after family, know the cost of health care is out of control for businesses, families, individuals, and governments. We cannot sustain it. Health insurance companies will keep piling on premiums and raising costs beyond the reach of families every single day. We have to do something about it now. If it takes 100 pages, good. If it takes 1,000 pages, that is fine, too. Let's get it done.

I keep waiting for the first Republican Senator to stand up and say we are going to join with Democrats in fighting the abuses of health insurance companies, which deny people coverage because of preexisting conditions, which bail out on those who are insured once they get sick, which won't allow you to take your insurance from one job to another, which say that your son or daughter at age 23 is cut off from the family plan.

When will Republicans join us in pushing for real health insurance reform, which gives peace of mind to families across this country? I don't care if that takes 1,000 pages to do it. Let's do it and get it done.

Finally, let's make sure that we push prevention and wellness, so people will have better health outcomes at lower costs, so that more people can qualify for health insurance, so that fewer people turn up in the emergency room without health insurance, or with poor health insurance, desperate for care.

Again, how many pages are acceptable to the Republican side of the aisle? I am waiting to hear.

I yield the floor.

The PRESIDING OFFICER. The Senator from Texas is recognized.

Mrs. HUTCHISON. Mr. President, I am very pleased to be able to speak this afternoon about the health care bill that we all in this country are concerned is coming through Congress at a very rapid pace.

I heard the distinguished Senator from Illinois saying the Republican complaint is how long the bill is. Well, of course, he acknowledged that there is no bill, that we actually don't have a bill that has been introduced yet in the Senate. So I think what we are talking about is the length of the bills that have been put forward by the two committees and will be put together, and it could be 3,000 pages long, if that is what it takes to cover this issue.

The concern Republicans have is, are we going to have time to read it? Are we going to have time for the public to

read it, so that we understand fully, before we start debating, before we start amending, what is in every line of the bill?

The American people expect that we will know what we are voting on when we are talking about taking over one-sixth of our economy in this country. We are talking about the health care industry jobs—doctors, nurses, nurses' aides, hospital personnel, and the doctors' office personnel. We are talking about a lot of the economy of our country. Most importantly, we are talking about the relationship between a patient and a doctor, which is the most personal, most important health care relationship you can possibly have in every family.

I think maybe the distinguished deputy leader on the Democratic side has mistaken the complaints about how big the bill is with how long we have to read the big bill. That is the issue. That is why we want to see the bill in the writing that is going to become law before we are asked to debate it, before we are asked to offer amendments. And we want the public to see it, too.

In fact, there was an amendment offered in the Senate Finance Committee by Senator BUNNING to reassure the American people that there would be 72 hours for this bill to be in the public domain before it would come to the floor. That amendment was defeated.

It is very important to us that we have ample time to determine every part of this bill and how it will affect every American, every American family, and for all of the many people in the health care industry—the doctors, nurses, and all the people who provide health care in our country—to know how it will affect them, too. That is the complaint, for sure.

Today I want to talk about the rising health care costs. We know that today, without any new bill, premiums are going up and Americans are being squeezed. Rising premiums are causing them to be very concerned about how much this health care coverage they have is costing. It is also squeezing small businesses, because their premiums are rising, and it is beginning to be a choice in some American businesses whether they can offer health care coverage anymore.

We do need health care reform because of these rising premiums. You would think that, with the premiums going up and costs going up, and Americans being squeezed in a tough economic time, and employers being squeezed, that the position we would be taking in the Senate regarding health care reform would be to bring down costs. That would be what you would think we would be addressing. You would think we would be talking about offering more affordable coverage to more people.

Texas, unfortunately, has the highest percentage of people today without health insurance coverage in the Nation. So I am very concerned about this issue. Unfortunately, 5.8 million uninsured Texans is the number we have

reached. So this is a huge issue for my State.

Let's look at the health care reform and how it is going to affect the rising premium costs. Inflation causes the premiums to go up every year. So what we should be looking for is a way to cut back on those costs that are hurting people so much.

Here is an example: Individuals and families buying their own insurance could see premiums increase as much as 73 percent under the new Democratic proposals that are being written right now. One study projects premium increases of roughly \$1,500 a year for individuals, and \$3,300 a year for family coverage, in addition to the natural rise in inflation and premiums that would be ongoing anyway. This was from a study delivered by Oliver Wyman. Think about it. All of the taxes on insurance companies, the taxes on an American individual or a family that decides not to take the coverage would add to the cost as well. Then you have the cuts in Medicare that are proposed and the increase in Medicaid that is proposed, which will cost every State and every taxpayer. So you have all these increases in costs, mandates, and taxes.

More alarming is, if you do have insurance today, you may not even be able to keep what you have. The President said if you like what you have, you can keep it. But under the Democrats' proposal that is going through, all plans include a long list of benefits that are required to be in every plan. Some of these may be benefits your family doesn't need or you would not choose as a priority, but they are there. So that will have a cost impact. Millions of Americans will be forced to buy more expensive plans in order to comply with these new Federal laws that are going to reform health care.

When it comes to a small business, you might think: What is this going to do to a small business? Small businesses are now having a hard time because they don't have the big risk pool. So their costs are higher anyway. A small business with 20 employees is going to have higher premiums anyway, and their margins are generally less because they don't have the advantage of having big risk pools and the things that can bring down costs in a bigger business. Small businesses are going to look at these rising costs and probably say, you know, I now have to decide, do I continue to offer health care coverage to my employees or do I back off? And if I back off, of course, people will have to buy their own insurance or pay a fine if they don't.

That is what is going through Congress right now. The Joint Committee on Taxation stated that "the imposition of the excise tax on insurers can be expected to lead health insurance providers and consumers to take measures to minimize their burden from the tax. As insurers pass along the cost to the consumer by increasing prices, the cost of employer-provided insurance will increase."

In the House bill, employers will be penalized if they don't pay for a specific percentage of employee premiums. So even if you are offering health insurance to your employees, you may still be penalized if the House bill prevails, if you don't pay the right percentage of coverage for employees. The Kaiser Family Foundation did a research study and said three out of five businesses in America that offer insurance would still have to pay the 8-percent payroll tax, because their percentages would not meet the Federal standard that would be in the House bill. That is just counterintuitive. It is counterintuitive to say if you are doing the right thing and you are offering health insurance to your employees—you are struggling to do it, but you are doing it—but if it is not the right percentage, if it is not 72.5 percent or 65 percent, then you are not going to qualify anyway, so you are going to have to pay an 8-percent fine of the entire payroll of your company.

This is not the reform we should be going after. What we should be doing is trying to have more affordable health care access for individuals and small businesses. That should be our primary objective.

Here are the principles the Republicans would put forward for health care reform.

Small business pooling: We have offered time and time again on the floor of this Senate the small business health plan that would allow small businesses to pool, to be able to offer their employees a bigger risk pool and, therefore, lower premiums for the employee and the employer. We have offered plans that would allow a State organization or a national organization—the U.S. Chamber of Commerce, the NFIB, the American Institute of Architects, whatever association that you might join as a small business person—to offer all of their members insurance plans that would have a big risk pool so that if you work for a small business, a small architecture firm, you would be able to offer this in the same basic amounts that if you worked for a big architecture firm or big corporation. But that would not cost the government anything, and it would not change anyone's coverage if they like what they have. It would offer more affordable access to more people.

If the Republicans had the ability to offer amendments to the health care bill or to offer a substitute, we would reduce frivolous lawsuits. In States where there are limits on noneconomic damages or you have an arbitration requirement before you go to a lawsuit, we have lowered the cost of medical malpractice insurance to the doctors by as much as 25 percent. Doctors have come back to practicing medicine again because these premiums have been lowered just by reducing frivolous lawsuits. This has been done in my State of Texas, California, and other States have followed suit and, no pun

intended, have lowered the number of lawsuits. It has lowered the cost of the medical malpractice insurance premiums, and doctors have been able to do their work with their patients with much more freedom, knowing they do not need to order unnecessary tests just to cover themselves in case they get sued.

No. 3, why not offer tax incentives? I am a cosponsor of a bill with Senator JIM DEMINT that would offer tax incentives for individuals. There are small businesses and individuals who have no access to affordable coverage. It is just way too expensive. Why not give every individual who purchases their own insurance the same tax break that a corporation gets for offering health insurance to the employees? It is a non-taxable benefit to the employee. Why shouldn't the individual get that same break? Why don't we have a \$5,000-per-family tax credit if you buy your own health insurance for your family, or \$2,000-per-person tax credit so that everyone is on a level playing field? That would be a huge incentive. It is a tax credit, so it would be much less expensive than what we are talking about in this government takeover of health care.

How about creating a transparent, online marketplace for consumers to compare and purchase plans? That is something on which I think we could all agree. I think we could agree that if you had a health exchange where you could go online and companies would offer different kinds of plans, any company that wanted to come in with a credible plan for insurance coverage—again, a bigger risk pool so the company would have to be competitive, and it would have that lower cost—that would be a great boon for consumers and it would not cost the government anything to do that. It would just be a marketplace, a transparent place where people could shop for their plans and get a better deal because there would be more competition.

We should allow the purchase of insurance across State lines. Why don't we allow the insurance companies the ability to pool States and offer individuals better prices for health care coverage? We have options that would be good options for American consumers and would give more access to affordable health care. The more people who have affordable health care, the lower cost to everyone who has health care because when people are covered, they don't go to the emergency room for a fever or a common cold. They go to a doctor's office. They have checkups so they have ongoing care to detect something before it gets so bad that it is more serious, more expensive to treat, and certainly more life-threatening.

Those are the principles the Republicans would put forward. But to have a government takeover that is going to increase costs to everyone who has insurance and cause many people to lose their insurance because the employers back out is not the answer. It is not

the answer. We can do something that would give affordable access to more individuals and their families. That should be the goal of this health care reform. We need health care reform. We do. We don't need a government takeover of our health care system. That is the debate we ought to be having right now.

Mr. President, I yield the floor.

The PRESIDING OFFICER (Mr. KAUFMAN). The Senator from Washington.

Mrs. MURRAY. Mr. President, last week families and businesses across our country finally got some good news. We found out that initial estimates show that our GDP grew at a 3.5-percent rate last quarter and that the Recovery Act created or saved over 1 million jobs across the country, including over 30,000 in my home State of Washington, making us third in the country for job creation.

Those are hopeful signs. But I know many families and many businesses and communities still need help. We have a long way to go before we have fully recovered from the worst economic condition since the Great Depression.

I came out on the floor and spoke twice last week about the urgent need to pass an extension of unemployment insurance that would help over 18,000 people in my home State and millions of Americans across the country. I told the stories about five individuals who had lost their jobs and whose families are now in desperate need of support that the extension would give them to help them stay on their feet—families who right now, as we sit out here and debate this bill, wait for hours and hours for us to get to a final vote, even though we know we have the votes, families who are sitting at the kitchen tables across this country having a very agonizing debate about how to make next month's rent or how to get next week's groceries if their unemployment benefits run out.

Those families do not understand why some of our colleagues are delaying and obstructing our efforts to offer this small measure of financial stability to those families who need it most. These families have been coming to me with their stories, and I am committed to fighting to make sure they have every opportunity to get back on their feet. That is why I am here today to urge my colleagues to support and pass the Worker, Homeownership, and Business Assistance Act of 2009.

I am very proud to be a cosponsor of this bill because it will give our families and businesses in Washington State and across the country the support they need today. This bill will be a lifeline to millions of families, and it will provide tax relief to help our businesses create and save jobs. And it will help extend and expand the homeowners tax credit to continue a badly needed boost to help stabilizing the housing market.

This legislation will help families who need it most by providing every

single unemployed worker who has exhausted his or her benefits an additional 14 weeks of support, regardless of what State they live in, and it would extend unemployment to laid-off workers in States that have been hardest hit by the job losses, including Washington State, by 6 weeks.

Last week I told some of the stories that are pouring into my office from unemployed workers. These are workers who are not asking for a handout. They just need a small measure of support as they work to get back on their feet. These stories have continued to come in this week, and I wish to share a couple excerpts from letters people sent me urging me to do everything I can to make sure this bill finally passes.

Bill and Patricia Profitt from Littlerock, WA, e-mailed me saying:

Please act quickly to pass another extension of unemployment benefits. My wife and I are in danger of losing our house and have run out of unemployment. Please help us.

Donna Dettling from Olympia, WA, said:

My extended benefits will run out in 7 weeks. I am a single mother with three boys and I have been trying for months to get work but have been unsuccessful. If the Senate does not come to an agreement soon, we may end up homeless. Can you please do what you can to push this forward?

Then there is Barbara Headrick from Monroe, WA. She wrote to me and said:

Dear Patty, I am desperate for the Senate to pass the emergency unemployment benefits legislation. I cannot find a job, have no income, and am in danger of losing my house as well as my utilities. Please, please, please urge all the Senators to pass this emergency legislation as soon as possible.

Those are just three quick e-mails from thousands of letters I have received from across my home State of Washington. We owe it to these workers, to their families, and to millions more like them to pass this legislation and not continue to delay it so that they can get the support they need.

These men and women who are writing me and stopping me when I am home did not expect to have to ask for help. They had jobs. They felt secure. But now they are spending their days desperately looking for work that is not available. They are worrying about what will happen to them, and they are worrying about their families when their savings are exhausted and their credit cards are maxed out and the bank will not wait any longer for a mortgage payment.

We cannot continue to go hour after hour after hour delaying this when our working families are pushed to the brink by a financial crisis that they did not create but for which they are paying. We need to pass this legislation.

By the way, this bill is going to do a lot more for our families, businesses, and communities. It will expand and extend the successful home buyers tax credit that will allow our families the opportunity to move into homes and make sure that our weakened housing market continues on the road to recovery.

This is a program that has already helped many families purchase their first homes. This bill will extend the \$8,000 credit to first-time homebuyers through the end of April 2010 and expand the program providing a \$6,500 credit to new purchasers who have lived in their current home for 5 years or more.

These programs will not only help families move into new homes; they will also increase liquidity and provide a shot in the arm to housing markets that still need a lot of support.

I have heard from real estate agents, from homebuilders, from families from every corner of Washington State, and they all tell me they have to have this extension. I received letters from families telling me they want to buy a new home but they cannot close in time to get this credit and they would not be able to afford a new home without it.

Thousands of homebuilders, construction workers, and real estate agents have contacted me telling me how successful this credit has been and how an extension and expansion would create jobs and give the housing market another strong push forward.

This bill will also provide a critical boost to businesses in Washington State by extending their ability to carry back losses they suffered in 2008 or 2009. That is a tax provision that will provide badly needed capital to help our companies avoid layoffs, expand their operations, and create jobs.

We have heard a lot today about this concept of too big to fail. Well, in this time of nationwide economic uncertainty, I believe the millions of families and Main Street businesses that are on the brink are certainly too important to fail, and they deserve every bit of support we can give them to allow them to get back on their feet. So the Worker, Homeownership, and Business Assistance Act of 2009 will help bring these families, businesses, and communities back from the precipice.

I urge our colleagues to support and pass this critical legislation. It is surprising to me that we have to wait hour after hour after hour after hour, when we know the votes are there, simply because somehow delaying this bill is some kind of win for whoever is delaying it. It is not a win for Washington families who have to stay awake one more night worrying about how they are going to buy food or pay their mortgages or keep their families intact.

I urge my colleagues to stop the delaying tactics and allow this bill to come to a vote.

Mr. President, I yield the floor.

The PRESIDING OFFICER. The Senator from Ohio.

Mr. BROWN. Mr. President, I would echo the words of Senator MURRAY, who has worked perhaps harder than anyone in this institution to extend unemployment benefits.

I don't get it. Sometimes around here politics has a role. Certainly we have

two political parties, and we have a couple of Independents. In both the House of Representatives and in the Senate that happens. But on this one, on extending unemployment benefits, 90 percent of the country agrees on that. It is not a welfare program, it is unemployment insurance. People pay into it. It is to help people who want to work, who have lost their jobs, and would like to get back into the workplace.

We have been trying to get this passed for 3 weeks, and the fact that this has not passed, I guess, indicates there are some Republicans who, frankly, don't much like unemployment insurance. It is a government program, so they do not like it—just as some number of Republicans don't like minimum wage or they don't like workers compensation or Medicare. They don't believe government has a role in some of these things. That is particularly difficult to swallow when it comes to unemployment insurance.

Senator MURRAY mentioned the number of e-mails she has received from people in her State. I get e-mails and letters from Ohioans—from Lima, Xenia, Springfield, Zanesville, Bellaire, and Ravenna—all the time, from people who didn't know they were going to be unemployed. They have worked hard, played by the rules, paid their taxes, kept their houses nice, kept their neighborhoods strong, and they lost their jobs. They are looking and looking and looking and can't find a job.

With an unemployment rate that is more than 10 percent in my State, all we are saying is give them an extension of unemployment so they can keep looking and keep putting food on the table. Unfortunately, some Republicans—not a majority of Republicans but some number of Republicans—think there is no role for government. They don't like Medicare, they don't like minimum wage or workers compensation, and they don't like unemployment compensation. It is a tragedy because, frankly, I don't think they are representing the people in their States very well.

Almost nobody—almost no real people except for a bunch of people who dress like this and hang around this Chamber and down the hall in the House of Representatives—thinks that way. There are not many people who think unemployment shouldn't be extended.

An hour or so ago, Senator HARKIN had a hearing in the HELP Committee about the increasing health costs facing small businesses. We had a panel of five people who spoke, a couple of them small business owners who have been victimized by these huge health care costs.

I want to start with this—the business model of an insurance company and a health insurance company. Not all of our problems with health insurance in this country—but a big part of our problems—are due to the behavior of the insurance industry. Think of it

this way. The bottom line for the insurance companies is money. They need to make money. They want to make money. They should make money. But their business model is this: Hire a bunch of bureaucrats to figure out how to refuse to sell insurance to people who have preexisting conditions; and on the other end, hire a bunch of bureaucrats to stop from paying claims for people they are insuring when they get sick. That is how they make their money. They do not insure people with preexisting conditions, and then they sometimes do not pay up on claims when people get sick.

Something like 30 percent of health insurance claims on the first round are denied—30 percent. That is almost one in three. Sometimes people fight with their insurance companies and end up getting their claims paid, but why should they have to do that? They pay for insurance year after year after year, and the insurance company makes money on them year after year after year. Then, after they get sick, sometimes their claims aren't paid. Sometimes when they get really sick, the insurance companies do something called rescission—they cut them out and take their insurance away from them.

So when we start with that business model, it is obvious what happens. The CEO of Aetna made \$24 million last year. Insurance company profits over the last 7 years have gone up 400 percent. The salaries of the executives, the CEOs, of the top 10 largest insurance companies in this country average \$11 million. So in order to make that kind of profit, in order to make that kind of CEO salary—not to mention the salaries of other vice presidents and top executives—I guess that is the business model they need. They need to deny people with a preexisting condition from even getting insurance; then, on the other end, hire a bunch of bureaucrats to keep people from getting their claims paid for. That is why insurance reform is so very important. That is why this legislation is so very important.

So today, in our committee—the committee on which Senator SANDERS also sits, who joins me now on the Senate floor—we had this hearing on the increasing health care costs facing small businesses because this whole insurance company model of denying coverage because of preexisting conditions and then denying claims when people file them particularly hurts small businesses. When the insurance companies do that, small businesses in particular are victimized by it. Small businesses pay more for their insurance. If they have 10 employees and one gets very sick, the prices for the whole insurance plan for that small business get so out of whack they often have to cancel coverage or they simply can't afford it.

So what is coming out of this health care hearing and what we are doing in our legislation that is so important.

We have worked on creating this health insurance exchange which will allow small businesses to pool their risks and leverage better deals from insurers. So instead of a small business of 12 people trying to buy insurance, they get to join a health insurance exchange with millions of customers, millions of individuals, tens of thousands of small businesses. Then, if a few people get sick in one small business, their rates don't spike up; they have a much larger pool to keep prices in check.

Small businesses pay about 18 percent more than large companies per capita for their insurance. They pay higher broker fees, higher administrative costs. They have the high cost of medical underwriting. So the result is an unfair competitive disadvantage for small businesses.

One of the other things we do for small businesses in this legislation is to give tax breaks so a small business can take its 20 employees and they can go into the insurance exchange and, if they choose to, they can go into the public option. The public option is there for several good reasons. The public option is just an option. It doesn't mean they can't go into Cigna, Aetna, Blue Cross, or Wellpoint. They can choose Medical Mutual, a not-for-profit in Ohio, or they can choose the public option. The public option will mean competition for insurance companies in southwest Ohio, where two companies have 85 percent of the insurance in that part of Ohio—the Cincinnati area.

When two companies have 85 percent, you can bet they are getting lower quality and they are paying higher cost. If we put the public option in there to compete with them, it will help to drive down cost, stabilize cost, and it will mean better quality insurance. They don't have to choose the public option, but the fact it exists helps.

The other thing the public option will do is to keep these insurance companies much more honest. We are going to outlaw denying coverage due to preexisting conditions. No more discrimination based on disability, on geography, on gender, or any of that.

The pages sitting in front of us—these young men and young women who aren't paying for their insurance yet—if we don't change anything, when the young women finish school and go out into the insurance market, they will pay higher rates than the young men will. So there are all kinds of discrimination that we are going to outlaw in this bill, but we need the public option to make sure these insurance consumer protection reforms are actually in force.

Let me close. Attending today's committee hearing was a businesswoman from Ohio whom I met. Her name is Liz Coriell. She owns a business in Cleves, OH, outside Cincinnati, in the southwestern part of the State. She owns a medical gas servicing company, but she

can't afford health insurance for her workers. Her sons were going to come and work in the business, as her husband does—her husband is 65 and has Medicare, so not a problem for him. She is not 65. Her sons would like to join the business, but they can't get insurance because she can't afford it for this small business.

Why do we have a health insurance system that says to her sons: You can't come and work in your parents' family business because you can't get insurance, so it is not going to work out? Why do we allow that? Why don't we encourage these families to stick together—you know, family values—to help them go into the family business, if they want to, and not be denied.

I come to the floor of the Senate many times—I will not today because Senator SANDERS is waiting to speak—and I share letters I receive from people in Ohio. This one is from Cleveland. This one is from Mansfield where I grew up. Others are from Springfield, Dayton, and all over.

Two things come through in these letters. One is that people thought they had good insurance until they got sick. Then they found out, well, maybe they lost their insurance because they got really sick or maybe they had a baby born with a preexisting condition, and then their insurance was canceled.

The other thing I find is that it is affecting people like Liz from Cleves, OH, in southwestern Ohio. Liz is several years away from Medicare, but she is thinking about several years from now being eligible for Medicare, when she wouldn't have to worry about this. I get letters from people in their early sixties and late fifties who are just anxious and thinking: I am only 2 or 3 or 6 years away from Medicare, and then I will not have these problems with insurance. Then it will be predictable, and it will be stable.

Why can't we do that for everybody now? So whether they are 26 or 46 or 64—not quite eligible—why can't we take away that anxiety and build peace of mind for people so they don't have to worry about whether they can get insurance or whether they are going to be denied or going to have to fight insurance companies to get doctor bills paid? Let's take that anxiety off the table so Americans can concentrate on their small businesses and raising their kids and fixing up their neighborhoods. Let's let them concentrate on giving something back to this society and not always worrying about their health insurance.

Mr. President, I yield the floor.

The PRESIDING OFFICER. The Senator from Vermont.

Mr. SANDERS. Mr. President, let me begin by congratulating my friend, Senator BROWN of Ohio, for his leadership in this struggle for fundamental reform of the American health care system. He understands, as I do, that there is something absurd about a situation in which we as a nation end up spending almost twice as much per per-

son on health care as any other nation on Earth; yet we end up with tens of millions of people who are uninsured, people who are underinsured, and we have almost 1 million Americans this year who are facing bankruptcy because of medically related illnesses.

As Senator BROWN just talked about, understanding that small businesses are the economic engine of this country, there is something absurd when we have small businesses desperately trying to provide health insurance for their employees but are finding it harder and harder to do so. So I want to congratulate Senator BROWN for the work he is doing on health care.

As I think every American understands, we are in the midst of the worst economic crisis since the Great Depression. I find it interesting that there are some people out there, some economists, including the Chairman of the Federal Reserve, Mr. Bernanke, who have told us "the recession is very likely over." I suggest to Mr. Bernanke, come to the State of Vermont, go to California, go to Nevada, go to Ohio, go to any State in the country and go out on the street and ask people whether they think this recession is over. They will say it may be over for the large banks that were bailed out by taxpayers but it is not over for working families. In fact, according to the latest Washington Post/ABC News poll, 82 percent of Americans disagree with Mr. Bernanke. The overwhelming majority of the American people do not believe the recession is over. Of course, they are right. The recession may be over for banks that are now starting to be profitable, for Goldman Sachs, which is paying out huge bonuses to its top executives, but trust me, on Main Street, on family farms all over this country, in factories all over this country, this recession most certainly is not over.

Since the beginning of this recession in December of 2007, 7.6 million Americans have lost their jobs. The official unemployment rate has doubled, going from 4.9 percent to 9.8 percent. But what is extremely important to understand when we look at the economy today is that the official unemployment statistics do not reflect the reality of what is going on in our economy. Official statistics do not include people who have given up looking for work. If you are in a community where 15 or 20 percent of the people are unemployed, you have given up looking for work, but you are not part of the official unemployment statistics. What happens if you want to work 40 hours a week but you can only find a job for 20 hours a week or 25 hours a week? You are also not in the statistics.

The reality is, if you add all those factors together, people who are officially unemployed, people who have given up looking for work, people who are working part time when they want to work full time, what you are looking at is 17 percent of working-age Americans today are in that category,

which adds up to 27 million Americans—an astronomical number. That is an indication of a real catastrophe in our economy.

Mr. Bernanke, I am sorry to disagree with you, but in my view and in the view of the vast majority of the American people, this recession is not over. In fact, in terms of unemployment numbers, it may, in fact, even be getting worse.

On the issue we are dealing with right now, we have to address long-term unemployment. It is one thing to lose your job and get another job a few weeks later. It is another thing not to be able to find a job month after month, and there are millions of Americans in that category.

Today, 5.4 million Americans have been unemployed for over 6 months—the highest on record. Long-term unemployment is a major crisis in this country. It is one we have to address. It is one we have to deal with in terms of extending unemployment benefits. The average length of unemployment is now 27 weeks. That is over 6 months. That is over half a year. That is the longest since the end of World War II.

There are fewer jobs in America today than there were in the year 2000, even though the workforce has grown by 12 million since then. This is a shrinking workforce. We now have the fewest manufacturing jobs than at any time since April of 1941, 8 months before the start of World War II. The importance of that is that manufacturing was the mechanism by which working families were able to carve out a middle-class existence. They had decent wages, decent benefits. They had a union. They may have had a pension program. But today we have the fewest manufacturing jobs since April of 1941.

Home foreclosures are the highest on record, turning the American dream of home ownership into an American nightmare for millions of people.

There is nothing we should be proud of in saying this: Today, in the industrialized world, the United States has the highest rate of childhood poverty. We have the highest infant mortality rate. We have the highest overall poverty rate. At the same time, we have the largest gap between the wealthy and everybody else. What we have seen for a number of years is a collapse in the middle class. It has certainly gone on a lot longer than since the financial collapse. But we have also seen an increase in wealth amongst the top 1 percent. That gap between the very rich and everybody else is growing wider and wider. From a moral perspective, not to mention an economic perspective, we have to address the reality that the top 1 percent today earns more income than the bottom 50 percent. The top 1 percent owns more wealth than the bottom 90 percent. We are becoming two very different countries: people on top with incredible wealth—CEOs on Wall Street making hundreds and hundreds of millions of dollars, billions of dollars in a hedge

fund—yet working people seeing their incomes decline, working longer hours for low wages. Actually, today a two-income family has less disposable income than a one-income family did 30 years ago. That is what is going on in America—poverty increasing, middle-class shrinking, the gap between the very richest and everybody else growing wider.

This is an important point to make. We know what happened on Wall Street a little over a year ago. We know what that collapse has done. We know that the outrageous behavior on Wall Street has precipitated us into this very severe recession. But we should not kid ourselves. If by some miracle tomorrow we manage to go back to where we were before the financial collapse on Wall Street, we would still be in very bad shape. It isn't a question of, weren't things great before the collapse on Wall Street and the development of this major recession—no, things were not great back then.

Let me just mention what happened during the Presidency of George Bush. Let me talk a little bit about what happened during that 8-year period.

When President Bush was in office from the year 2000 to 2008, 8.2 million more Americans slipped out of the middle class and into poverty. That is what happened during that period. I might mention, you may recall—it is really frightening to think about it—how during much of that period the Secretary of Treasury and the President were saying the economy is robust, the gross national product is expanding. But that was the reality for working families—people slipping out of the middle class and into poverty.

During that same period—we are dealing with health care right now. One of the reasons we need a national health care program guaranteeing health care to all people is during that same period, 7.8 million more Americans were uninsured; they lost their health insurance. We are now up to about 46 million people without any health insurance. That number is going up every single day. During the Bush era, close to 8 million Americans lost their health insurance.

During the years 2000 to 2008, 4.5 million manufacturing jobs disappeared. I talked a moment ago about the importance of manufacturing. I know it is not a sexy job, but it was a means by which millions of Americans went to work every day, they produced real products, they had real income. It was a vehicle—manufacturing was and is a vehicle by which working Americans could make it into the middle class.

During the Bush tenure, 3.2 million workers lost their pensions, with the result that about half of American workers in the private sector today have no pension whatsoever. There was a time—I know it is a radical idea to even think about—there was a time when millions of Americans who worked had a defined pension plan, a defined benefit pension plan. They ac-

tually knew they were going to have a pension. Boy, what a radical idea. That does not exist anymore.

During the Bush era, median household income declined by over \$2,100, from \$52,500 to \$50,303. According to an article that appeared a couple of months ago in *USA TODAY*, from 2000 to 2008 middle-class men experienced an 11.2-percent drop in their incomes, a reduction of \$7,700 adjusting for inflation. That is unbelievable. During that period, middle-class men saw an 11-percent drop in their income. Middle-class women in this age group saw a 4.8-percent decline in their incomes as well.

The important point to be made here is when you hear economists talking about the economy in abstract ways—we have 3 percent growth in this quarter; isn't that great? Yes, that is an important fact, but it is not the most important fact. The most important fact is what happens to ordinary people. This is what happens to ordinary people. People who were 45 to 54 years of age lost \$7,700 in the Bush economy. That is true today, it was true then. Focus on what is happening to ordinary people.

With all of that, with the long-term trends in which the middle class has declined, with the fact that since the greed and illegal behavior of Wall Street has gotten us into the deep recession we are in right now, working families all over this country are desperately in need of help, and they are looking to their Federal Government to provide that help. That is why it is so important that we pass an extension in unemployment benefits. I find it hard to understand, why my Republican colleagues continue to delay this legislation being implemented.

We have to do more than that. We have to extend unemployment—that goes without saying—but we have to do more than that. We have to ask ourselves why our economy is in the shape it is right now. That will precipitate a major debate and major discussion, something we as a nation have to have. We have to ask ourselves not just the causation of the recession we are in right now, the role Wall Street has played, but, long term, why since the early 1970s has the middle class continued to shrink? What are the causes of that? Why do we have the highest rate of poverty of any major nation on Earth? Why is it today that people are losing their homes and their pensions and their life savings and their ability to send their kids to college?

Clearly, short term it is imperative that we investigate thoroughly and that we hold accountable those crooks on Wall Street who have done so much damage to the American people. It is simply not acceptable that they be allowed to continue the behavior that drove this country into the severe recession. We need to understand how it happened, we need to hold accountable those people who caused this crisis, and where there is illegal behavior, those people should learn what the penal system of this country is about.

One of the things that really amazes me is that I have yet to see, nor have the American people yet seen, one of those folks on Wall Street whose greed and recklessness has caused this recession, has caused this intense suffering all over this country—have you seen one of those guys go before television, get on TV and say to the American people: I apologize. I am sorry for our greed. I am sorry for the fact that we cost millions of people their jobs and their health care and their savings and their pensions. We are sorry.

I have not seen that. In fact, what we are seeing is these guys on Wall Street spending millions of dollars every day, every week, every month on lobbying in order to make sure we do not bring about the reforms to prevent them from continuing to do what they did, which caused this recession. These guys live in a world of their own, a world of entitlement. They do not seem to understand their actions have widespread consequences in terms of destroying the economic well-being of millions of people. All they seem to think about is, I only made \$100 million last year. I can't get by on that. I need my 18th home or 16th car and 18th country club membership. For them, enough is never enough—more and more greed and more and more selfishness. That is an issue we have to deal with.

It only took a couple of weeks for Congress to give Wall Street the largest bailout in history, some \$700 billion. But the truth is, up until this point we have done very little to make sure this financial crisis does not occur again. These guys want to go right back to where they were. They want the freedom to speculate, the freedom to convert their financial institutions into large gambling casinos. The Federal Government has provided \$182 billion to AIG, \$50 billion to Citigroup, \$50 billion to Bank of America, a \$25 billion bailout to Wells Fargo, a \$25 billion bailout to JPMorgan Chase, and on and on it goes. Yet we have asked them for nothing in return. Here are tens of billions of dollars. What are you going to do? What are you going to do for the American people who have bailed you out?

I know reforming the banking sector is not going to be easy. After all, the banking and insurance lobbyists have spent over \$5 billion on campaign contributions and lobbying activity over the past decade in support of deregulation. They were all over this place telling us, telling the Congress: Just trust us. Deregulate us. Let us do what we want to do. We are going to create wealth for all the American people.

There were some of my colleagues who actually believed that. I happened not to be one of them, but some of them did, and we deregulated and we let them do whatever they wanted to do and we are where we are today.

In 2007 alone, if you can believe this—this is what goes on—the financial sector employed nearly 3,000 separate lobbyists to influence Federal policy-makers. Got that. There are 100 Members of the Senate, 435 in the House—that equals 535 Members of Congress—and they had nearly 3,000 individual lobbyists to influence Federal policy-making. Over a 10-year period, they spent \$5 billion.

And that, my friends, is why the rich get richer and almost everybody else gets poorer. We have to address the issue of Wall Street. Let me make some suggestions as to what we have to do.

We need, in fact, a thorough investigation as to how this happened and we need to hold those people accountable. I hope we can do that. I think the American people are asking questions, and they are right to demand answers. But what we also have to do is to deal with this issue of “too big to fail.” What I have said ever since this financial crisis began is: If a financial institution is too big to fail, that financial institution is too big to exist.

We need to do exactly what Teddy Roosevelt did back in the trust-busting days, and we need to start to break up these huge financial institutions. We cannot continue to be held hostage by them such that if they fail, they take down the entire system with them so we have to prop them up and bail them out.

I would mention, interestingly enough, that is exactly what they are doing right now in the United Kingdom. Let me quote from the Washington Post:

The British government announced Tuesday that it will break up parts of major financial institutions bailed out by taxpayers. The British government, spurred on by European regulators, is set to force the Royal Bank of Scotland, Lloyds Banking Group and Northern Rock to sell off parts of their operations. The Europeans are calling for more and smaller banks to increase competition and eliminate the threat posed by banks so large that they must be rescued by taxpayers no matter how they conducted their business, in order to avoid damaging the global financial system.

And you know what. Our friends in the U.K. are doing exactly the right thing. That is what we should be doing. But that is not just my opinion. A growing number of experts, both on the left and on the right, are coming to the same conclusion.

On October 15, Alan Greenspan, probably the man more than any other individual responsible for the deregulatory efforts which led to this financial crisis, admitted last year that his views on deregulation were wrong. He was quoted in Bloomberg News as saying:

If they are too big to fail, they are too big. In 1911 we broke up Standard Oil—so what happened? The individual parts became more valuable than the whole. Maybe that’s what we need to do.

Alan Greenspan, the man whose deregulatory leadership helped create

this disaster, now perhaps understands that that whole philosophy of deregulation, letting big banks do whatever they want, letting them merge with insurance companies, maybe was not quite right.

Former Fed Chairman Paul Volcker, who has advised the Obama administration, supports breaking up big banks so that they no longer pose systemic risks to the entire economy. During a recent article in the New York Times, Volcker says:

People say I’m old fashioned and banks can no longer be separated from nonbank activity. That argument brought us to where we are today.

Absolutely right. The New York Times said that under Volcker’s plan:

JPMorgan Chase would have to give up the trading operations acquired from Bear Stearns. Bank of America and Merrill Lynch would go back to being separate companies. Goldman Sachs could no longer be a bank holding company.

In my view, that is exactly what needs to happen. What insanity that when individuals lose their health insurance, tough luck; small businesses go bankrupt, tough luck; but if you are a large financial institution and you acted in a legal greedy way, we say: Hey, no problem. Taxpayers of this country are here to bail you out, because if we don’t bail you out, you are going to bring down the entire economy. That is absurd. We have got to end that.

Robert Reich, President Clinton’s former Labor Secretary, said:

No important public interest is served by allowing giant banks to grow too big to fail. Wall Street giants should be split up—and soon.

I agree with former Secretary Reich.

Let me touch on a few other issues we have to have the courage to deal with. I get calls all the time. I do a national radio show—get it on the radio show, get it from Vermont. People are saying, We bailed out these large financial institutions and what they then do is say “thank you” and they raised my interest rates on my credit card to 25 or 30 percent.

That is outrageous. That is usury. We need to pass national usury laws. The truth is, today one out of four credit card holders in this country is paying interest rates above 20 percent, as high as 41 percent, more than double what they paid in interest in 1990.

What we need to do is pass national usury legislation. I have introduced legislation that would mandate that the maximum interest rates that could be charged would be 15 percent. The reason I came up with that number is that is exactly what credit unions are doing today, 15 percent, except under unusual circumstances.

I am proud that on that bill we have as cosponsors Senators DURBIN, LEAHY, LEVIN, HARKIN, and WHITEHOUSE. That is what we have to do. It is immoral. It is wrong for these large companies to be charging 25 or 30 percent interest rates.

It goes without saying that as we take a look at Wall Street, we have to reregulate those institutions. We have to take a hard look at bringing back Glass-Steagall in one form or another.

Lastly, we also need more transparency at the Federal Reserve. Last year when Secretary Bernanke came before the Budget Committee, I asked him a very simple question. I said: Mr. Chairman, my understanding is that you have lent out over \$2 trillion at zero interest to some of the largest financial institutions in America. Can you tell me who got the money? I mean, you are putting taxpayer money at risk. Who received this \$2 trillion-plus dollars? And, amazingly enough, what Mr. Bernanke said is: No, I am not going to tell you. It is a big secret. I cannot tell you.

Well, on that day we introduced legislation that would mandate that he tell us, and also we would bring about a GAO audit of the Fed. The Fed, especially since the financial collapse, has assumed an enormous amount of power, and the American people have a right to have more transparency there.

Let me conclude by saying that anybody who thinks this recession is over has obviously not talked to real people. Millions of people are hurting. Millions of people are frightened. They are looking to us for some help in terms of extending unemployment benefits, but they are also looking to us to understand the causation of this problem, and to work on economic ideas which will prevent a continued collapse of the middle class in this country.

We have got a lot of work on our hands, and I look forward to working with you.

I yield the floor.

EMPLOYMENT DISINCENTIVES

Mr. LIEBERMAN. Mr. President, first, let me take this opportunity to commend the chairman and the other members of the Finance Committee on their collective efforts to extend benefits to those unemployed Americans who still face a tough job market in this difficult recession. Second, I would like to engage my good friend and colleague, the Senator from Montana and the chairman of the Committee on Finance, in a colloquy on a subject of utmost importance to the men and women who are currently unemployed. Specifically, I am concerned that under the current unemployment insurance, UI, extensions there may be disincentives for unemployed Americans to seek reemployment.

Mr. Chairman, I believe we can agree that unemployed adults who want to return to work should be given every incentive to return to work even if they accept part-time jobs or lower wages. This benefits not only those individuals and their families but also strengthens our national economy. However, it has come to my attention that many Americans who knew they were doing the right thing by accepting a job, even at greatly reduced wages from their previous employment, would

have been better off turning down meaningful work.

Mr. BAUCUS. I thank the Senator from Connecticut, Mr. LIEBERMAN, for bringing this matter to my attention. We certainly want to avoid a policy that inadvertently discourages Americans from returning to work.

Mr. LIEBERMAN. Mr. President, I became aware earlier this year that some of my constituents in Connecticut are being penalized for working either part time or temporarily after first receiving emergency benefits. Further investigation shows that this problem is becoming more prevalent to varying degrees in many States and possibly all 50 States. Under current EUC extensions, if one receives emergency compensation and a year passes with no recorded work history, those benefits can continue uninterrupted while that person seeks employment. The problem often occurs, however, when a person takes a job, either part-time or short-term work, at much reduced wages compared to their previous employment. Because this lower wage work automatically qualifies them for reduced State benefits, Federal law now requires that they can no longer receive the much needed emergency extended compensation.

In a particular case, one of my constituents, a woman who worked on behalf of Connecticut children for 28 years before losing her job, was receiving the Federal benefits she was entitled to. But when this woman, who is the sole caregiver of her 88-year-old father, took a minimum-wage job 2 days a week, her benefits dropped from \$483 per week to \$38 per week. She would have been better off financially had she not returned to work and instead stayed home to care for her ailing father.

I am also advised by my State's labor department that many other constituents are becoming aware that taking employment at this time may disadvantage them, and some are therefore less inclined to accept employment. I also am told that more and more States are facing this problem and that the problem will grow as this recession continues. I hope the Finance Committee will look into this issue and consider legislative language which I have suggested to address this problem.

Mr. BAUCUS. Again, I thank my colleague for bringing this matter to my attention. You raise a serious concern, and I can assure you my committee will take a look at the issues you raise.

Mr. LIEBERMAN. Thank you, Mr. Chairman.

VOTE EXPLANATION

Mr. ISAKSON. Mr. President, I was unavoidably detained during rollcall vote No. 332 on the motion to invoke cloture on the Reid/Baucus substitute amendment No. 2712 to the unemployment insurance extension bill H.R. 3548.

Had I been present I would have voted yea for rollcall vote No. 332 and ask that the RECORD reflect that.

Mr. CONRAD. Mr. President, section 306(f) of S. Con. Res. 13, the 2010 budget resolution, permits the chairman of the Senate Budget Committee to adjust the allocations of a committee or committees, aggregates, and other appropriate levels in the resolution for legislation that reduces the unemployment rate or provides assistance to the unemployed, particularly in the States and localities with the highest rates of unemployment, or improves the implementation of the unemployment compensation program. In addition, section 306(b) permits the chairman to adjust the allocations of a committee or committees, aggregates, and other appropriate levels for legislation providing tax relief or refundable tax relief. These adjustments to S. Con. Res. 13 are contingent on the legislation not increasing the deficit over either the period of the total of fiscal years 2009 through 2014 or the period of the total of fiscal years 2009 through 2019.

I find that S.A. 2712, an amendment in the nature of a substitute to H.R. 3548, the Unemployment Compensation Extension Act of 2009, fulfills the conditions of the deficit-neutral reserve fund for unemployment mitigation. Therefore, pursuant to sections 306(f) and 306(b), I am adjusting the aggregates in the 2010 budget resolution, as well as the allocation to the Senate Finance Committee.

I ask unanimous consent that the following revisions to S. Con. Res. 13 be printed in the RECORD.

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

CONCURRENT RESOLUTION ON THE BUDGET FOR FISCAL YEAR 2010—S. CON. RES. 13; REVISIONS TO THE CONFERENCE AGREEMENT PURSUANT TO SECTION 306(f) DEFICIT-NEUTRAL RESERVE FUND FOR UNEMPLOYMENT MITIGATION AND SECTION 306(b) DEFICIT-NEUTRAL RESERVE FUND FOR TAX RELIEF

[In billions of dollars]

Section 101	
(1)(A) Federal Revenues:	
FY 2009	1,532.579
FY 2010	1,614.788
FY 2011	1,935.431
FY 2012	2,137.235
FY 2013	2,298.817
FY 2014	2,520.688
(1)(B) Change in Federal Revenues:	
FY 2009	0.008
FY 2010	-51.198
FY 2011	-153.200
FY 2012	-223.158
FY 2013	-216.520
FY 2014	-112.970
(2) New Budget Authority:	
FY 2009	3,675.736
FY 2010	2,898.207
FY 2011	2,845.866
FY 2012	2,848.108
FY 2013	3,012.328
FY 2014	3,188.867
(3) Budget Outlays:	
FY 2009	3,358.952
FY 2010	3,010.241
FY 2011	2,971.521
FY 2012	2,883.055
FY 2013	3,019.952
FY 2014	3,175.217

CONCURRENT RESOLUTION ON THE BUDGET FOR FISCAL YEAR 2010—S. CON. RES. 13; REVISIONS TO THE CONFERENCE AGREEMENT PURSUANT TO SECTION 306(f) DEFICIT-NEUTRAL RESERVE FUND FOR UNEMPLOYMENT MITIGATION AND SECTION 306(b) DEFICIT-NEUTRAL RESERVE FUND FOR TAX RELIEF

[In millions of dollars]

Current Allocation to Senate Finance Committee:	
FY 2009 Budget Authority	1,178,757
FY 2009 Outlays	1,166,970
FY 2010 Budget Authority	1,231,628
FY 2010 Outlays	1,232,134
FY 2010-2014 Budget Authority	6,851,258
FY 2010-2014 Outlays	6,850,666
Adjustments:	
FY 2009 Budget Authority	0
FY 2009 Outlays	0
FY 2010 Budget Authority	5,708
FY 2010 Outlays	5,708
FY 2010-2014 Budget Authority	6,639
FY 2010-2014 Outlays	6,639
Revised Allocation to Senate Finance Committee:	
FY 2009 Budget Authority	1,178,757
FY 2009 Outlays	1,166,970
FY 2010 Budget Authority	1,237,336
FY 2010 Outlays	1,237,842
FY 2010-2014 Budget Authority	6,857,897
FY 2010-2014 Outlays	6,857,305

Mr. BUNNING. Mr. President, I support the substitute amendment before us.

The national unemployment rate is now 9.8 percent. In Kentucky, the unemployment rate is 10.9 percent. Millions of Americans are searching for work, and too many families are struggling and uncertain about their future. This is unacceptable.

When Congress passed the so-called stimulus bill earlier this year that cost \$787 billion, not counting increased interest payments on the national debt, our national unemployment rate was 8.1 percent. Clearly, this costly legislation has failed to stop the bleeding of jobs from the American economy.

The bleak job picture makes it necessary to consider another extension of unemployment benefits. But if you talk to Americans who are searching for work, the best unemployment benefit we could extend to them is a high-quality job.

That is why I believe it is so important to include provisions in this bill that will actually create jobs and reduce unemployment. Over 2 weeks ago, I proposed an amendment that would provide net operating loss relief to businesses so they can hire and retain workers.

I also strongly supported Senator ISAKSON's efforts to extend the home buyer tax credit, which is critical for the millions of jobs that depend on the housing industry.

On October 27, I voted against cloture on the motion to proceed to this bill because there was no guarantee that a vote would be allowed on these two crucial provisions to improve the job situation for Americans.

Today, this substitute amendment includes both of these job-creating provisions.

Regarding net operating losses, businesses are generally allowed to offset their income with losses. Under current law, they can carry these losses back for 2 years and carry them forward for 20 years. In a difficult economy where businesses have experienced devastating losses, they may go out of business before they can recover their own money, or they may hang on and gradually recover their money when they return to profitability.

During tough economic times, Congress has extended the net operating loss carryback from 2 to 5 years so businesses can apply for immediate refunds. The logic behind this is that businesses should have access to their own money when it can do the most good and prevent massive layoffs. In an economic crisis, it makes no sense to delay tax refunds until some uncertain, distant point in the future. Businesses may not survive in the future if they do not have access to their own money today.

This relief is especially important in today's climate, where businesses find it increasingly difficult to get credit from banks.

That is why I am pleased that this substitute amendment responded to my call for substantial net operating loss relief, which will allow businesses to create and keep jobs. It also includes Senator ISAKSON's extension and expansion of the home buyer credit, which will stimulate jobs in the housing industry. The crisis in the housing market was a root cause of our economic crisis and it is essential to extend this temporary tax credit to help stabilize the market.

This amendment is not perfect. It is unfortunate that the unemployment benefit extension is financed by imposing taxes on businesses, and the net operating loss and home buyer provisions are offset by delaying tax relief that would make American businesses more competitive internationally. I had proposed an offset to my net operating loss amendment that would not have raised taxes or delayed tax relief, and my amendment would have provided more relief for job creation. However, legislation is rarely perfect, and on balance this amendment provides substantial tax relief and will spur job creation.

I urge my colleagues to support this substitute amendment, which will both extend unemployment benefits and extend tax relief that will reduce the number of unemployed.

The PRESIDING OFFICER. The Senator from Minnesota is recognized.

Mr. FRANKEN. Mr. President, I ask unanimous consent to speak as in morning business for up to 45 minutes.

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

HEALTH CARE REFORM

Mr. FRANKEN. Mr. President, I rise today to talk about health reform. This is my first speech from the floor on this subject. I have a lot to say.

By now, we have all heard the stories—at least those of us who have been listening—of those who have fallen through the cracks or, more accurately, the gaping holes. We know why those stories are important. They remind us that there are human beings behind these awful statistics.

Since 2001, 6.6 million Americans have lost their health insurance, and many millions more are underinsured. They have seen their health coverage become more and more expensive and less and less adequate. People suffer because of this. They lose their homes. They go bankrupt. They do not get the health care they need. They get sicker. They experience pain, physical and emotional. And they cannot care for their children. They suffer because of this.

During my campaign for the Senate, I did an event in Fergus Falls, the lovely town in Otter Tail County in west central Minnesota. A woman came up to me. She had a story to tell. She told me her father had gotten diabetes and died pretty quickly. But that was not the worst part of the story. She told me her dad received a lot of supplies from Medicare he had not used. She knew of a woman in town who had diabetes, so she decided to drive these supplies that her dad got for diabetes from Medicare to this woman's house. She did. She asked the woman if she could use any of the test strips and orthopedic shoes and other items. The woman said: Yes, I could use them.

Then this woman, the woman with diabetes, told this other woman that her 24-year-old son had diabetes too. He had had juvenile diabetes as a kid, and now he could not afford insurance because he had a preexisting condition. So this woman from Fergus Falls, this woman with diabetes, shares her insulin with her son, a diabetic mother and a diabetic son sharing insulin because he cannot afford health insurance in our country. Is this the kind of country we want to be? Well, the answer depends on what we do right here right now.

As we talk about reforming our health care system, I wanted to break that phrase "health care system" apart for a second, because we are talking about two things. The truth is we have some great health care in this country and a terrible system. We have dedicated, smart doctors and nurses and researchers and health professionals in this country. They do amazing things.

If you are a member of the Saudi royal family, you can get on your private jet and come to my State for the best health care in the world. The Saudi royal family is willing to travel 7,500 miles to Rochester, MN, for great care from the Mayo Clinic. For a

woman in Fergus Falls, MN, and her adult son, both with diabetes, the same great care is less than 300 miles away, but it is really a world away. That is because if you are an American, you can get great health care too, but only if you make it through the terrible system, and only if you can afford it.

As I travel around Minnesota, when someone comes up to talk to me, I usually hear about three things. First, they say: Health insurance costs too much. What are we going to do about that? Second, they ask: What am I going to do if I get sick or my kid gets sick or my spouse gets sick? And then: Someone in our family has a pre-existing condition. Then I lose my job or I want to change my job or I want to start a small business. How am I going to get health insurance then? And, third, if anything happens to me, something bad, am I going to lose everything? Am I going to go bankrupt?

In my view, the answer to those three questions comes down to two major changes. First, we need to reform our health insurance system so it provides security for every American. Secondly, we need to reform our health care system by putting more focus on prevention and by changing the way health care providers deliver health care so they provide high quality at a lower cost. We can do this. We know we can do this.

Let me take a moment to talk to the skeptics. One of the arguments I often hear from opponents of health care reform is that the majority of Americans are happy with the health care they have, and they are. Because the majority of Americans are healthy right now. The truth is, though, that even those who are happy with their coverage are not going to be happy for so long. Right now the average cost of family health insurance payments, including both the employer's and the family's share, is \$13,375. That is double what it was 10 years ago. If we do nothing, those premiums will double again in the next 10 years, which means a family could be paying more than \$30,000 per year for health insurance. As premiums rise, businesses are forced to drop employees, drop wages or drop coverage to keep up with cost. So even if you are happy with the coverage you have, it may suddenly be the coverage you no longer have because your employer can no longer provide it.

That is exactly what has happened. As premiums go up, so do the number of uninsured Americans. In my State, 355,000 Minnesotans lost employer-based coverage between 2001 and 2008.

There is another problem with the coverage you have. Often you can only find out what is actually covered when you get sick. You can only find out how hard it is to switch or get new coverage once you have been sick. That is why we need health insurance reform that provides true security. It is at those difficult times, when you are nervous and vulnerable and want to focus on dealing with your health

issues, that you realize how little security you have under this current system.

Let me tell you about Liz MacCaskie, who lives in Minneapolis. Liz lost her job in September. She is 58 years old, my exact age. She has been living with diabetes and was just diagnosed with kidney failure. Liz was denied private coverage because of her preexisting condition. The only insurance she can get now comes with a \$5,000 deductible and an \$8 to \$900 monthly charge to maintain coverage. How does paying close to \$20,000 a year for insurance count as insurance? It doesn't. Especially when Liz is trying to live on \$1,000 a month while she takes job training courses and does part-time domestic work. As a result, Liz and her husband have been borrowing money from Liz's brother-in-law to make payments on their house. This is unconscionable.

Right now, if you have been sick, insurance companies can refuse to cover you—or charge you exorbitant premiums.

As an older woman told me at the State fair this summer: At my age, everything is preexisting.

Under our health care reform bill, we will stop insurance companies from denying you coverage or charging you more because of a preexisting condition. That is a very important, very good thing. Right now, if you are a woman who has had a C-section or you have been a survivor of domestic violence, health insurance companies can deny you coverage because having had a C-section or being the survivor of domestic violence is considered by some insurance companies to be a preexisting condition. Isn't that amazing? Is this the kind of country we want to be? The answer depends on what we do right here and right now.

Under our health care reform bill, we will end discrimination against survivors of domestic violence and stop insurance companies from charging women more for their health coverage just because they happen to be women, which health insurance companies are allowed to do now. Right now, if you get sick, your insurance benefits can run out when you need them the most.

Recently, I was contacted by a Minnesotan named Kathy. A few years ago, she was laid off and had to buy her own insurance. She was able to keep up with the cost until October of 2005, when she was diagnosed with Hodgkin's lymphoma. To pay her medical bills, Kathy exhausted her IRA and then had to file for bankruptcy. Kathy's cancer is under control, but her medical costs are over \$10,000 each year. She makes \$22,000 working part-time in a small CPA firm.

This isn't just an individual tragedy, it is a national travesty. Fifty percent of personal bankruptcies in this country are the result of a health care crisis, and 80 percent of those health care bankruptcies are people who have health insurance. I know people are

sometimes surprised to find out that Europe has been doing this better than we have. I have to ask: Do you know how many personal bankruptcies there have been in Germany and in France and in Switzerland because of health care? The answer is zero. Under our health care reform bill, we will eliminate annual and lifetime caps on benefits. Americans will be able to access affordable health care and avoid going bankrupt when they get very sick. That is important. It is very good.

This bill guarantees secure coverage that will be there for all Americans and stay there when people need it. I know you might be thinking: Gee, covering every American, isn't that going to be expensive? Consider this: We already pay for the health care of Americans who don't have insurance. We just pay for it in the most inefficient way possible. Right now people without insurance go to the emergency room for health care, the most expensive possible way to deliver care. Those of us who do have insurance pay for it because it costs every insured family more than \$1,100 a year in additional premiums. This cost shift occurs for two reasons. People are using the emergency room for primary care, meaning they are going whenever they get a cold or an ear infection, which is ridiculously inefficient, or, more likely, they are waiting until they get very sick, in which case it often means their health condition has progressed to a point that is very expensive to treat or maybe ultimately tragic.

According to a Harvard study, nearly 45,000 Americans die because they don't have health insurance. Is this the kind of country we want to be? The answer depends on what we do right here, right now.

The fact is, our irrational health insurance industry not only hurts our families, it also hurts our economy in so many different ways. I recently received a letter from James Solie from Moorhead, MN. He was an Air National Guard member for 32 years. During that time, his daughter was covered under TRICARE, the Department of Defense health care program for members of the uniformed services, their families, and survivors. Now that she is on her own, his daughter gets health care through her employer, one of the big-box stores. Her children were born with cystic fibrosis. Because of their significant health care needs, she can't leave her job.

As James wrote to me:

My daughter is presently a hostage of her family's health insurance needs. She will keep working at that same store until the law is changed.

This is so common, there is actually a term for it. It is called job lock. If this woman had a brilliant idea for a new business or even just wanted to move to a better job, her need for health coverage would prevent her from doing so. That is not only bad for her, multiply it across millions of people and you see how bad it is for our economy.

We are supposed to be the most entrepreneurial society in the world, but because of our health care system, innovators are prevented from starting their own business. Talented or ambitious workers are prevented from moving on to more satisfying, more challenging, more productive jobs. We put at risk the very entrepreneurial spirit that defines us.

German Chancellor Angela Merkel spoke today for a joint session of Congress. She was born in East Germany. When she was a kid, people would smuggle American books and American films into East Germany. Today she spoke on what inspired her the most about it. She said: the American dream.

We are denying millions of Americans their shot at the American dream because of our irrational health insurance system. This bill guarantees that you and your family always have access to stable, portable health insurance, even if you lose your job or get sick or both. It will end the job lock that handcuffs so many Americans.

Of course, guarantees of coverage and portability are hollow promises if they are not accompanied by something else: affordability. Over the last decade, the average health insurance premium for American families, including both the employer's share and the worker's share, has risen from just under \$5,800 to nearly \$13,400. That is an increase of \$7,600 or 131 percent over the last decade. That is more than three times faster than Americans' average wages rose in that same period. Even if you stay healthy, these trajectories are unsustainable. Even if you have coverage, you could still be just a diagnosis or an accident away from bankruptcy.

This has to change right now. If your work-based health plan is expensive, you have no other option, unless you qualify for Medicaid. Under this bill, you will be able to get subsidized insurance if your coverage through work costs you more than a certain percentage of your income. Right now, if your employer doesn't offer you a health plan or you are unemployed, it is prohibitively expensive to buy it on your own. Under this bill, you will be able to access a range of affordable insurance options through a health insurance exchange. This exchange will be similar to a Travelocity for health insurance. All the plans have to meet basic standards, and you can match them up and compare them side by side so you can pick the one best for you and your family.

This isn't going to only help individual Americans. It will help businesses, small businesses. Right now, if you are a business with, say, 11 employees and one of your employees gets sick or pregnant, your premiums are going to go up dramatically. That is because your risk pool is 11 people. But when you choose a policy from the exchange, your risk pool can be a million or two. That is the point of insurance,

to spread the risk over as many people as possible.

In addition, small businesses will also be eligible to receive tax credits to help them purchase coverage for their workers. In Minnesota alone, over 72,000 businesses would be eligible for this assistance. That is what the subsidies and the exchange are all about: increasing the availability of insurance and making it affordable for families and small businesses.

That is also what so much of the debate surrounding a public insurance option is about. A public option creates more choice for consumers and more competition in the marketplace. People who are happy with their current plans would not need to change them. But millions of people who did not have health care options before would finally have an affordable choice. This is what the overwhelming majority of Americans want. It is the right thing to do. I would say to anyone who is against the public option, do not choose it for yourself, but do not deny other Americans that choice.

I remain steadfast in my support for a public option. But we should also recognize a public option is just one of several ways this bill seeks to control health care costs. All these changes, which will create security and promote affordability, will provide necessary and meaningful reforms to the health insurance system. But we need to remember the goal is not just a better insurance system; it is better, more affordable care. That requires not only changing the way insurers behave, it also involves the way we behave and the way our health care providers behave.

Total spending on health care in the economy has doubled over the past 30 years and now is about 16 percent of our GDP. That is almost double the average for western industrialized nations, which are at 8.9 percent. The CBO estimates that the percentage of our GDP spent on health care will double over the next 25 years to 31 percent of GDP if we do nothing.

Fortunately, we have the opportunity right now to act, and we know how to do it. We need to look no further than Minnesota. If my colleagues will indulge me for a bit of some home State pride, Minnesota has taken a national lead in many areas, including cost containment and community health. Part of it is because 90 percent of Minnesotans are covered by non-profit health plans. It is also because we have models such as the Mayo Clinic, Allina, and HealthPartners, where physicians are paid to be part of a team, providing integrated care, centered on the patient as a patient, not as a profit center.

Patient-centered care is the key. The point is not just better, more efficient treatment for patients, it is that people do not want to be patients at all. The goal of health care is to prevent illness and then, if people get sick, to actually make people who are sick

healthier, and then to keep them healthy.

To those ends, we need to see reform in three areas: incentives for better care, more focus on prevention, and a real commitment to contain costs. Let's start with incentives.

Right now, Minnesota providers are punished—punished—under Medicare for providing high-quality care at a low cost. According to the most recent data, Minnesota receives \$6,600 per Medicare beneficiary per year and is second in the country for quality of care.

Texas averages more than \$9,300 per beneficiary, with some of the worst health outcomes in the country. So Minnesotans are effectively paying doctors in Texas for excessive treatments and lousy outcomes.

Now, consider an innovative program I have seen in my home State: the Cardiac Care Program at Duluth St. Mary's Hospital. They aggressively manage patients with heart disease by helping people make lifestyle changes and making sure people get the followup attention they need. As a result, they have reduced hospitalizations by 80 percent and saved \$1 million in 1 year.

But because the current system does not incentivize value, Duluth St. Mary's received no reward for these cost savings. In fact, a hospital that lets its cardiac care patients go unchecked until they need another procedure gets paid a lot for performing that procedure, even though their patients are less healthy.

Under the current Medicare reimbursement system, the good care gets punished and the less effective, more expensive care gets rewarded. We are not providing health care in this country; we are providing sick care. We need incentives for providers to reduce hospitalizations and commit time and resources to prevention. That starts with Medicare payment reform.

This is not an issue of State versus State. If we can get better outcomes at lower costs, it will be better for the entire country because it is the only way we will finally be getting a handle on the runaway cost of health care.

That is why I am so thrilled this health reform bill includes a provision to fundamentally improve the way we pay doctors. Thanks to the efforts of MARIA CANTWELL and my colleague, AMY KLOBUCHAR, and others, for the first time ever we will include what is called the value index in the Medicare payment structure. Doctors who provide high-quality care at a reasonable cost will no longer be punished. Instead, they will be rewarded for being effective partners in their patients' care.

That brings me to lifestyle and prevention. One of the most disturbing trends, for our health and our health care system, is the massive increase in obesity in this country. We know this increase in obesity will lead to increased heart disease and diabetes and

increased health care costs for our country. But that future is not inevitable.

Today, Minnesota spends \$1.7 billion per year on hospital costs for heart disease. But the residents of New Ulm, MN, have decided they are not going to contribute to those statistics anymore. New Ulm is a beautiful town in the heart of the Minnesota River Valley, about 90 miles southwest of the Twin Cities. The town is partnering with Allina Hospitals & Clinics and has made a commitment to reduce heart attacks by 25 percent over the next 10 years. To do this, the residents of New Ulm are working to bring down their high blood pressure and cholesterol, manage their diabetes, stop smoking, and start exercising. They have community cooking classes, workplace wellness initiatives, and free health screenings.

I visited New Ulm during the recess to see what these folks are doing and how determined they are to make changes in their lifestyles. This dedication to prevention and wellness will keep individuals in New Ulm living longer and living healthier. It will also save the health care system about \$10 million over the next 10 years. When it comes to wellness, self-interest and the national interest are aligned.

This bill we are debating right now guarantees that routine checkups and preventive care, such as colonoscopies and mammograms, are covered by all insurance plans at no cost. We need to invest in those things that sometimes seem peripheral to good health but are essential to it: access to healthy foods and a safe environment for physical and social activity to address the alarming rise of obesity and the epidemics of diabetes and heart disease.

I thank my friend TOM HARKIN for his leadership in making sure the Prevention and Public Health Investment Fund is in the health reform bill. This fund will help Americans make the lifestyle choices that lead to better health. These investments will help Americans stay healthier and save money in the long run.

Another way to improve care and bring down its cost is to make sure a greater percentage of every health care dollar actually goes to health care, not wasteful administrative costs or advertising and profit.

While national health care plans spend less than 87 cents of the health care premium dollar on health care, Minnesota's nonprofit plans lead the Nation in keeping administrative costs low, spending 91 cents—91 cents—of every premium dollar on health care. Four cents may not seem like a lot until you remember that is 4 percent of \$775 billion in private health insurance premiums a year.

This percentage—the 91 percent I was talking about—is called the medical loss ratio. It is a measure of how much of each health care dollar actually goes to health care. The medical loss ratio

for insurance plans in Minnesota is 91. Many individual and small health group plans across the country are closer to 60—meaning that 40 cents of every health care dollar goes to administration, advertising, and profits—all things that do not make people healthier.

That is why I have introduced legislation, the Fairness in Health Insurance Act, to mandate that 90 cents of every premium dollar must go to health services, not to unnecessary administrative costs or advertising or bloated executive salaries.

This builds upon the important work of my colleague, JACK REED, who pushed for disclosure of this information in the HELP Committee bill.

My house colleague, KEITH ELLISON, from Minnesota's Fifth District, has introduced similar legislation. The House has made progress on this issue by requiring a medical loss ratio of at least 85 percent for the small and large group insurance markets. And because administrative costs constitute such a high percentage of health costs, I want to go even further. Right now, there are hundreds of different private insurers that have hundreds of different claim forms and codes. Why so many different forms? Because the more complicated it is, the more different each form is, the more likely it will be filled out with an error.

Remember, a form filled out with an error allows the insurer to deny the claim. That is why I have called for every insurer to use a standard form for claims. Minnesota has done this on the State level and is saving money and preventing the headaches that providers have in trying to navigate these hundreds of different forms. Nationally, this is a great way to save a lot of money and a lot of paperwork.

You know who will like this? Doctors. Physicians reported spending the equivalent of 3 work weeks each year dealing with health care plans and having to devote additional resources to hire extra staff, not to provide care for patients but to do extra, endless paperwork.

When time is converted to dollars, the national cost to physician practices of dealing with health plans is between \$23 billion and \$31 billion each year. If we had a uniform billing and claims system, we could save up to \$70 billion per year. Wow.

By moving to electronic medical records, we will reduce the number of duplicated tests. We would make it cheaper and easier for people to stay healthy and out of the emergency room. We would be on a path to lower costs for everyone by making health care patient-centered, not profit-centered.

I am proud of what we are doing in Minnesota—with institutions that are delivering care efficiently and effectively. But I recognize the truth of something one health care economist said to me at a health care roundtable I held in Minneapolis a couple months ago. He said:

Minnesota gets an "A" . . . but only because we're grading on a curve.

There is huge room for improvement all across America. That is why this is an incredible moment of opportunity for those of us in this Chamber and for the entire Nation.

As I said when I rose, we have great health care in this country but a lousy system. If we do not fix the system, millions more Americans will lose the care. Yes, this is complex stuff. That is why it is particularly important that nobody here injects into this debate misinformation that engenders fear. There has been too much of that already, and it has not resulted in anybody getting better care or moving us closer to a consensus.

So let's remember that behind the numbers we talk about are real people—real people who urgently need our help. As the saying goes: Statistics are people with the tears wiped off.

This is our chance to confront the biggest single threat to America's future and the greatest unmet moral obligation in our history all rolled up into one. That is what health care is. This is our chance to answer those questions Americans are asking, our chance to make life better for Liz MacCaskie and James Solie's daughter and Kathy and a mother and her son from Fergus Fall, MN. We have a chance to keep costs down for people who have insurance and finally provide coverage for those who don't. This is our moment to meet this great moral and economic challenge. So let's finish our work and overcome whatever legislative challenges remain.

We all want to look back on this day from an America in which everyone has stable, secure, affordable health care and say it wasn't the easiest thing, but it was the right thing, and together we were able to get it done.

There is so much more to say on health disparities, on fraud, abuse in the system, on mental health parity, on chemical dependency treatment, on chronic care, on rural health, on workforce issues such as the need for more primary care physicians, and so many other important topics. This is just a start, and I will certainly be back to say more.

I yield the floor, and I note the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

Mr. KAUFMAN. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER (Mr. CARDIN). Without objection, it is so ordered.

Mr. KAUFMAN. Mr. President, I ask unanimous consent to speak as in morning business for up to 5 minutes.

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

TRIBUTE TO FEDERAL EMPLOYEE DR. STEPHEN ANDERSEN

Mr. KAUFMAN. Mr. President, I rise once again to honor the service of one

of our country's great Federal employees. Today, during these uncertain times, the American people face many challenges—one of them we share in common with all people throughout the world. What I speak of is the threat posed by climate change.

Just this morning, in a special joint session, we heard German Chancellor Angela Merkel on the importance of working together internationally to address climate change. We have come so far in the past three decades but much more needs to be done. So much depends on our ability to address this problem, including the long-term stability of our economy and our national security.

Since its creation in 1970, the Environmental Protection Agency has been at the forefront of reversing climate change. This week's great Federal employee not only spent over 20 years at the Agency, he is also someone we can thank for his leadership in implementing a landmark agreement that has already helped slow down climate change.

When Dr. Stephen Andersen first came to the EPA in 1986, he already had over a decade of experience in the field of climate and ozone protection. During his first year as part of the EPA's Stratospheric Protection Team, he worked with Soviet scientists to negotiate a joint effort to map the ozone by satellite. This was the first-ever United States-Soviet joint mission in space.

The following year saw the adoption of the Montreal Protocol in 1987. This crucial international agreement led to dramatic reductions in the chemicals that contribute to ozone depletion.

Stephen began serving as cochair of the Montreal Protocol Technology and Economic Assessment Panel in 1988. He worked tirelessly to convince hundreds of military and industrial experts to phase out the use of ozone-depleting chemicals on a voluntary basis. Over the course of 20 years, the Montreal Protocol was so successful that it helped prevent annual emissions of 11 billion metric tons of carbon dioxide. According to a crucial study by a team of environmental scientists Stephen himself led, the Montreal Protocol may have delayed the impact of climate change by 7 to 12 years. That doesn't even count the effects of other reductions made as a result of the treaty's influence.

Stephen led an effort a few years ago to encourage several of the world's highest emitting nations to strengthen the original treaty. His leadership led to nine countries agreeing to speed up the elimination of hydrofluorocarbons.

Today, Stephen continues to work on the science of combating climate change. He has focused much of his energy on helping to create voluntary partnerships between the EPA and the business community in order to promote green practices.

Stephen won a Service to America Medal last year for his long and distinguished career as an outstanding public

servant. I hope my colleagues will join me in honoring Dr. Stephen Andersen's service and that of all the dedicated employees of the Environmental Protection Agency. I know that as we continue making progress on this front, they will play an important role in America's global environmental leadership.

Mr. President, I yield the floor.

The PRESIDING OFFICER. The Senator from Maryland is recognized.

HEALTH CARE REFORM

Mr. CARDIN. Mr. President, I take this time—and will share it with the Senator from Minnesota, Ms. KLOBUCHAR, and the Senator from Delaware, Mr. KAUFMAN—to talk a little bit about health care reform, health insurance reform, and the need for us to act.

Quite frankly, on behalf of middle-income families of America, the very worst option we could do is allow the status quo to continue.

During this time, I am going to be quoting from some letters I received from Maryland families who are hurting today. These are families, some of whom have health insurance but they cannot afford it or they are not certain they are going to have adequate coverage to deal with the needs of their families. They are looking to us to help them deal with the problem of health insurance today.

The first problem, quite frankly, is the fact that it is too expensive. Health insurance in America is too expensive for so many families. As the Senator from Minnesota knows, I use the numbers 6, 12, 23 frequently: \$6,000 is what it cost a family in Maryland 10 years ago for a family health insurance policy. Maybe their employer paid part of it. Maybe they paid part of it. Then, it was \$6,000 for adequate coverage. Today, that number is \$12,000 a family. Many families in Maryland have a hard time affording \$12,000 of their compensation going to pay for their health insurance. By 2016, it is going to be \$23,000 for a family, if we don't do anything about health insurance reform.

Today, of that money families are spending, \$1,100 represents what insured families are paying for people who don't have health insurance. I am frequently asked: What about these 46 million or 47 million Americans who have no health insurance, shouldn't they take care of themselves? I say: Yes, we should have personal responsibility, but today those who have insurance are paying extra costs for those who don't have insurance.

One of the most important points of health insurance reform is to make sure everybody pays their fair load to reduce the cost of those who currently have health insurance.

(Mr. TESTER assumed the chair.)

Ms. KLOBUCHAR. Will the Senator yield for a question?

Mr. CARDIN. Yes.

Ms. KLOBUCHAR. That is a very important point about the hidden tax. When I was county attorney in Min-

nesota, representing one of our biggest hospitals in the State, a lot of people came in who didn't have a doctor. Their doctor was the emergency room. Their doctor still is the emergency room, and it is incredibly expensive. If you could explain that a little more because many people don't understand that when people don't have insurance, we are still paying for them. They call it the hidden tax.

Mr. CARDIN. I thank my colleague for the question. The Senator is right. People who have no health insurance do what they can do. They use the emergency room as their doctor. They use the emergency room when they should not be using it. It is very expensive; it costs a lot of money. By the way, they don't pay their bills. It becomes part of what is known as uncompensated care in our hospitals. What is more serious is, they don't get the preventive health care they need. They get the more intense services than if they had access to our health care system from the beginning. They use the emergency room, as the Senator from Minnesota is referring to, and they don't pay their bills, and that becomes uncompensated care. All of us who pay the hospital bills and pay for our services also pay for what the uninsured are using in the emergency rooms, which adds to the cost of hospital care and adds to the cost of our insurance premiums that we pay for family policies. In Maryland, that amounts to \$1,100 a year. That is what you and I are paying for those who don't have health insurance because they are using the health care system and not paying their bills.

Part of health care reform is that everyone should have access to affordable, quality health care and health insurance.

Mr. KAUFMAN. Will the Senator yield for a question?

Mr. CARDIN. Yes.

Mr. KAUFMAN. Isn't it true that when these people don't get prevention, don't have a doctor, don't get the vaccines and the shots they need and they don't go to the emergency room until they are very sick, what happens is they go to intensive care or something or they have a much more serious illness that can go on for weeks and months under intensive care and the price goes up and up?

Mr. CARDIN. The Senator from Delaware is absolutely right. There have been studies done comparing two individuals with the same health care condition, one with insurance and one without insurance. The person who doesn't have insurance uses more health care services than the one who has health insurance, and it is for the reason the Senator said. The person with health insurance will have a much earlier intervention or gets preventive health care, will take blood pressure medicine or cholesterol medicine or will have tests that discover illness at an early stage or prevents an illness; for example, with colon cancer, a polyp

can be discovered before it becomes cancerous. A person without insurance doesn't get those services. They enter the system in a much more costly way, which may lead to hospitalization that wouldn't have been necessary if they entered the system at an earlier stage, but they cannot because they have no health insurance. So the Senator is right.

One of the things we do is try to help the families who have health insurance. We can end insurance company abuses. That is a very important point. The health insurance reform package we are looking at will end health insurance company abuses. All the bills reported out of the committees do that. You cannot be denied coverage due to preexisting conditions. There will be no more annual or lifetime caps on benefits. They cannot charge more or drop your coverage if you get sick. It requires them to fully cover preventive care and checkups.

I have received—and my colleagues have, I am sure—letters from people in my State. I wish to tell you how important these health insurance reforms will be in helping middle-income families. I have one example, and I am sure my colleagues can cite others. Here is a letter I received last month from Kevin, who lives in Kensington, Montgomery County.

Kevin is a healthy, nonsmoking, 54-year-old father who was laid off and has recently started his own company. He has two high school-aged children. He recently completed the Marine Corps marathon and has been an avid runner and swimmer all his life. I dare say most of us could not do that.

After Kevin was laid off, all four family members applied for coverage in the individual market. However, Kevin and his two children were denied access to comprehensive coverage because of preexisting conditions. Listen to this. Kevin was denied coverage because the insurance company said he had a history of upper respiratory symptoms. Actually, he has only had two chest colds in the last 6 years. Five years ago, tests showed a very small amount of scar tissue in his lungs, but doctors have concluded this is not a health issue or risk. Yet he was denied coverage because of a preexisting condition. It is important to get health insurance reform passed because insurance companies will not be able to discriminate based on preexisting conditions—that don't even exist, in Kevin's case.

Kevin's daughter's coverage excludes benefits related to any injury to any part of her back. This is because she once had a minor slipped disc, which has not caused her pain in more than 2½ years. This is a common condition among teenage girls, but the insurance company is refusing to cover back injury. Her doctor has written to the insurance company stating that she "has no more likelihood of needing medical services than any other patient her age." Yet today, Kevin is denied full coverage for his daughter.

It gets even worse. Kevin's son was also refused coverage for his knee because he was diagnosed with growing pains that required no treatment. This means Kevin's son will not be covered for any injury to his knees at any time in the future.

Kevin writes:

We have a healthy, physically active family. No doubt healthier and in better shape than 98 percent of the families in this country. And we're told that 3 of the 4 of us are too great a risk to be fully covered. . . .

We are victims of a health care system that is horribly broken, and our experience in trying to get health insurance for our family—a family that has no chronic health conditions requiring medical treatment—has turned us into strong supporters of health care reform.

Mr. KAUFMAN. Will the Senator yield?

Mr. CARDIN. Yes. I am glad to yield.

Mr. KAUFMAN. This thing with preexisting conditions is incredible. You hear this everywhere you go. In Dover, DE, we have Angela Austin, a recent mother. She works as a bartender. Most of her earnings come from tips. She doesn't get health insurance from her employer.

When Angela became pregnant, she tried to find private health insurance, but she was repeatedly denied coverage because her pregnancy was considered a preexisting condition. She applied for Medicaid—to find prenatal care for her and the baby—but was denied coverage because she earned \$200 more than the monthly limit allowed.

She called organizations and clinics and was unable to find a payment plan she could afford. Midway through her pregnancy, Angela decided to cut back her work hours so she could qualify for Medicaid. She worked all 9 months of the pregnancy and delivered the baby on May 27.

The Medicaid coverage she got was especially crucial because she had complications from hyperthyroidism and was able to get the necessary prescriptions to control the condition.

The story gets even worse. Angela was so anxious that everything possible be done to ensure a healthy baby, the system threw up roadblocks.

Pregnancy should not be considered a preexisting condition. What is more, no one should be denied coverage because of a preexisting condition. There are many cases where people are totally healthy, and they have been denied coverage because of preexisting conditions. We are going to pass a bill that eliminates not being acceptable for preexisting conditions.

Mr. CARDIN. I think people in this Nation would be shocked to hear about that situation and for someone who is totally healthy being denied full coverage because the insurance company just wants to deny coverage, just wants to pay less claims in the future, so it finds reasons to restrict coverage, even though that person is as healthy as anybody in the general public but is being denied coverage today.

Ms. KLOBUCHAR. Will the Senator yield?

Mr. CARDIN. Yes.

Ms. KLOBUCHAR. I also was listening to this and thinking, about a week ago, I was at an event that Mrs. Obama, the First Lady, put on for breast cancer in honor of Breast Cancer Awareness Month. There were three women there who all had breast cancer. They were all survivors, and they had incredibly low rates of possibly getting breast cancer again because of advances in science. I was stunned to hear of their difficulty. Even though their possibilities of getting breast cancer again were so low, it was still considered a preexisting condition for an insurance policy. A recent example, when you think about it hitting middle-class families—and some of the people watching this on C-SPAN may have seen this on television—a little boy named Alex was denied coverage by his family's health plan. Alex's parents have coverage through their employers, similar to so many middle-class Americans. But their 4-month-old son Alex, who weighed 17 pounds—and my daughter was one of those low percentages when she was born. He weighed 17 pounds at 4 months old, so he was denied coverage. The insurance company claims this was a preexisting condition for the otherwise healthy baby because of his weight.

Here is the interesting part—and I know the Presiding Officer from Montana will appreciate this. After his family went on TV with the little boy, then the insurance company changed its mind and, suddenly, decided to cover him. I guess the lesson is that middle-class families have to go on TV to make their case in order to get coverage or when a woman who has been a victim of domestic abuse is denied coverage—which is considered to be a preexisting condition in eight States—maybe if she was willing to talk about her domestic abuse on TV, there would be a change of heart. That is not good enough—coverage by cable TV—for the majority of Americans. They need stability in the system. They need a guarantee that they are going to have coverage. I thank the Senator from Maryland for raising this important issue.

Mr. CARDIN. If I might mention another family in Maryland, a typical family—Marvin and Lillian, who live in Chevy Chase, who are grandparents. I can relate to that, having two wonderful granddaughters. Marvin is a retired Federal Government employee. Both he and his wife Lillian have Medicare. They are in pretty good shape. However, they are worried about their grandchildren.

They have a grandson who is 14 years old. He has Crohn's disease and dwarfism. He currently has coverage through his parents, but his family is petrified that he will be denied coverage when he is no longer able to receive insurance through his parents. Because of his preexisting conditions, it will be extremely hard for him to find individual coverage while job hunting or adequate coverage while at

school. Without reform, high health care costs will preclude him from starting his own business or working for a small business owner.

Marvin writes:

My grandson's future employment prospects will be limited because he will need an employer with a large group plan to ensure good coverage. If he gets sick without coverage, or very limited coverage, it would be a disaster.

It is truly unacceptable that in America today, because of the way our health insurance system operates, that a person's future and what type of job that person can seek is limited because of a preexisting condition. That does not make this Nation as competitive as we need to be. We can certainly do a much better job on that now.

There are two good points here. One is that we eliminate preexisting conditions. That would be taken care of. We also provide coverage through the age of 26 so that you can keep a child on your family plan coverage through the age of 26. I think this is going to be a very popular issue. This is one area that does not cost a lot of money. Children in their early twenties are not at high risk. It is unlikely this will add greatly to the insurance premium cost—in fact, it will not—but it does give greater assurances for those children who are not yet fully in the workplace—so they do not have the opportunity to get an affordable health insurance product—that they can stay on their parents' policy until age 26. That is another way we are going to help families.

Lastly, the other area we want to be sure is done is when people change jobs. We know this is a very mobile workforce; people change jobs much more frequently today than they did 10 years ago. This bill will make sure you always have health insurance, even if you lose or change your job. You are not going to be locked into a company because you don't want to lose your health benefits. I must tell you, I hear that frequently from people in Maryland. I am sure my colleagues hear it in Minnesota and Delaware. People say: I want to change jobs, but I can't because I don't want to lose my health benefits. That should not be a reason someone shouldn't be able to look for other opportunities. When we get health insurance done, people will be able to get insurance regardless of where they work. There will be affordable coverage for all Americans. That will help middle-income families. That is our objective. That is what we are trying to do.

Another area I want to mention briefly is small businesses. We hear frequently that small business owners have a hard time finding affordable insurance. I will give a couple examples of people from Maryland.

Steven from Annapolis is a self-employed small business owner. Steven's health care premiums have increased by unmanageable amounts. Steven is currently paying 55 percent more for

his family health insurance than he was 14 months ago—a 55-percent increase in 14 months. The premiums for Steven and his family, all of whom are healthy, are approaching \$10,000 annually. In August, his premiums increased 24 percent, after having increased 25 percent in 2008. He wakes up in cold sweats worried about how he can afford such high costs. Steven sent me his most recent health insurance bill, which showed the 24.1-percent increase.

Steven writes:

We are worrying about these problems 24 hours a day. That is no exaggeration.

Small business people wake up in a cold sweat, as I have done many times through the course of this difficult recession, wondering how we are going to meet our client deadlines, pay our bills, and be a good father and husband all at the same time.

For small businesses, if you have one bad experience with health care during the year, you can expect a large premium increase the next year. It is one thing about health insurance being expensive as it is, but if you are a business owner, how can you plan your company budget when you don't know what your health premiums are going to be the next year?

Ms. KLOBUCHAR. Will the Senator yield?

Mr. CARDIN. I will be glad to yield to my friend from Minnesota.

Ms. KLOBUCHAR. One of the things I have learned in the past year meeting with small business owners is this huge disparity. Small businesses pay 20 percent more. The ones that are the bedrock of our entrepreneurial system in this country pay 20 percent more than big businesses for health care. Their employees are in a small business, but the ones who need it the most, the ones who probably make less income, pay 20 percent more for health insurance.

I was up in Two Harbors, MN, visiting a little backpack company that has done such a good job. They now make backpacks for our troops because they are lighter weight and better for their backs. This little company started with a few employees; it now has 15, 20 employees.

When the owner of that company started it, he didn't have kids. He now has two kids—four in their family. He is paying \$24,000 a year for his health insurance. This is a little tiny backpack company in Two Harbors, MN. When the Senator from Maryland was telling us about people having to adjust, they cannot plan, he told me if he had known when he started that much of his profits were going to go into his health insurance, he would not even have started the company to begin with.

This not only hurts our employees, it actually stops small businesses from starting—the incubator of so many of our great ideas in this country and jobs in this country. This is truly something that needs to be solved because it is hurting jobs in this country, the fact that it is so difficult for small business owners to afford health care.

Mr. KAUFMAN. Will the Senator yield for a minute?

Mr. CARDIN. I yield to the Senator from Delaware.

Mr. KAUFMAN. This is another example. It is not just Delaware, Maryland, Minnesota, California, or New York. On the same subject, Ian Kaufman—no relation—moved to Delaware right out of college in 1990. Unfortunately, like far too many Americans today, he got laid off from his job. To get back on his feet, he wanted to start his own business. In the process, Ian picked up COBRA coverage to ensure his family maintained health care insurance. When he first signed up for COBRA coverage, his monthly premium was \$1,800—a lot of money each month. Thanks to the COBRA provisions, however, in the stimulus bill, Ian saw his payments reduced by 66 percent, which made his monthly premiums much more manageable. However, this premium assistance will soon run out, and then he will be back once more to paying \$1,800 a month. In anticipation of higher COBRA payments, Ian applied for coverage at BlueCross BlueShield but was turned down. They never gave him a reason. He suspects—what we were talking about earlier—that there was a preexisting condition of one of his daughters.

Ian worries, like so many Americans, that the high cost of providing health care to his family, in addition to the difficulty of finding a willing policy provider, will affect his ability to stick with his startup business—the point my colleagues were making of starting up a business and being worried about health care.

Unfortunately, Ian's health insurance predicament as a self-employed businessman is not uncommon. There are entirely too many sole proprietors and small businesses that cannot afford health policies for themselves, their families, and any employees they might have, thereby killing the innovators of our system, the people who create the jobs, the people who made America great, the small businesspeople. They cannot go into business because they are worried about health care not just for their employees, but they have to worry about health care for themselves and their families. We have to change that if we are going to get innovation back in the country and small businesses up and running.

Mr. CARDIN. Small businesses are clearly the driving force behind job creation in America. The Senator from Delaware is absolutely right. Innovation comes from small business. They are so discriminated against under our current health care system. Middle-income families, in large measure, work for small businesses, and they are absolutely disadvantaged today because of the system.

The status quo is unacceptable. We need to enact insurance reforms under what we have here. Small companies can benefit the same as large compa-

nies, with much larger pools, much more affordable plans, more choices.

There are really no options for small businesses today. They do not have a lot of companies willing to write the policies. It is interesting, in my State of Maryland, two insurance companies write 71 percent of the private insurance business. If you are a small business owner, you are either going to be with one of those companies or you are not going to be able to find insurance. They can pretty much dictate.

One more example. Robert, who lives in Baltimore, is a married architect who has health insurance with one of our large insurance companies. His insurance for himself and his wife is \$20,000 a year—\$20,000 a year. As a small businessperson—listen to this—not only does he have to pay these high premiums, but if he needs to find a gastroenterologist in order to do a test, there are plenty of gastroenterologists in his neighborhood, but the insurance company will not cover a doctor in that area. He has to travel all the way across town. He says he spends more time finding out who will treat him because he doesn't have a choice of plan. He has to be in this plan. So there is a lot of wasted money in the system he has to go through.

By the way, if you are in a small business, running a small business, you have to spend time on your business. If you don't spend time on your business, you are not going to make it. If you have to spend time to figure out what doctor you can see under the small print in your insurance plan, you are not going to succeed as a businessperson.

There are a lot of good reasons why we need health insurance reform in America. There are a lot of good reasons we need to act, a lot of good reasons middle-income families are depending on us to fix this broken system—it is too expensive, not enough choice. The health insurance reforms coming out of our committees all provide much more choice and option and protection to the people in our communities.

Mr. KAUFMAN. One of the great ironies in this whole health care debate, which is full of ironies, is I talk to so many small businesspeople, and they are scared of the public option. They have been scared by the ads and things on television. As you say, for a small businessperson, the public option is going to be their choice to get the health care they need, simple health care that is laid out for them that makes a lot of sense.

One of the big things we have to get through to people is exactly what the story is here and what really will help them get their health insurance so we can have small businesses built up, get more employees, create more jobs, and create the jobs we need for the country.

Mr. CARDIN. The public insurance option is another choice. There is more competition. It brings down costs. That

is why we support a public option. It is a reliable product you know is going to be there.

If you are living in western Maryland—and there are not a lot of insurance companies there—you know there is a public option, that plan will be there for you. You know it is going to be affordable. You know it is not going to leave town, as some of the private insurance companies did that used to insure Medicare. These plans will be there.

It is also going to act as strong competition for the private insurance companies so they know they have to be competitive. Today, again, it is not competitive. There are not enough companies there.

The private insurance option will offer people, such as Robert whom I mentioned, another option, another choice, an affordable plan. That is what he is looking for. He cannot afford \$20,000 a year. He is looking for a premium much more affordable than \$20,000 a year, and the public insurance option gives him that choice.

One other thing about the public option that needs to be clarified. There are those who say: This is a government takeover. Is Medicare a government takeover? The answer is no. There has not been one Senator come to this floor to say we should repeal Medicare. Medicare has been a very successful program.

By the way, health insurance reform will strengthen Medicare. Why? Because the way to bring down Medicare costs is to bring down health care costs. What we have been doing year after year is picking on Medicare, saying we are going to control health care costs by reducing Medicare. We cannot do it. You have to bring down health care costs to bring down Medicare costs. And what we do is strengthen the Medicare benefits by giving additional benefits, starting to fill that doughnut hole under the prescription drug plan, offering preventive care to our seniors. So we are strengthening the Medicare Program. The doctors and the hospitals are all private, as they would be under a public option. This is a way of providing more competition, quite frankly, keeping the private insurance companies a little bit more competitive and honest as they do their marketing, to make sure we get value for the dollars we are paying for our health insurance premiums.

Mr. KAUFMAN. Again, once more, the irony. Isn't it an incredible irony that people come to the floor and talk about reducing the deficits, reducing the deficits, reducing the deficits, but they don't have health care reform. We know the major cause for the increase in deficits is Medicare and Medicaid, not because they are bad programs but because health care costs explode. There is no way they cannot get greater. That is our biggest challenge in terms of deficit reduction. We have to do something about Medicare and Medicaid costs.

People talk about deficits and then say we don't need health care reform, why don't we slow down, we don't need it now, this is not important. We cannot deal with our deficits if we don't deal with health care costs because without dealing with health care costs, we cannot deal with Medicare and Medicaid. The Senator is absolutely right.

Mr. CARDIN. Health care costs are growing about three times what wages are growing in America today. That means a government that pays for Medicaid and Medicare will continue to pay a larger amount of the budget for health care unless we can get health care costs under control. It also means American families are going to be paying more of their income for health care unless we get health costs under control.

So how do we get health care costs under control? We do it by prevention and we do it by wellness and by streamlining the bureaucratic system, by using health information technology more effectively and by managing diseases. We do it in a way that brings down health care costs and improves access and quality, and that is what we are doing.

The Senator from Delaware is absolutely right. Our goal is quite simple: bring down the escalating cost of health care, provide access to affordable quality health care for every American family, and do it in a fiscally responsible way.

The Senator from Minnesota, Ms. KLOBUCHAR.

Ms. KLOBUCHAR. Well, I thank Senator CARDIN. As I was listening, I was thinking about how I first got involved in this whole debate. My story is like so many moms and middle-class parents. It involved rules, rules that made no sense when it is your family's health at stake.

When my daughter was born, she was very sick. She couldn't swallow. They thought she had a tumor. She was in intensive care overnight. Back then, the insurance companies had a rule that you could only stay in the hospital 24 hours—new moms and their babies. For some people, when you have been in labor for 24 hours and you think your daughter might die for 24 hours, it doesn't make sense. So 24 hours after giving birth, I was kicked out of the hospital. I was wheeled out of the hospital while my daughter was there in intensive care.

I thought to myself: This is never going to happen to anyone again. I went to the legislature with a number of other moms and got one of the first bills passed in the country guaranteeing new moms and babies a 48-hour hospital stay. I still remember the conference committee where we had a number of lobbyists who couldn't say they were against the bill, but they were trying to delay the implementation. They were trying to make it so that it wouldn't take effect for years and years and years.

I finally decided to bring my pregnant friends to that conference com-

mittee so they outnumbered the insurance company lobbyists 2 to 1. When the legislators said: When should this bill take effect, all the pregnant moms raised their hands and said: Now. And that is what was happening.

I can tell Senator CARDIN, this is what the American people are saying. They are saying: Now. They need reform now because of what you have just talked about—the fact that costs have been escalating and escalating, and it is becoming more and more unaffordable for so many middle-class Americans.

In 2008, employer health insurance premiums increased by 5 percent, two times the rate of inflation. Everyone feels it. Everyone knows what I am talking about.

When people throw out all these numbers—and we hear all these numbers from the other side—I believe you only have to know three numbers. Senator CARDIN brought them up before, three simple numbers. They are easy to remember: 6, 12, and 24.

What do the numbers 6, 12, and 24 represent? Well, \$6,000 was the cost of insurance for the average American family 10 years ago. They were paying that in their premiums. They are now paying \$12,000. Some people are paying a lot more, such as the small business owner I talked about in Two Harbors, MN. But the average is \$12,000.

What do the studies show? They show that in 10 years people in Billings, MT, people in Delaware, people in Baltimore, people in the tiniest towns in this country will be paying an average of \$24,000 a year. Do you think they are going to be able to afford that, the average middle-class family, \$24,000 a year? I think every family can look at their own checkbook and figure out that answer. That is why we need health care reform now.

I think of the people I have heard from in my State, such as Jan in Plymouth who wrote the other day about her 20-year-old daughter Jennifer. Jennifer was diagnosed almost a year ago with Hodgkin's lymphoma. She made it through chemotherapy but is still being monitored. She had to continue going to college to keep her health care coverage. Despite having good health care insurance, Jan and her husband had to use their retirement fund to cover the out-of-pocket expenses of Jennifer's chemotherapy. Jennifer has since taken some time off from school to recover and is going to be transferring to a new school soon. Her parents don't know how they are going to keep her insured.

That is why the point was made about this plan allowing parents to keep their kids on their insurance until they are 26 years old. I can't tell you what good news that is to the parents of America who are struggling and who are thinking: Once my kid goes to college, what is going to happen because they would not have a job? How are they going to get insurance?

Now, until they are 26 years old, they are going to get insurance. That would

help this family in Minnesota tremendously.

The preexisting conditions—I talked about three women with breast cancer who were there with the First Lady—unbelievable stories of people who, through no fault of their own, get a disease, they are not sick anymore but they get thrown off their insurance policies; kids who are a little overweight or a little underweight—the only way they can get rid of this thing off their backs and get health insurance is by going on TV? I think we would have to have permanent TV stations going around the clock to cover all these families who want to get their preexisting conditions off their backs. That is not going to work in this country. The better way is to pass health care reform.

The Senator from Maryland brought up the cost, and I can tell you that for a lot of people in Minnesota, that is the No. 1 issue I hear: How can we afford this? What can we do about it? Well, I can tell the Senator from Delaware—and I see the Senator from Illinois, Mr. DURBIN, is here, and he has been working hard on the Medicare fraud issue on the Judiciary Committee, as well as the Senator from Maryland—that 3 to 10 percent of our health care dollars go down the tube to crooks, to con men, and we are not doing anything about this. There is money in the system, and it is just going to the wrong places.

Another way to solve this is with trying to put more quality measures into our system, trying to have high quality care at the lowest cost. People understand if you go to a hotel and you spend more money on a room, you tend to get a better room, a bigger room, with a nicer view. With health care, it is not the case. With health care, some of the highest cost places have the lowest quality care. So one of the things that health reform allows us to do is to put in those high-quality measures.

So we start having incentives. We say to hospitals: If you have less infections in your hospital, which means more people live, you will be treated better in the system. So we will put in incentives so that doctors treat their patients better and, believe it or not, that is the way we are going to save money.

Why is that? So many times the way the system operates, it is about reimbursing for every little test, every little thing you do, instead of looking at the rules or looking at the quality of care that you can get at the end of the road. And that is what we want to do with this legislation. There is a value index in this legislation.

The bill that came out of the Finance Committee, which Senator CANTWELL and I have worked hard on, let's us look at the value to the patient. Let's put patients in the driver's seat so they can get the value, so middle-class families can get the same kind of health care that Members of Congress get, so they can get the kind of value they want out of their health care.

So when we look at how we can pay for this, there are so many ways. We can not only save some money, such as plug that doughnut hole so that seniors can get better deals on their prescription drugs, but we can do it so we can give people higher quality care. We are going to link rewards to outcomes to create the incentives for doctors and hospitals to work together to improve quality and efficiency. That is what we are trying to do.

So I thank Senator CARDIN for bringing up this issue of cost because for so many middle-class families in my State, they understand we want to have not only more affordable care but also high-quality care. They do not like these kinds of mistakes that go on, and there are some things we can do by creating incentives for safer procedures and for better standards for hospitals and for doctors that I think could go a long way toward paying for a lot of what we need to do.

Mr. CARDIN. I thank my colleague from Minnesota. She has been a real fighter for middle-income families and working families in America and in Minnesota and has brought out these issues of how we can improve the standard of living.

I think the point the Senator raises is one that needs to be underscored. Today, working families, middle-income families are seeing an erosion of their income. They are seeing more and more of their compensation going to pay for health benefits. If their employers are paying for it, it means less take-home money for them in their paychecks. If they have to pay the cost, they are seeing more and more of an increase. Again, health care costs are going up three times what wages are going up in America. So middle-income families are falling behind every year, and they are depending on us to speak up for them.

They are also paying a hidden tax—a hidden tax. Middle-income families today are spending \$1,100 a year paying for those who don't have health insurance. We talked about that earlier. That is a hidden tax. We have to get rid of that tax.

One of the things we do in our health insurance reform is to get rid of that tax by saying that everyone has to be responsible for their own health care costs. Why should I pay for someone who today could have health insurance but chooses not to have health insurance?

Ms. KLOBUCHAR. If the Senator will yield, I think it is unfair to middle-class families who are trying to save every penny so they can send their kids to college—and those costs are going up—and to put food on the table and fill their car with gas, to have this hidden tax where they are paying for people who aren't getting health insurance or can't afford health insurance. That is why I think one of the most important things for people to understand about this bill is that we are already paying for these people who don't have

health insurance. So let's make it more efficient and work for everyone so you can get some benefit out of this yourself.

Mr. CARDIN. It is interesting that one of the ways we can save money from the Medicare system is to get everybody to pay their health care bills. Our seniors are paying higher costs under the Medicare system because people use the system who are not Medicare beneficiaries and don't pay for it. So Medicare, every year, pays a premium to our hospitals called DIS—the disproportionate share—for the uncompensated care in the hospitals. The Medicare system is paying for that. Our seniors could be getting better benefits if everyone paid their own way rather than having our seniors subsidize those who have no health insurance.

So these are ways in which we do help middle-income families in America.

Ms. KLOBUCHAR. I was just with a group of seniors this past weekend in Richfield, MN, and they are worried because they hear about these numbers—that by 2017, if we don't do something, Medicare will go in the red. Those seniors are living longer and longer lives, which is a great thing. Hopefully, my mom is watching right now; she is 82 years old. But those who are 65 want to have Medicare when they are 95 years old, and those who are 65 want to make sure Medicare is there for them when they are 90 years old. That is why it is so important to look at this reform and make sure this is working for the seniors.

The doughnut hole, I am so tired of worrying about that problem. These seniors have their health care coverage for their drugs, and then it vanishes and goes down the doughnut hole. One of the great things I like about this health care reform is that it will help them pay for the doughnut hole. I think 50 percent of those costs they will not have to worry about anymore.

Mr. CARDIN. Not only will we be able to help them with the doughnut hole on prescription drugs, we will be able to provide them better health care services with lower copayments and deductibility, and we are providing a stronger system.

Look, I think we all have a common interest. If you are a family that currently has health insurance, if you are a small business owner who is covering your employees, if you are covered under the Medicare system today, you all have an interest in making sure we pass the health insurance reform that is being debated now in the Congress.

For those who have insurance, it will make your coverage more affordable in the future. It will eliminate this hidden tax, and it will enact significant health insurance reforms to protect you against the arbitrary practices of private insurance companies.

If you are a small business owner, it will give you more competition, more reliable premiums without being increased radically on a yearly basis. It

will provide competition so that you can get the same benefits a large company can get with larger pools.

If you are in the Medicare system, it takes some of the cost out of Medicare that you are currently subsidizing for people who are uninsured. It firms up our health care system, which is good for Medicare in the future as far as keeping it safe and sound, and it allows us to expand benefits, such as the prescription drug benefit, and get rid of that doughnut hole.

So we are all in this together. But the only option that we cannot afford to have is the status quo. The letters we have read on the Senate floor from people who are literally being forced out of their current coverage, who are being discriminated against by insurance companies because of preexisting conditions that don't even exist, they are depending upon us to act.

I see the assistant majority leader is here, and I mention that because Senator DURBIN has been one of the real leaders in taking on some of the tough interests in our country—taking on the tobacco companies and dealing with tobacco and children, taking on prescription drugs to make sure we have affordable drugs in America. So I thank him for his leadership because I know he has been one of the real leaders on this issue in the Senate.

I know all of us will do everything we can to help middle-income families. We have worked hard to strengthen Medicare over the years, fought the efforts by those who wanted to privatize Medicare, who wanted to weaken Medicare, and we are committed to making sure that these programs are strengthened, are continued, and that is why we are so passionate about the need for us to take up health insurance reform, for us to make sure we protect middle-income families.

Mr. DURBIN. If the Senator will yield for a question?

Mr. CARDIN. I am glad to yield.

Mr. DURBIN. I thank the Senator from Minnesota, Ms. KLOBUCHAR, and Senator CARDIN from Maryland for their leadership coming to the floor. I have been following the floor all day.

I heard from the other side of the aisle a litany of complaints that they have about health care reform. Leading off in the complaints about health care reform is the number of pages in the bill. The fact is, there is no Senate bill; it is in preparation at this moment. But the Republican side of the aisle, starting with Senator MCCONNELL, the leader, through other Senators, continues to come to the floor and bemoan the fact that this bill may actually reach 2,000 pages in length. I don't know that it will. I don't know that it will not. I don't know that it makes any difference. I don't think people back home really care if this is a short bill or a long bill as long as it is a good bill, as long as it does what needs to be done.

When you get down to the issues we are talking about, we want to make

sure the language is precise. If we are going to fight the health insurance companies—and believe me, they are spending a fortune trying to stop us. But if we are going to fight the health insurance companies to make sure people have a fighting chance when they have a health insurance plan not to be canceled when they have a preexisting condition, so they have a health insurance plan that is there when they need it when they get sick, a health insurance plan that has enough money in it to pay for what they need, pay for preventive care, then let's take the time and write the pages that are necessary. Trust me, the attorneys for the insurance companies will be fighting us in court every step of the way as we try to make these changes.

I was listening to the Senator from Maryland and the Senator from Minnesota. I recall a story I learned when I went home about a good friend of mine whose son has been battling cancer for years. He is a bright young man who developed a melanoma and has gone through extensive radiation and chemotherapy and also surgeries. It has been a valiant effort on his part. Two years ago, his oncologist found a drug that made a difference for him. He was cancer free. He was as happy as he has been for a long time because of this drug.

I think you know how this story is going to end. Just 2 months ago, his health insurance company notified him that they would no longer pay for this drug that he needed. His oncologist sent a letter to the insurance company and said: This drug I am using off-label is working for him. It has arrested the spread of his cancer, saved his life, and you need to continue it.

The insurance company said: No, we will no longer pay for this.

The drug costs \$13,000 a month. There is no way this young man and his young family can pay for this. Even if his dad, mom, and all the relatives mortgage their homes, they just can't pay for it.

It shows you how average people who pay premiums all their lives are at the mercy of an insurance company executive or, worse, an insurance company clerk who decides to just say no. That happens every single day.

I have been waiting for the first person on the Republican side of the aisle to stand up and say: We may disagree on a lot of things, but we sure do agree we have to do something about health insurance reform. The way they are treating Americans is unacceptable. But we never hear that from that side of the aisle.

I hope at the end of the day we will be able to come together in a bipartisan way. We all want to. But there may come a point where we cannot. If standing up to the health insurance companies can only be done on this side of the aisle, so be it. Let's gather the votes, and let's do it. But at the end of the day for that family and many in Maryland and Minnesota, that

is going to be the test of whether health care reform works. Will the costs start coming down? Will you have a fighting chance with the health insurance company when you really need protection? Will it pay for things that mean something to you, such as maintaining a person on diabetes prevention and wellness? Will it start bringing more people into the protection of health insurance so, as Senator CARDIN said, we all are not paying for those who show up as charity cases at the hospital? Those are the bottom-line questions.

I thank the Senator for raising this because I think this goes to the heart of this health care debate.

Mr. CARDIN. A little earlier, I read into the record several letters I received from Marylanders. That was a sampling. I received a lot more. But it just points out—a letter from a Marylander who was denied full coverage, not only for himself but his two children, for preexisting conditions that didn't even exist, frankly—they didn't exist—but the insurance company was in a position where they could write a policy the way they wanted to write it, and this person in Maryland had no choice. There was no other insurance company that person could get. There was no competition there. We need to do something about that. We need to make it clear. I agree with the Senator, if it takes 10 pages or 100 pages or 1,000 pages, we have to make it clear that insurance companies cannot do those types of practices against people in this Nation. They cannot underwrite based upon preexisting conditions.

It seems as though insurance companies want to write insurance policies where no one can make claims. We buy insurance to protect us. Insurance needs to be there. That is one of the reasons we eliminate caps. Insurance should be there to give you the coverage when you need it. If that family needs that medicine to keep that child alive, that is why you have insurance. Insurance should cover that. If it takes 1,000 pages, let's make sure we get it right to protect the people in this Nation.

Ms. KLOBUCHAR. If the Senator will yield, I was thinking, as the Senator from Illinois was talking about the number of pages in bills, when we were in the middle of this country's worst economic crisis since the Depression under the Bush administration and people were trying to figure out what to do, if you remember, the administration came forward with a bill that gave nearly \$1 trillion out to banks, and it was something like 25 pages long, if I remember. I think the people in this country said: Hey, wait a minute, this is a major issue; 25 pages or 10 pages or 3 pages or 100 pages is not enough.

We are dealing with an incredibly complicated issue—with insurance companies that have been running this show for so long. The fact that we are going to spend some time on this bill, as the Senator from Illinois has pointed out—and the Senate bill is not even

done yet. We are still working on this, we are still bringing through these consumer reforms and that which is going to be good for the people of America.

I really am a little tired of hearing about the number of pages. As I said, I think there are 3 numbers that matter here: 6, 12 and 24. Mr. President, \$6,000 is what an average family paid 10 years ago—\$6,000. Now an average family pays \$12,000. What are you going to pay 10 years from now? What are you going to pay if nothing is done here—just keep going the way we are going, with the cost, the waste in the system, the Medicare fraud, and all these things that should not be going on? Mr. President, \$24,000 is what the average family is going to pay. We need to start bringing those costs down, and the only way we take on these companies that have been putting in place these rules that say if a baby is 4 months old and happened to weigh 17 pounds, just a little underweight, you can't get insurance, and his family's insurance company—the only way we are going to help by taking them on, and I don't care how many pages it takes.

Mr. CARDIN. I thank my colleagues, Senator KLOBUCHAR from Minnesota, Senator KAUFMAN from Delaware, and Senator DURBIN from Illinois, for their comments and for their passion on this issue. This is an issue we have to get right for middle-income families in America. They are the ones hurting. They are the ones who cannot afford this current system. They are the ones falling further and further behind every year. These are the ones—subject to the discriminatory practices of private insurance companies—we have a responsibility to protect. These are the ones paying the hidden tax for people who do not have health insurance, many of whom can afford health insurance but choose not to get it. It is our responsibility to act on behalf of middle-income families in America to make sure we have the health care system that is affordable and is available to every person in this country.

What we are doing is to bring down the cost of health care, to make sure we have affordable care for every person, every American, and do it in a fiscally responsible way. I urge my colleagues to make sure we take advantage of this opportunity. Let's make sure we get health care reform done, and done as soon as possible.

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

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Ms. KLOBUCHAR. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

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

Ms. KLOBUCHAR. Mr. President, I rise today to talk about extended unemployment benefits. I just received a call this afternoon from one of my State legislators in Minnesota who rep-

resents the Iron Range of Minnesota where my grandpa grew up and worked 1,500 feet underground in the mines in Ely, MN, never graduated from college, and saved money in a coffee can in the basement of his and my grandma's house to send my dad to college, and my dad and brother also worked in the mines.

It is tough times up in Ely, MN. Things go up and down, up and down in the iron ore business. Right now, they are in a downtime. There are some glimmers of hope out there. Some of the mines have started up again, but there is high unemployment up there, high unemployment in the double digits. That is why this is so important, as America has been trying to really pick itself up and get moving again after this economic crisis.

Someone once said that when Wall Street gets a cold, Main Street gets pneumonia. That is what we are still seeing across this country despite the glimmers of hope we see with the GDP, the good numbers there and some of the other good numbers with house sales going up. There are some positives going on in this country, there is no doubt about that. But there are still so many people looking for jobs. I think for every job out there, there are six unemployed people trying to find that job. I have gotten letters from people saying they have applied for hundreds of jobs, sent in their resumes.

That is why it is so important, while Wall Street is starting to do well again, to make sure we are protecting the people in this country who need their unemployment. In the past 125 days alone, over 185,000 Americans lost their unemployment benefits. Each passing day without an extension, more and more Americans are losing the last lifeline they have to keep their heads above water in this difficult economy.

One of the things I really like about the Senate bill—I see the Senator from Illinois is back. I thank him for his leadership, and Senator REID and Senator SHAHEEN and others who have worked on this issue. The Senate bill doesn't say: OK, only certain States are going to be able to get this extension of unemployment benefits. The Senate bill says what the people of my State say: The unemployment rate in Minnesota might be 7.3 percent right now, but in my house it is 100 percent, and I have been trying to find work over and over again.

I don't know what I would have said to the people of my State if I had to come home and say to them: Look, the people of Wisconsin are going to get their unemployment benefits extended, right across the border there, but the people of Minnesota are not.

We were glad to get Brett Favre from Wisconsin. That was a nice pickup. But it doesn't mean they get unemployment benefits and we don't. That is not a fair trade. So we are very glad the Senate bill takes care of States such as

Minnesota and so many other States such as Montana and others across this country.

I urge the Senate to pass this as quickly as possible in the name of all the people in my State and others who have been looking for work.

I will end with a letter I got from a woman named Barbara, from Mahtomedi, MN. She wrote:

My husband has been looking for a job since March and without unemployment to help us out I don't know what will happen. All of us [our kids] have been looking for steady employment for months. We drive old cars, we bought a house within our means that we have been fixing up slowly for ourselves for the past 22 years. We buy everything used or on sale. Please don't let [the people of our State] get left out in the cold [because it is starting to get cold and we need the unemployment until we find a job.]

I thank you for allowing me a few minutes to talk about this important bill pending before the Senate, and I urge the Senate to quickly adopt our unemployment bill.

I yield the floor.

The PRESIDING OFFICER. The Senator from Illinois is recognized.

Mr. DURBIN. I thank the Senator from Minnesota because the story she tells are stories that are told in every State. How will we ever explain to people who are struggling from day to day to feed their families while they look for a job why it took us 26, 27, 28 days to extend unemployment benefits in the Senate? Because, on the other side of the aisle there was objection because Senators had ideas of amendments they wanted to offer.

Well, there are plenty of bills for ideas. This was a bill that was providing necessities of life for a lot of people even in their own States. I am glad that it appears we are finally going to move to it tomorrow, 4 weeks after we started the extension of unemployment benefits.

I do not understand how you can be for family values and not stand up for these families when they are facing the toughest challenges in life.

I thank the Senator from Minnesota for her comments.

I ask unanimous consent that on Wednesday, November 4, following a period of morning business, the Senate resume consideration of H.R. 3548, and all postcloture time be considered expired, all amendments to the substitute and bill be withdrawn, no further amendments be in order, and the substitute amendment be agreed to, and the motion to reconsider be laid upon the table; that the Senate then have general debate until 12:15 p.m., with the time equally controlled between the leaders or their designees, the Senate proceed to vote on the motion to invoke cloture on H.R. 3548; and that if cloture is invoked, the postcloture time be considered to have begun running as if cloture had been invoked at 11:45 p.m., Tuesday, November 3.

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

MORNING BUSINESS

Mr. DURBIN. I ask unanimous consent that the Senate proceed to a period of morning business with Senators permitted to speak therein for up to 10 minutes each.

The PRESIDING OFFICER (Mr. UDALL of Colorado.) Without objection, it is so ordered.

REMEMBERING CHARLIE FRIAS

Mr. REID. Mr. President, I rise today to honor Charlie Frias for his positive work in Nevada. For almost five decades Charlie and his wife Phyllis have worked to make Nevada a better place. Whether through their business endeavors or their philanthropy, the Friases have sought to improve their community and make life a little easier for their fellow Nevadans.

Charlie Frias was born in San Antonio, TX, in 1922. As a young man, he worked with his father and grandmother as a delivery boy in the family business. He graduated from Breckenridge High School and then joined the Navy. After being honorably discharged, he returned to San Antonio, TX, and married his wife Phyllis. In 1958, the couple moved to Las Vegas, NV, with little if any resources.

Upon arriving in Las Vegas, Charlie took a job as a taxicab driver with ABC Union Cab Company. He worked diligently for this company that he would come to own by 1962. Charlie quickly acquired three more cab companies and opened the first taxicab service in Mesquite, NV, the Virgin Valley Cab Company. He later went on to further expand into the limousine business by adding Airline Limousine and Las Vegas Limousine to his holdings. At the time of his passing in 2006, Charlie had enjoyed over 40 years of success in the transportation field as well as other business activities.

Mr. Frias's wife, Phyllis, has not played the role of spectator over the years. A constant partner in her husband's entrepreneurial efforts, Phyllis has recently displayed her own business talents through the completion of A Cowboy's Dream Bed and Breakfast in Alamo, NV. I have no doubt that Phyllis' luxury resort will help stimulate Nevada's economy during our period of recovery.

Over the years Charlie and Phyllis did not consign themselves to a profit-driven life. Rather, they have shown a humanitarian spirit and have displayed this by giving back to the people of Clark County and all Nevada. Mr. and Mrs. Frias have sent school bands to participate in events in Washington, DC, purchased buses for Virgin Valley High School, and provided apparel for local high school athletics. One of Charles and Phyllis Frias' greatest beliefs is for every child to have the opportunity to obtain a quality education. Over the years, the Friases established scholarships and funded other programs for students in the education

system, subsequently making it possible for many children to attend college. They established the Phyllis Frias Environmental Studies Scholarship at the University of Nevada, Las Vegas. They have not limited their generosity to education, but have also donated to other cultural and community organizations such as the Mesquite Arts Council, Spring Valley Little League, American Lung Association, Las Vegas Rescue Mission, the Clark County Firefighters Christmas Fund, and many others.

The valiant Mother Teresa once said, "Let us not be satisfied with just giving money. Money is not enough, money can be got, but they need your hearts to love them. So, spread your love everywhere you go." It is safe to say that Charlie and Phyllis Frias have displayed this ideal through their actions. They have devoted their time, energy, love and resources to helping Nevada's kids get a quality education and a better life. For me Charlie Frias stands for the independent spirit of Las Vegas and the west. He is in my Hall of Fame.

I know that A Cowboy's Dream Bed and Breakfast will have a future as bright as the neon Vegas Vic cowboy sign. I salute the Friases for their service to the people of our great State and I wish Phyllis the very best now that Charlie is gone.

HONORING OUR ARMED FORCES

SERGEANT DALE R. GRIFFIN

Mr. BAYH. Mr. President, I rise today with a heavy heart to honor the life of SGT Dale Russel Griffin from Terre Haute, IN. Dale was 29 years old when he lost his life on October 27, from injuries sustained during a roadside bomb attack in Arghandab Valley, Afghanistan. He was a member of the 1st Battalion, 17th Infantry Regiment, 2nd Infantry Division, Fort Lewis WA. Dale was serving as part of operation Enduring Freedom.

Today, I join Dale's family and friends in mourning his death. Dale will forever be remembered as a loving son, and friend to many. Dale is survived by his parents, Dona and Gene, and a host of other friends and relatives.

Prior to entering the service, Dale graduated from Terre Haute South Vigo High School in 1999 where he was an accomplished wrestler gaining All-State recognition. He would later lead the Virginia Military Institute to a fourth place finish in the All-Academy Wrestling Championships in 2000, in which he was named the Tournament's Outstanding Wrestler.

While we struggle to express our sorrow over this loss, we can take pride in the example Dale set as both a soldier and son. Today and always, he will be remembered by family, friends and fellow Hoosiers as a true American hero, and we cherish the legacy of his service and his life.

As I search for words to do justice to this valiant fallen soldier, I recall

President Abraham Lincoln's words as he addressed the families of soldiers who died at Gettysburg: "We cannot dedicate, we cannot consecrate, we cannot hallow this ground. The brave men, living and dead, who struggled here, have consecrated it, far above our poor power to add or detract. The world will little note nor long remember what we say here, but it can never forget what they did here." This statement is just as true today as it was nearly 150 years ago, as we can take some measure of solace in knowing that Dale's heroism and memory will outlive the record of the words here spoken.

It is my sad duty to enter the name of Dale R. Griffin in the official record of the U.S. Senate for his service to this country and for his profound commitment to freedom, democracy and peace. I pray that Dale's family can find comfort in the words of the prophet Isaiah who said, "He will swallow up death in victory; and the Lord God will wipe away tears from off all faces."

May God grant strength and peace to those who mourn, and may God be with all of you, as I know He is with Dale.

TRIBUTE TO JAY FETCHER

Mr. UDALL of Colorado. Mr. President, I want to take this opportunity to recognize a true champion of land protection who also happens to be a member of my staff, Mr. Jay Fetcher.

Jay, who owns a ranch near Steamboat Spring, CO, and who is my northwestern Colorado field director, has been selected by a land preservation group called Colorado Open Lands as the recipient of their 2009 George E. Cramner Award. Every year since 1992, Colorado Open Lands has bestowed this award on someone who has distinguished themselves in open space preservation. According to Colorado Open Lands, recipients of this award are individuals who have gone above and beyond what others have done to preserve and protect open spaces and often achieve these goals through determination and passion for the land. They leave behind a legacy that will be valued and enjoyed for generations. Jay is just such a person, and he is indeed deserving of this prestigious award.

As highlighted in the Colorado Open Lands newsletter announcing this award, Jay's ties to Colorado agriculture and conservation run deep. He grew up on the family ranch, and after receiving a degree in Animal Science from the University of Wyoming, he returned to his family's ranch to take over the operation. In 1980, he received a master's degree in genetics from Colorado State University.

In 1994, the Fetchers decided that they wanted their land near Steamboat Springs to be a ranch forever and to be able to pass it on to their children. After creating their ranch's conservation easement, Jay went to the board of the Colorado Cattlemen's Association and suggested it start a land trust.

The Cattlemen's Association voted to become the first mainstream agricultural organization in the Nation to form a land trust, which was officially incorporated in 1995 as the Colorado Cattlemen's Agricultural Land Trust.

Jay worked diligently for land preservation as a founding member and past president of the Colorado Cattlemen's Agricultural Land Trust. Jay's community service record is also impressive, and includes serving on the boards of the Colorado Water Trust, the Colorado Environmental Coalition, the Steamboat Springs School District and Education Fund, the North Routt Fire Protection District, the Yampa Valley Medical Center, and as a founding member of the Community Agriculture Alliance.

He served on the Governor's Agriculture Land Conversion task force in 1995 and is a member of the Routt County Cattlemen and the Colorado Cattlemen's Association. He also served as a regional representative in northwest Colorado for Senator Ken Salazar.

In 1997, Jay received the American Land Conservation Award, which recognizes outstanding volunteer leadership in land and water conservation. In April 2009, he received the William Funk Award for the Nonprofit Association of Colorado, which honors acknowledged leaders who can unify people and organizations around a common cause.

Over the years, Jay's insight and hard work for the land trust movement and conservation have proven invaluable. Jay has become a trusted resource for those considering conservation easements.

That experience—and his deep roots in the community and his dedication to service—lead Jay to twice run for a seat in the Colorado State Legislature. Jay applied the same work ethic—and integrity—to these races as he does to his land preservation work. These were very close races, and his loss has been our gain.

In March of this year, I asked Jay to join my office as field director for the issues and concerns of northwestern Colorado. I had no hesitation offering him the position, as he is a well-known and well-respected community member of this region of Colorado. He had performed similar great service to a former Senator from Colorado—and now Secretary of the Interior, Ken Salazar. He has been doing an exemplary job working with the communities and citizens in this area on issues regarding water, land, agriculture, outdoor recreation, rural health care and services, and federal public land management. Jay is an expert in all of these areas and has already proven himself as a valued member of my team.

Jay's dedication to the land and the need to keep it productive and preserved was recently highlighted in a book from Colorado's preeminent landscape photographer, John Fielder. The

book, called *Ranches of Colorado*, features glorious photographs of many Colorado ranches, including the Fletcher ranch. In the text of the section describing the Fletcher Ranch, former Denver Post reporter and author James Meadow had this to say about Jay when describing the Fletcher ranch family history:

[Jay] fell in love with the land and the cattle and stayed to learn their ways; remaining on the ranch year after year, until the years became decades, and the decades tumbled past a half-century, and there is still no end in sight to [Jay's] love of the land. You can see that love in his eyes [and] you can hear it in his voice. It is a soft voice, a voice that cites Mother Teresa and the intricacies of cattle genetics with the same kind of curiously easygoing gravitas.

This is a short but apt description of Jay—his story and passion for the land he has worked and loved.

I appreciate that Colorado Open Lands has also recognized Jay's great work and am pleased that they are honoring him with this prestigious award. My staff and I want to express our congratulations to Jay for all his great work. We will continue to expect many more great accomplishments from him in the years to come.

ADDITIONAL STATEMENTS

TRIBUTE TO GEORGE CANNELOS

• Mr. BEGICH. Mr. President, I rise today to recognize the leadership George Canellos demonstrated during his 4 years of public service as Federal Cochair of the Denali Commission. From 2005 to 2009, George effectively used his extensive experience in rural Alaska to improve the delivery of affordable, reliable, and sustainable infrastructure to scores of Alaska communities.

With his guidance, the partnership between the Denali Commission and the State of Alaska grew in significant ways and has become the cornerstone of the Commission's success and progress. His advancement of collaborative efforts helped find innovative solutions with a promptness for carrying out the Denali Commission's mission.

In his first year as Cochair, a transportation advisory committee was created, composed of rural Alaska leaders with broad experience. Its successful implementation made it a useful model for committees to come. In 2007, the Commission opened its first rural office, taking a new approach with a remote site workforce.

George has led the Commission with passion and dedication to using innovative strategies in rural Alaska. For 2 years in a row, the Denali Commission was recognized by the National Association of Development Organization for innovative program work.

His contributions have moved the Commission forward, leaving a positive outlook for upcoming years. His efforts will continue to do good work and play a critical role in the quality of life and

economic development of Alaska's most remote communities.

Mr. President and colleagues, please join me in recognition of his outstanding accomplishments and important work in improving the quality of life, infrastructure, housing, access to health care, and economic opportunity in rural Alaska. We thank him for his service and wish him luck as he begins the next chapter of his life.●

RECOGNIZING GOVERNORS STATE UNIVERSITY

• Mr. BURRIS. Mr. President, 40 years ago, just a few miles south of Chicago, a brand new public university first opened its doors to an incoming class of students. The school was designed to reflect the core values of higher education, but in an innovative, nontraditional way. To bring exceptional undergraduate and graduate-level academics to a diverse student body, and to extend the benefits of a quality education beyond the walls of the college classroom.

This week, as Governors State University observes its 40th anniversary, I am pleased to join the students, alumni, administration, and faculty in celebrating the continued success of their fine public institution.

Since its inception, the Governors State community has grown and developed into an educational and cultural center of Illinois. And even as the university looks back with pride on the last 40 years, they recognize that the best way to celebrate their past is by looking to the future.

I would like to commend Governors State University for its indelible contributions to the quality of higher education in Illinois, and its continuing leadership in this field. Their evolving vision continues to inspire thousands to enroll every year. Their commitment to excellence has touched the lives of generations of students.

And with the recent creation of a doctoral program in physical therapy, Governors State continues to expand its reach and broaden its horizons.

I am proud to join Governors State University in celebrating its first 40 years as a bastion of the Illinois educational community. And I have no doubt that as we look ahead to the next 40 years, this fine institution will continue to lead the way.●

REMEMBERING SILVIANO ROMERO

• Mr. UDALL of New Mexico. Mr. President, it is with great sorrow that today I pay tribute to one of the finest men Northern New Mexico has ever known, Silviano Romero, or "Silver," as he was known to all who knew and loved him.

On Sunday, October 25, 2009, Silver passed away, 1 month shy of his 90th birthday, in the small Northern New Mexico town of Embudo where he was born on November 27, 1919. But for his service to our Nation in the Pacific

Theater and Phillipines during World War II, Embudo is where Silver lived his entire life with his extraordinary and beautiful wife and best friend of 67 years, Mary B. Romero, of Dixon. Together, after Silver returned from military service, they built the house in Embudo on County Road 0062 where their three sons, Alfonso, David, and Richard, grew up and where Silver lived and worked until his passing last week.

Silver was a pillar of his community. He was a man dedicated to others—to his family, his community, his country, and his God. Like so many others of his noble generation, he served his country in the military and continued to serve his community upon his return home. Not only did Silver work for Los Alamos County, the Española School District, and as the Rio Arriba County clerk, but he was also actively involved as a county school board member, a Jemez co-op board member, a member of the East Rio Arriba Soil and Water Conservation District, and a lifelong active member of the Rio Arriba Democratic Party.

Yes, Silver was a pillar of the extended Embudo community, and he was something of an institution in Rio Arriba County. But it was on County Road 0062, at La Junta, and the confluence of the Rio Embudo and Rio Grande, that one could see and feel Silver's love for the people and world around him. The cats, dogs, and horses who came under Silver's care knew full well the enormity of Silver's heart. And one need look no further than see the joy on Silver's face as he drove his four-wheeler down the road to inspect what may or may not be a rattlesnake, wind whipping through his appropriately silver-colored hair, to understand his appreciation and love for life.

That Silver lived at the confluence of the little-known Rio Embudo and the Rio Grande, one of the largest rivers in the United States, is appropriate. The Rio Grande stretches almost 2,000 miles, providing water and sustenance to parts of this country where no one has heard of the little Rio Embudo. Yet without it, and other tributaries along the way, the Rio Grande would likely not be the force it is.

So, too, does a life like Silver's contribute to the world around him. Those of us who knew him and knew of his commitment to his community understand the contributions he made and the ways in which it improved the lives of many beyond Embudo, Rio Arriba County, and even New Mexico. But a life lived as Silver lived his touches even those who never had the honor and pleasure of knowing him. Quite simply, the world was a much better, kinder place with Silver in it.

While we are profoundly saddened by the passing of this humble yet extraordinary man, we can take great solace in the fact that he is survived by many deeply touched by him: his wife Mary; his brothers, Tom and Uvaldo Romero; his sister, Julia Montoya; his sons, Al-

fonso, David, and Richard; his grandchildren, Ann Williams, Amy Shelly, Dee Romero, David Romero, Jason Romero, Ryan Romero, Richard Romero, Jr., and Marquita Romero; his great-grandchildren, Taylor, Tyrell, Ashton, Saren, Katherine, Emma, Isla, Noah Silviano, Juan Diego, and Mark.

The spirit of Silviano "Silver" Romero lives on in all of them and will forever live in the Dixon and Embudo Valley, Rio Arriba County, and in all of the great State of New Mexico.●

MESSAGES FROM THE PRESIDENT

Messages from the President of the United States were communicated to the Senate by Mr. Williams, one of his secretaries.

EXECUTIVE MESSAGES REFERRED

As in executive session the Presiding Officer laid before the Senate messages from the President of the United States submitting sundry nominations which were referred to the appropriate committees.

(The nominations received today are printed at the end of the Senate proceedings.)

MESSAGES FROM THE HOUSE

At 11:36 a.m., a message from the House of Representatives, delivered by Mrs. Cole, one of its reading clerks, announced that the House has passed the following bills, in which it requests the concurrence of the Senate:

H.R. 174. An act to direct the Secretary of Veterans Affairs to establish a national cemetery for veterans in the southern Colorado region.

H.R. 1168. An act to amend chapter 42 of title 38, United States Code, to provide certain veterans with employment training assistance.

The message also announced that the House has passed the following bill, without amendment:

S. 509. An act to authorize a major medical facility project at the Department of Veterans Affairs Medical Center, Walla Walla, Washington, and for other purposes.

ENROLLED BILLS SIGNED

At 6:05 p.m., a message from the House of Representatives, delivered by Mrs. Cole, one of its reading clerks, announced that the Speaker has signed the following enrolled bills:

S. 475. An act to amend the Servicemembers Civil Relief Act to guarantee the equity of spouses of military personnel with regard to matters of residency, and for other purposes.

S. 509. An act to authorize a major medical facility project at the Department of Veterans Affairs Medical Center, Walla Walla, Washington, and for other purposes.

MEASURES REFERRED

The following bills were read the first and the second times by unanimous consent, and referred as indicated:

H.R. 174. An act to direct the Secretary of Veterans Affairs to establish a national cem-

etry for veterans in the southern Colorado region; to the Committee on Veterans' Affairs.

H.R. 1168. An act to amend chapter 42 of title 38, United States Code, to provide certain veterans with employment training assistance; to the Committee on Veterans' Affairs.

EXECUTIVE AND OTHER COMMUNICATIONS

The following communications were laid before the Senate, together with accompanying papers, reports, and documents, and were referred as indicated:

EC-3533. A communication from the Congressional Review Coordinator, Animal and Plant Health Inspection Service, Department of Agriculture, transmitting, pursuant to law, the report of a rule entitled "Importation of Tomatoes From Souss-Massa-Draa, Morocco" (Docket No. APHIS-2008-0017) received in the Office of the President of the Senate on November 2, 2009; to the Committee on Agriculture, Nutrition, and Forestry.

EC-3534. A communication from the Administrator, Fruit and Vegetable Programs, Department of Agriculture, transmitting, pursuant to law, the report of a rule entitled "Amendments to Mushroom Promotion, Research, and Consumer Information Order" (Docket No. AMS-FV-08-0047; FV-08-702-FR) received in the Office of the President of the Senate on November 2, 2009; to the Committee on Agriculture, Nutrition, and Forestry.

EC-3535. A communication from the Administrator, Fruit and Vegetable Programs, Department of Agriculture, transmitting, pursuant to law, the report of a rule entitled "Onions Grown in South Texas; Change in Regulatory Period" (Docket No. AMS-FV-9-0012; FV09-959-1 FIR) received in the Office of the President of the Senate on November 2, 2009; to the Committee on Agriculture, Nutrition, and Forestry.

EC-3536. A communication from the Administrator, Fruit and Vegetable Programs, Department of Agriculture, transmitting, pursuant to law, the report of a rule entitled "Oranges, Grapefruit, Tangerines and Tangelos Grown in Florida and Imported Grapefruit; Relaxation of Size Requirements for Grapefruit" (Docket No. AMS-FV-09-0002; FV09-905-1 FIR) received in the Office of the President of the Senate on November 2, 2009; to the Committee on Agriculture, Nutrition, and Forestry.

EC-3537. A communication from the Administrator, Fruit and Vegetable Programs, Department of Agriculture, transmitting, pursuant to law, the report of a rule entitled "Almonds Grown in California; Revision of Outgoing Quality Control Requirements" (Docket No. AMS-FV-08-0045; FV08-981-2 FIR) received in the Office of the President of the Senate on November 2, 2009; to the Committee on Agriculture, Nutrition, and Forestry.

EC-3538. A communication from the Administrator, Fruit and Vegetable Programs, Department of Agriculture, transmitting, pursuant to law, the report of a rule entitled "Cotton Research and Promotion Program: Referendum Procedures" (Docket No. AMS-CN-09-0027; CN-08-003) received in the Office of the President of the Senate on November 2, 2009; to the Committee on Agriculture, Nutrition, and Forestry.

EC-3539. A communication from the Administrator, Fruit and Vegetable Programs, Department of Agriculture, transmitting, pursuant to law, the report of a rule entitled "Pears Grown in Oregon and Washington; Increased Assessment Rate" (Docket No. AMS-

FV-09-0037; FV09-927-1 FR) received in the Office of the President of the Senate on November 2, 2009; to the Committee on Agriculture, Nutrition, and Forestry.

EC-3540. A communication from the Administrator, Fruit and Vegetable Programs, Department of Agriculture, transmitting, pursuant to law, the report of a rule entitled "Fresh Prunes Grown in Designated Counties in Washington and in Umatilla County, OR; Increased Assessment Rate" (Docket No. AMS-FV-09-0040; FV09-924-1 FR) received in the Office of the President of the Senate on November 2, 2009; to the Committee on Agriculture, Nutrition, and Forestry.

EC-3541. A communication from the Administrator, Fruit and Vegetable Programs, Department of Agriculture, transmitting, pursuant to law, the report of a rule entitled "Nectarines and Peaches Grown in California: Decreased Assessment Rates" (Docket No. AMS-FV-09-0013; FV09-916/917-2 IFR) received in the Office of the President of the Senate on November 2, 2009; to the Committee on Agriculture, Nutrition, and Forestry.

EC-3542. A communication from the Under Secretary of Defense (Acquisition, Technology and Logistics), transmitting, pursuant to law, a report relative to the House Armed Services Committee Report 111-166, accompanying the National Defense Authorization Act for Fiscal Year 2010 (HR 2647); to the Committee on Armed Services.

EC-3543. A communication from the Chairman and President of the Export-Import Bank, transmitting, pursuant to law, a report relative to transactions involving U.S. exports to Spain; to the Committee on Banking, Housing, and Urban Affairs.

EC-3544. A communication from the Chairman and President of the Export-Import Bank, transmitting, pursuant to law, a report relative to transactions involving U.S. exports to Papua New Guinea; to the Committee on Banking, Housing, and Urban Affairs.

EC-3545. A communication from the Chairman and President of the Export-Import Bank, transmitting, pursuant to law, a report relative to transactions involving U.S. exports to the United Arab Emirates; to the Committee on Banking, Housing, and Urban Affairs.

EC-3546. A communication from the Chairman and President of the Export-Import Bank, transmitting, pursuant to law, a report relative to transactions involving U.S. exports to Chile; to the Committee on Banking, Housing, and Urban Affairs.

EC-3547. A communication from the Secretary of the Commission, Bureau of Consumer Protection, Federal Trade Commission, transmitting, pursuant to law, the report of a rule entitled "Fair Credit Reporting Affiliate Marketing Regulations; Identity Theft Red Flags and Address Discrepancies Under the Fair and Accurate Credit Transactions Act of 2003" (RIN3084-AA94) received in the Office of the President of the Senate on October 29, 2009; to the Committee on Banking, Housing, and Urban Affairs.

EC-3548. A communication from the Chief of the Trade and Commercial Regulations Branch, Customs and Border Protection, Department of Homeland Security, transmitting, pursuant to law, the report of a rule entitled "Foreign Repairs to American Vessels" (RIN1505-AB71) received in the Office of the President of the Senate on October 19, 2009; to the Committee on Finance.

EC-3549. A communication from the Office Manager, Centers for Medicare and Medicaid Services, Department of Health and Human Services, transmitting, pursuant to law, the report of a rule entitled "Medicare Program: Changes to the Hospital Outpatient Prospective Payment System and Calendar Year 2010

Payment Rates; Changes to the Ambulatory Surgical Center Payment System and Calendar Year 2010 Payment Rates" (RIN0938-AP41) received in the Office of the President of the Senate on November 2, 2009; to the Committee on Finance.

EC-3550. A communication from the Office Manager, Centers for Medicare and Medicaid Services, Department of Health and Human Services, transmitting, pursuant to law, the report of a rule entitled "Medicare Program: Payment Policies Under the Physician Fee Schedule and Other Revisions to Part B for Calendar Year 2010" (RIN0938-AP40) received in the Office of the President of the Senate on November 2, 2009; to the Committee on Finance.

EC-3551. A communication from the Office Manager, Centers for Medicare and Medicaid Services, Department of Health and Human Services, transmitting, pursuant to law, the report of a rule entitled "Medicare Program: Home Health Prospective Payment System Rate Update for Calendar Year 2010" (RIN0938-AP55) received in the Office of the President of the Senate on November 2, 2009; to the Committee on Finance.

EC-3552. A communication from the Assistant Legal Adviser for Treaty Affairs, Department of State, transmitting, pursuant to the Case-Zablocki Act, 1 U.S.C. 112b, as amended, the report of the texts and background statements of international agreements, other than treaties (List 2009-0126-2009-0161 and 2009-0179-2009-0197); to the Committee on Foreign Relations.

EC-3553. A communication from the Office Manager, Centers for Disease Control and Prevention, Department of Health and Human Services, transmitting, pursuant to law, the report of a rule entitled "Medical Examination of Aliens—Removal of Human Immunodeficiency Virus (HIV) Infection from Definition of Communicable Disease of Public Health Significance" (RIN0920-AA26) received in the Office of the President of the Senate on November 2, 2008; to the Committee on Health, Education, Labor, and Pensions.

EC-3554. A communication from the Chairman, Board of Governors of the Federal Reserve System, transmitting, pursuant to law, the Inspector General's Semiannual Report for the six-month period ending September 30, 2009; to the Committee on Homeland Security and Governmental Affairs.

EC-3555. A communication from the Secretary of Health and Human Services, transmitting, pursuant to law, a report entitled, "Report to Congress on the Social and Economic Conditions of Native Americans: Fiscal Years 2003 and 2004"; to the Committee on Indian Affairs.

EC-3556. A communication from the Deputy Assistant Administrator of Diversion Control, Drug Enforcement Administration, Department of Justice, transmitting, pursuant to law, the report of a rule entitled "Schedules of Controlled Substances: Placement of Fospropofol into Schedule IV" (Docket Number DEA-327F) received in the Office of the President of the Senate on November 2, 2009; to the Committee on the Judiciary.

study to determine the suitability and feasibility of adding the Heart Mountain Relocation Center, in the State of Wyoming, as a unit of the National Park System; to the Committee on Energy and Natural Resources.

By Mr. BROWNBACK (for himself and Mr. ROBERTS):

S. 2723. A bill to amend the Internal Revenue Code of 1986 to provide a special depreciation allowance and recovery period for noncommercial aircraft property; to the Committee on Finance.

By Mr. REID (for himself, Mrs. FEINSTEIN, Mr. ENSIGN, and Mrs. BOXER):

S. 2724. A bill to provide for environmental restoration activities and forest management activities in the Lake Tahoe Basin; to the Committee on Environment and Public Works.

By Mrs. FEINSTEIN (for herself, Mr. HATCH, Mr. LEAHY, and Mr. GRAHAM):

S. 2725. A bill to provide for fairness for the Federal judiciary; to the Committee on the Judiciary.

ADDITIONAL COSPONSORS

S. 146

At the request of Mr. FRANKEN, his name was added as a cosponsor of S. 146, a bill to amend the Federal anti-trust laws to provide expanded coverage and to eliminate exemptions from such laws that are contrary to the public interest with respect to railroads.

S. 535

At the request of Mr. NELSON of Florida, the name of the Senator from Missouri (Mrs. MCCASKILL) was added as a cosponsor of S. 535, a bill to amend title 10, United States Code, to repeal requirement for reduction of survivor annuities under the Survivor Benefit Plan by veterans' dependency and indemnity compensation, and for other purposes.

S. 796

At the request of Mr. BINGAMAN, the name of the Senator from Colorado (Mr. UDALL) was added as a cosponsor of S. 796, a bill to modify the requirements applicable to locatable minerals on public domain land, and for other purposes.

S. 797

At the request of Mr. DORGAN, the name of the Senator from Washington (Mrs. MURRAY) was added as a cosponsor of S. 797, a bill to amend the Indian Law Enforcement Reform Act, the Indian Tribal Justice Act, the Indian Tribal Justice Technical and Legal Assistance Act of 2000, and the Omnibus Crime Control and Safe Streets Act of 1968 to improve the prosecution of, and response to, crimes in Indian country, and for other purposes.

S. 1129

At the request of Mr. DURBIN, the name of the Senator from Minnesota (Mr. FRANKEN) was added as a cosponsor of S. 1129, a bill to authorize the Secretary of Education to award grants to local educational agencies to improve college enrollment.

S. 1158

At the request of Ms. STABENOW, the name of the Senator from New Jersey

INTRODUCTION OF BILLS AND JOINT RESOLUTIONS

The following bills and joint resolutions were introduced, read the first and second times by unanimous consent, and referred as indicated:

By Mr. BARRASSO (for himself and Mr. ENZI):

S. 2722. A bill to authorize the Secretary of the Interior to conduct a special resource

(Mr. MENENDEZ) was added as a cosponsor of S. 1158, a bill to authorize the Secretary of Health and Human Services to conduct activities to rapidly advance treatments for spinal muscular atrophy, neuromuscular disease, and other pediatric diseases, and for other purposes.

S. 1183

At the request of Mr. DURBIN, the name of the Senator from Ohio (Mr. BROWN) was added as a cosponsor of S. 1183, a bill to authorize the Secretary of Agriculture to provide assistance to the Government of Haiti to end within 5 years the deforestation in Haiti and restore within 30 years the extent of tropical forest cover in existence in Haiti in 1990, and for other purposes.

S. 1222

At the request of Mrs. LINCOLN, the name of the Senator from South Dakota (Mr. JOHNSON) was added as a cosponsor of S. 1222, a bill to amend the Internal Revenue Code of 1986 to extend and expand the benefits for businesses operating in empowerment zones, enterprise communities, or renewal communities, and for other purposes.

S. 1723

At the request of Mr. CORKER, the name of the Senator from Idaho (Mr. CRAPO) was added as a cosponsor of S. 1723, a bill to authorize the Secretary of the Treasury to delegate management authority over troubled assets purchased under the Troubled Asset Relief Program, to require the establishment of a trust to manage assets of certain designated TARP recipients, and for other purposes.

S. 1760

At the request of Mr. LAUTENBERG, the name of the Senator from Connecticut (Mr. DODD) was added as a cosponsor of S. 1760, a bill to amend the Public Health Service Act with regard to research on asthma, and for other purposes.

S. 1771

At the request of Mr. CASEY, the name of the Senator from Michigan (Ms. STABENOW) was added as a cosponsor of S. 1771, a bill to authorize the Secretary of Health and Human Services to establish a program of grants to newly accredited allopathic medical schools for the purpose of increasing the supply of physicians.

S. 1783

At the request of Mr. FRANKEN, the name of the Senator from Vermont (Mr. SANDERS) was added as a cosponsor of S. 1783, a bill to amend the Agricultural Marketing Act of 1946 to provide for country of origin labeling for dairy products.

S. 1789

At the request of Mr. DURBIN, the name of the Senator from Illinois (Mr. BURRIS) was added as a cosponsor of S. 1789, a bill to restore fairness to Federal cocaine sentencing.

S. 1790

At the request of Mr. DORGAN, the name of the Senator from Washington

(Mrs. MURRAY) was added as a cosponsor of S. 1790, a bill to amend the Indian Health Care Improvement Act to revise and extend that Act, and for other purposes.

S. 1803

At the request of Mr. MERKLEY, the name of the Senator from New Hampshire (Mrs. SHAHEEN) was added as a cosponsor of S. 1803, a bill to amend title 31, United States Code, to authorize reviews by the Comptroller General of the United States of emergency credit facilities established by the Board of Governors of the Federal Reserve System or any Federal Reserve bank, and for other purposes.

S. 1822

At the request of Mr. MERKLEY, the name of the Senator from Delaware (Mr. CARPER) was added as a cosponsor of S. 1822, a bill to amend the Emergency Economic Stabilization Act of 2008, with respect to considerations of the Secretary of the Treasury in providing assistance under that Act, and for other purposes.

S. 1833

At the request of Mr. UDALL of Colorado, the name of the Senator from Missouri (Mrs. MCCASKILL) was added as a cosponsor of S. 1833, a bill to amend the Credit Card Accountability Responsibility and Disclosure Act of 2009 to establish an earlier effective date for various consumer protections, and for other purposes.

S. 1857

At the request of Ms. STABENOW, the name of the Senator from Michigan (Mr. LEVIN) was added as a cosponsor of S. 1857, a bill to establish national centers of excellence for the treatment of depressive and bipolar disorders.

S. 1867

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1867, a bill to extend the temporary suspension of duty on phenyl isocyanate.

S. 1868

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1868, a bill to renew the temporary suspension of duty on hydroxylamine.

S. 1869

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1869, a bill to extend temporarily the suspension of duty on mixed xylinides.

S. 1870

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1870, a bill to extend the temporary suspension of duty on trichlorobenzene.

S. 1871

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a co-

sponsor of S. 1871, a bill to extend the temporary suspension of duty on methanol, sodium salt.

S. 1872

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1872, a bill to extend the temporary suspension of duty on 2-Phenylphenol.

S. 1873

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1873, a bill to extend the temporary suspension of duty on 2, 3-Dichloronitrobenzene.

S. 1875

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1875, a bill to extend the temporary suspension of duty on Orgasol.

S. 1876

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1876, a bill to suspend temporarily the duty on 11-Aminoundecanoic acid.

S. 1877

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1877, a bill to suspend temporarily the duty on dry adhesive copolyamide pellets.

S. 1878

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1878, a bill to extend and amend the temporary duty suspension on certain thin fiberglass sheets.

S. 1879

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1879, a bill to clarify the tariff classification of certain fiberboard core and laminate boards and panels, and for other purposes.

S. 1880

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1880, a bill to extend the temporary suspension of duty on Chlorotoluene.

S. 1881

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1881, a bill to extend the temporary suspension of duty on bayderm bottom DLV-N.

S. 1882

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1882, a bill to extend the temporary suspension of duty on certain ethylene-vinyl acetate copolymers.

S. 1883

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1883, a bill to extend and modify the temporary suspension of duty on iminodisuccinate.

S. 1884

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1884, a bill to suspend temporarily the duty on MDA50.

S. 1885

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1885, a bill to suspend temporarily the duty on certain air pressure distillation columns.

S. 1886

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1886, a bill to suspend temporarily the duty on Epilink 701.

S. 1887

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1887, a bill to suspend temporarily the duty on Nourybond 276 Modifier.

S. 1888

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1888, a bill to extend the temporary suspension of duty on 2-ethylhexyl 4-methoxycinamate.

S. 1889

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1889, a bill to extend the temporary suspension of duty on glass bulbs, designed for sprinkler systems and other release devices.

S. 1890

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1890, a bill to suspend temporarily the duty on manganese flake containing at least 99.5 percent by weight of manganese.

S. 1891

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1891, a bill to suspend temporarily the duty on standard grade ferroniobium.

S. 1892

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1892, a bill to suspend temporarily the duty on methyl sulfonic acid.

S. 1894

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1894, a bill to suspend temporarily the duty on N-Benzyl-N-ethylaniline.

S. 1895

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1895, a bill to suspend temporarily the duty on p-Dodecyl aniline.

S. 1896

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1896, a bill to suspend temporarily the duty on stainless steel single-piece exhaust gas manifolds.

S. 1953

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1953, a bill to suspend temporarily the duty on p-toluidine.

S. 1954

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1954, a bill to suspend temporarily the duty on p-nitrotoluene.

S. 1955

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1955, a bill to suspend temporarily the duty on acrylic resin solution.

S. 1956

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1956, a bill to suspend temporarily the duty on Benzenamine, 4 Dodecyl.

S. 1958

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1958, a bill to suspend temporarily the duty on medium molecular weight solid epoxy resin.

S. 1979

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1979, a bill to suspend temporarily the duty on certain fiberglass sheets used to make ceiling tiles.

S. 1980

At the request of Mr. CASEY, the name of the Senator from Pennsylvania (Mr. SPECTER) was added as a cosponsor of S. 1980, a bill to suspend temporarily the duty on certain fiberglass sheets used to make flooring substrate.

S. 2052

At the request of Mr. UDALL of Colorado, the name of the Senator from Idaho (Mr. CRAPO) was added as a cosponsor of S. 2052, a bill to amend the Energy Policy Act of 2005 to require the Secretary of Energy to carry out a research and development and demonstration program to reduce manufacturing and construction costs relating to nuclear reactors, and for other purposes.

S. 2076

At the request of Mr. CASEY, the name of the Senator from Pennsyl-

vania (Mr. SPECTER) was added as a cosponsor of S. 2076, a bill to suspend temporarily the duty on titanium dioxide.

S. RES. 210

At the request of Mrs. LINCOLN, the names of the Senator from New Jersey (Mr. LAUTENBERG), the Senator from Connecticut (Mr. DODD) and the Senator from Michigan (Mr. LEVIN) were added as cosponsors of S. Res. 210, a resolution designating the week beginning on November 9, 2009, as National School Psychology Week.

AMENDMENT NO. 2712

At the request of Mr. BAUCUS, the name of the Senator from Florida (Mr. NELSON) was added as a cosponsor of amendment No. 2712 proposed to H.R. 3548, a bill to amend the Supplemental Appropriations Act, 2008 to provide for the temporary availability of certain additional emergency unemployment compensation, and for other purposes.

At the request of Mr. WYDEN, his name was added as a cosponsor of amendment No. 2712 proposed to H.R. 3548, *supra*.

AMENDMENT NO. 2723

At the request of Mr. ENZI, the name of the Senator from Texas (Mr. CORNYN) was added as a cosponsor of amendment No. 2723 intended to be proposed to H.R. 3548, a bill to amend the Supplemental Appropriations Act, 2008 to provide for the temporary availability of certain additional emergency unemployment compensation, and for other purposes.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. BARRASSO (for himself and Mr. ENZI):

S. 2722. A bill to authorize the Secretary of the Interior to conduct a special resource study to determine the suitability and feasibility of adding the Heart Mountain Relocation Center, in the State of Wyoming, as a unit of the National Park System; to the Committee on Energy and Natural Resources.

Mr. BARRASSO. Mr. President, I join Senator ENZI today to introduce the Heart Mountain Relocation Center Study Act. This legislation will authorize the National Park Service to conduct a special resource study of the site of Heart Mountain Relocation Center near Powell, Wyoming. The site is an important part of our national history and of the history of our communities in western Wyoming.

This legislation is truly a credit to the individuals, local communities and grassroots organizations supporting recognition of the Heart Mountain site. Many of these individuals readily share their experience of the years between 1942 and 1945, when Japanese American families from the West Coast were forcibly moved to Park County, Wyoming and interned at the site near Heart Mountain. During those years, the Heart Mountain site was the third-

largest community in Wyoming, housing nearly 11,000 Japanese Americans. The experience during those years shaped internees and local residents alike. It represents an important chapter in American history.

The legislation introduced today will authorize study of the Heart Mountain site and its significance to the mission of the National Park Service. The study will involve participation by the public and evaluate options for future management of the Heart Mountain site.

I want to thank the Heart Mountain Wyoming Foundation, along with other supporting organizations, for championing this cause. It is because of their efforts that this important historical site has been preserved and presented to the public.

The internment of Japanese Americans during World War II is a part of America's history. The special resource study of Heart Mountain Relocation Center will lay groundwork for protecting this history for future generations. I urge Senators to support the Heart Mountain Relocation Center Study Act.

Mr. ENZI. Mr. President, I rise today to discuss the importance of preserving the Heart Mountain World War II Internment Camp in Powell, Wyoming. My good friend and colleague Senator JOHN BARRASSO and I are introducing a bill to authorize the Secretary of the Interior to conduct a special resource study to determine the suitability and feasibility of adding the Heart Mountain Relocation Center as a unit of the National Park System.

Heart Mountain, WY, was 1 of 10 relocation centers created during World War II to house Japanese and Japanese-Americans who were forcibly relocated inland from the west coast. The current site contains the most existing structures of any site in the country. To memorialize this history, the Heart Mountain, Wyoming Foundation is working to develop a Learning Center on the site of the Internment Camp. The Foundation is a well-established and creditable organization serving 2,800 on its mailing list, with notable Board and Advisory Board members including former Senator Alan Simpson and former U.S. Department of Commerce and U.S. Department of Transportation Secretary Norman Mineta. Senator Simpson and Secretary Mineta first met as Boy Scouts when Senator Simpson's Cody, WY, Scout Troop visited Secretary Mineta's troop while he was interned as a young man in the Heart Mountain camp. They developed a bond that would last for decades and eventually served in Congress together.

Private and public entities alike strongly believe that Heart Mountain, WY, should be preserved for future generations. I, too, believe preservation of one of our country's landmarks from World War II should be saved so our children and grandchildren have another tool to learn about our country's history.

In 2000, I secured Federal funding from the Economic Development Initiative Grant Program, EDI, under the U.S. Department of Housing and Urban Development for the Heart Mountain, Wyoming Foundation. The foundation used this funding to acquire land and conduct environmental assessment of the land in order to build an interactive learning facility at Heart Mountain's World War II Internment Camp in Powell, WY. The facility educates tourists and Wyomingites about the camp's history and effects on the Japanese American population. In the past 9 years, private individuals, non-profit organizations, and the Federal Government have issued additional dollars to the Heart Mountain, Wyoming Foundation in order to achieve its goal of preserving the land, remaining structures, and building the Learning Center.

The next step in this journey is the bill Senator BARRASSO and I are introducing today. The bill would authorize the Secretary of the Interior to conduct a special resource study to determine the suitability and feasibility of adding the Heart Mountain Relocation Center as a unit of the National Park System. When conducting the study, the Secretary of the Interior will be looking at various factors including, but not limited to, evaluating the national significance of Heart Mountain, WY; identifying the cost estimates for any Federal acquisition, development, operation and maintenance of the area; and identifying any potential impacts of designation of site as a unit of the National Park System on private landowners. Once funds are made available for the study, the Secretary of the Interior has 3 years to study the issue and issue a report about next steps to the appropriate House and Senate committees of jurisdiction.

Simply because we are introducing this legislation does not guarantee that Heart Mountain will become a part of the National Park System. The bill we are introducing will allow the Secretary to study that question and to make a recommendation based on the merits of Heart Mountain and how it would fit within the entire National Park System.

Heart Mountain Camp internees want to leave a legacy of learning through this Center to future generations such that abridgements of freedoms and lack of ethnic understanding not occur again in this great country. Preserving the land and structures and building the Learning Center will do just that. This bill is the next step forward in making their dream a reality.

By Mr. BROWNBACK (for himself and Mr. ROBERTS):

S. 2723. A bill to amend the Internal Revenue Code of 1986 to provide a special depreciation allowance and recovery period for noncommercial aircraft property; to the Committee on Finance.

Mr. BROWNBACK. Mr. President, Today I introduce an important piece

of legislation that would provide a real boost to our economy at little, if any, expense to taxpayers. The bill I introduce would offer bonus depreciation on the purchase of noncommercial general aviation aircraft in 2010 or 2011.

America is the world leader in general aviation manufacturing, a sector in which we truly have no peer. General aviation is an essential and critical part of our Nation's transportation infrastructure for many individuals and businesses, for whom time is of the absolute essence. Further, general aviation is a vital component of our economy, supporting over 1.2 million jobs and providing \$150 billion in economic activity. It is one of the few remaining American manufacturing industries that still provide a significant trade surplus for the U.S., generating over \$5.9 billion in exports of domestically manufactured planes in 2008 alone.

However, this sector is particularly susceptible to economic downturns. Many individuals and companies will delay or even cancel the purchase of an aircraft in a bad economy even though they may have a present need for a new aircraft.

We see this reflected in our general aviation sector where during the first half of 2009, we witnessed declines of 58 percent in piston engine aircraft sales; 37 percent in jet engine aircraft sales; and 13 percent in turboprop aircraft sales. At the same time, use of business jets has declined 12 percent over the past year, and the number of used aircraft on the global market stands at a historic high.

Cumulatively, general aviation companies have had to lay off 19,000 American workers, and this includes 11,500 alone in Wichita, KS. Over the past year, total employment of general aviation companies has declined by almost 14 percent. This is even more alarming when you consider that the U.S. Department of Labor aerospace workforce multiplier is three. For every general aviation worker on an aircraft, there are three jobs outside the immediate company that are created, whether manufacturing, engineering, supply or support. So, for this many general aviation workers to have been laid-off has much further reaching consequences in terms of the number of people and families that are adversely impacted.

The legislation that I propose today is a proven approach to spur general aviation aircraft orders with minimal affect on the Federal budget. My approach to this issue is an approach that has resulted in real jobs. During the 2003-2004 economic downturn, I worked to have general aviation bonus depreciation included in legislation that emerged from the Senate Finance Committee. That provision is credited with spurring over \$2 billion in new general aviation aircraft sales, and it is credited with saving or sustaining thousands of jobs. Also, another consideration that makes this approach a real

no-brainer is that, in the past, the Joint Tax Committee reported the provision to have a negligible impact on Federal tax revenues over the 10-year budget window. This is because, while tax revenue is reduced in the near-term, revenues rebound to higher levels in the second half of the 10-year window as no depreciation is being taken in the later years of the period.

Acting on this proposal now is important. The Blue Chip Economic Indicators consensus forecast expect unemployment to rise above 10 percent and to remain above the 3rd quarter 2009 level of 9.6 percent at least through the end of 2010, so we are looking at uncertain economic growth and high unemployment for several more quarters. A proposal like the one that I am putting forward is likely to encourage individuals and businesses to go ahead and act now on placing orders rather than waiting. For the Congress to act on this bonus depreciation legislation now would have a positive effect on getting our economic engines moving again and can play a part in helping facilitate a broader economic recovery, as it would hopefully again help to save and sustain jobs as well as returning jobs to those who have lost them as a result of the recession.

By Mr. REID (for himself, Mrs. FEINSTEIN, Mr. ENSIGN, and Mrs. BOXER):

S. 2724. A bill to provide for environmental restoration activities and forest management activities in the Lake Tahoe Basin; to the Committee on Environment and Public Works.

Mr. REID. Mr. President, I rise today with my good friends, Senator FEINSTEIN, Senator ENSIGN, and Senator BOXER to introduce the Lake Tahoe Restoration Act of 2009.

Representatives HELLER, TITUS, BERKLEY and others will be introducing an identical version of this legislation in the House of Representatives today, and I urge both bodies to act swiftly on this important legislation.

Lake Tahoe is a place of incredible beauty. The clear blue waters of the lake, surrounded by forested slopes and snow-capped peaks is a sight that can stir the soul. When Mark Twain first saw Lake Tahoe in 1861, he described it as "a noble sheet of blue water lifted six thousand three hundred feet above the level of the sea, and walled in by a rim of snow-clad mountain peaks that towered aloft full three thousand feet higher still!" He went on to proclaim the view in front of him as surely "the fairest picture the whole earth affords." I could not agree more.

But the Lake Tahoe Basin faces some great challenges. The famed clarity of the lake declined by over a third during the last 50 years; it is estimated that 25 percent of the trees in the basin are dead or dying; the Lahontan cut-throat trout that once grew to 40 pounds or more in Lake Tahoe are no longer present; and many of the basin's natural marshes and wetlands have been altered or drained.

It became clear to me in the 1990s that a major commitment was needed to turn things around for the health and future of Lake Tahoe and the Lake Tahoe Basin. In 1996, I called then-President Clinton and Vice President Gore and asked if they would come to Lake Tahoe with me so that they could see both the incredible beauty of the place and many threats facing this rare jewel. When we convened in July 1997, the President and Vice President brought four cabinet secretaries with them and we had a serious multi-day session on the future of Lake Tahoe. President Clinton promised to make Lake Tahoe a priority—for the people of Nevada, for the people of California and for the whole country. An executive order and the subsequent Lake Tahoe Restoration Act of 2000 underscored that commitment.

It would have been difficult to imagine at that first summit how much progress we would be able to make in 12 years. The clarity of the lake now appears to have stabilized, thousands of acres of forest lands have been restored, roads and highways across the basin have been improved to limit runoff, and the natural function of many miles of stream zones and riparian areas has been restored. But there is a great deal yet to be done. We offer this legislation as the next step.

The Lake Tahoe Restoration Act of 2009 focuses Federal attention on the areas where we can be most effective and it builds on the lessons we have learned since 1997. The basic summary of the bill is that it authorizes \$415 million over 8 years to improve water clarity, reduce the threat of fire, and restore the environment. But I would like to take a few minutes to explain some of the components in greater depth.

It would be impossible to make real progress in the Lake Tahoe Basin without working hand-in-hand with the Forest Service, which manages 75 percent of the land in the area. With that in mind, we call on the Forest Service to support the thresholds put forth by the Tahoe Regional Planning Agency, we provide encouragement and funding to work on the restoration of stream environment zones, and we withdraw all Forest Service in the Basin lands from mineral entry in order to minimize soil disturbance. The Forest Service is also granted increased flexibility to exchange land with the states of Nevada and California which will allow for more cost-efficient management of the over 8,000 publicly owned urban parcels spread throughout the Basin. Currently, the Forest Service owns over 3,280 of these urban parcels and there are questions about whether it is in the public interest for the Forest Service to manage these urban lands or whether it would be better to pass them to other responsible entities that could provide more efficient management. We have asked the Forest Service to report to Congress on their plans for improving this part of their pro-

gram, including any suggestions for how Congress might be able to help. Along with these new authorities and direction for forest management, the bill authorizes \$136 million to reduce the threat of wildfire. This includes work on Forest Service lands as well as work done by local fire agencies. Local communities and fire districts that receive grants from this generous program will provide a 25 percent cash match.

The Environmental Improvement Plan, EIP, another key part of restoration efforts in the basin. The EIP is a list, prepared by Lake Tahoe stakeholders, of projects that are designed to improve water quality, forest health, air quality and fish and wildlife habitat around Lake Tahoe. As part of this bill we authorize \$136 million for Federal funding to support EIP projects. We also call on stakeholders in the basin to carefully rank the projects in the EIP, using the best available science, in order to give everyone involved an understanding of the long-term priorities and goals of the program. Through this ranking, when state, local, or private funds become available, the stakeholders and government agencies can move immediately to fund and implement the projects that are most vital and in keeping with the long-range vision for environmental restoration in the basin.

Another important authorization in the bill is \$72 million for stormwater management and watershed restoration projects which have been determined to be among the most effective ways to improve water clarity. These are projects designed to reduce the inflow of very fine sediment into the lake through improvement of urban stormwater systems or the restoration of natural watershed functions in the basin's streams and marsh areas.

The legislation also takes great strides in protecting Lake Tahoe from dangerous invasive species like quagga and zebra mussels. The damage that would be inflicted at Lake Tahoe by a quagga or zebra mussel infestation has been estimated to be in the tens of millions of dollars annually. These organisms destroy native ecosystems. Their rampant reproduction upsets food chains and drives other species out of existence. Dense accumulation of shells damages infrastructure, clogs water pipes and fouls boats and motors. As has been experienced in other parts of our country, these invasive species can leave boulders and beaches covered in an unsightly, foul-smelling, crust of sharp fingernail-sized shells. In order to protect Lake Tahoe from this horrible fate, our bill would provide \$20 million for watercraft inspections and removal of existing invasive species from Lake Tahoe. Further, we prohibit watercraft that have had contact with quagga or zebra mussel-infested waters from entering waterbodies in the Lake Tahoe Basin. All other watercraft must submit to inspection and decontamination prior to launch in order to prevent

the introduction of these harmful species. Watercraft can be exempted from decontamination if they have not launched elsewhere since last being in Lake Tahoe.

Of special importance to me, this legislation authorizes \$20 million to help implement the full-scale recovery of the Lahontan cutthroat trout. This iconic fish was highly sought by anglers for generations, and was the top predator in the lake's ecosystem. Populations started to decline when widespread logging and pulp operations came to the Tahoe Basin, damaging crucial spawning areas. This, combined with serious overfishing, led to a sharp decline in population levels. To make matters worse, a number of non-native fish were introduced into Lake Tahoe and began to prey upon the remaining juvenile cutthroats.

We have since made great progress in cleaning up the Basin's streams and restoring lost habitat, but we will need to take additional steps to bring this great fish back to Lake Tahoe. The funding authorized by this legislation will make these steps possible. I would also like to note, that the Fish and Wildlife Service has made great progress in bringing Lahontan cutthroat trout back to Fallen Leaf Lake, in the Tahoe Basin. I have faith that they can work similar wonders in Lake Tahoe.

Another piece of this bill that we have put a lot of time and thought into is the science program. A solid understanding of how our restoration efforts are working, and how natural physical and biological processes affect the lake is critical to ensuring continued progress in restoring the health of the basin. The legislation authorizes \$30 million for scientific programs and research that will produce information on long-term trends in the basin and provide the basis for selection of the most effective projects. To help coordinate efforts, all projects funded by this legislation will have monitoring and assessment built into their project design so that we can better understand their contributions to restoration in the basin.

A great deal of work has gone into this bill, and I am grateful for the help and assistance that my colleagues and their staffs have provided. Senator FEINSTEIN and her staff deserve special praise for their diligent efforts. I also sincerely appreciate the time and attention of the many people in Nevada and California who have provided crucial input along the way.

Anyone who has been to Lake Tahoe knows that is it not just uniquely beautiful but that it is also worth fighting to protect. It is my sincere hope that my grandchildren will see the day when the Lake's clarity is restored to 100 feet or more, when Tahoe's giant native trout are once again plentiful, and when nearby forests are diverse and healthy. Mark Twain saw something amazing when he crested into the Lake Tahoe Basin. We

owe it to ourselves and to subsequent generations to restore as much of that splendor as we can. This bill is the next step in that journey.

Mr. President, I ask unanimous consent that the text of the bill be printed in the RECORD.

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

S. 2724

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Lake Tahoe Restoration Act of 2009".

SEC. 2. FINDINGS AND PURPOSES.

The Lake Tahoe Restoration Act (Public Law 106-506; 114 Stat. 2351) is amended by striking section 2 and inserting the following:

"SEC. 2. FINDINGS AND PURPOSES.

"(a) FINDINGS.—Congress finds that—

"(1) Lake Tahoe—

"(A) is 1 of the largest, deepest, and clearest lakes in the world;

"(B) has a cobalt blue color, a biologically diverse alpine setting, and remarkable water clarity; and

"(C) is recognized nationally and worldwide as a natural resource of special significance;

"(2) in addition to being a scenic and ecological treasure, the Lake Tahoe Basin is 1 of the outstanding recreational resources of the United States, which—

"(A) offers skiing, water sports, biking, camping, and hiking to millions of visitors each year; and

"(B) contributes significantly to the economies of California, Nevada, and the United States;

"(3) the economy in the Lake Tahoe Basin is dependent on the protection and restoration of the natural beauty and recreation opportunities in the area;

"(4) the Lake Tahoe Basin continues to be threatened by the impacts of land use and transportation patterns developed in the last century that damage the fragile watershed of the Basin;

"(5) the water clarity of Lake Tahoe declined from a visibility level of 105 feet in 1967 to only 70 feet in 2008;

"(6) the rate of decline in water clarity of Lake Tahoe has decreased in recent years;

"(7) a stable water clarity level for Lake Tahoe could be achieved through feasible control measures for very fine sediment particles and nutrients;

"(8) fine sediments that cloud Lake Tahoe, and key nutrients such as phosphorus and nitrogen that support the growth of algae and invasive plants, continue to flow into the Lake from stormwater runoff from developed areas, roads, turf, other disturbed land, and streams;

"(9) the destruction and alteration of wetland, wet meadows, and stream zone habitat have compromised the natural capacity of the watershed to filter sediment, nutrients, and pollutants before reaching Lake Tahoe;

"(10) approximately 25 percent of the trees in the Lake Tahoe Basin are either dead or dying;

"(11) forests in the Tahoe Basin suffer from over a century of fire suppression and periodic drought, which have resulted in—

"(A) high tree density and mortality;

"(B) the loss of biological diversity; and

"(C) a large quantity of combustible forest fuels, which significantly increases the threat of catastrophic fire and insect infestation;

"(12) the establishment of several aquatic and terrestrial invasive species (including bass, milfoil, and Asian clam) threatens the ecosystem of the Lake Tahoe Basin;

"(13) there is an ongoing threat to the Lake Tahoe Basin of the introduction and establishment of other invasive species (such as the zebra mussel, New Zealand mud snail, and quagga mussel);

"(14) the report prepared by the University of California, Davis, entitled the 'State of the Lake Report', found that conditions in the Lake Tahoe Basin had changed, including—

"(A) the average surface water temperature of Lake Tahoe has risen by more than 1.5 degrees Fahrenheit in the past 37 years; and

"(B) since 1910, the percent of precipitation that has fallen as snow in the Lake Tahoe Basin decreased from 52 percent to 34 percent;

"(15) 75 percent of the land in the Lake Tahoe Basin is owned by the Federal Government, which makes it a Federal responsibility to restore environmental health to the Basin;

"(16) the Federal Government has a long history of environmental preservation at Lake Tahoe, including—

"(A) congressional consent to the establishment of the Tahoe Regional Planning Agency with—

"(i) the enactment in 1969 of Public Law 91-148 (83 Stat. 360); and

"(ii) the enactment in 1980 of Public Law 96-551 (94 Stat. 3233);

"(B) the establishment of the Lake Tahoe Basin Management Unit in 1973;

"(C) the enactment of Public Law 96-586 (94 Stat. 3381) in 1980 to provide for the acquisition of environmentally sensitive land and erosion control grants in the Lake Tahoe Basin;

"(D) the enactment of sections 341 and 342 of the Department of the Interior and Related Agencies Appropriations Act, 2004 (Public Law 108-108; 117 Stat. 1317), which amended the Southern Nevada Public Land Management Act of 1998 (Public Law 105-263; 112 Stat. 2346) to provide payments for the environmental restoration projects under this Act; and

"(E) the enactment of section 382 of the Tax Relief and Health Care Act of 2006 (Public Law 109-432; 120 Stat. 3045), which amended the Southern Nevada Public Land Management Act of 1998 (Public Law 105-263; 112 Stat. 2346) to authorize development and implementation of a comprehensive 10-year hazardous fuels and fire prevention plan for the Lake Tahoe Basin;

"(17) the Assistant Secretary of the Army for Civil Works was an original signatory in 1997 to the Agreement of Federal Departments on Protection of the Environment and Economic Health of the Lake Tahoe Basin;

"(18) the Chief of Engineers, under direction from the Assistant Secretary of the Army for Civil Works, has continued to be a significant contributor to Lake Tahoe Basin restoration, including—

"(A) stream and wetland restoration;

"(B) urban stormwater conveyance and treatment; and

"(C) programmatic technical assistance;

"(19) at the Lake Tahoe Presidential Forum in 1997, the President renewed the commitment of the Federal Government to Lake Tahoe by—

"(A) committing to increased Federal resources for environmental restoration at Lake Tahoe; and

"(B) establishing the Federal Interagency Partnership and Federal Advisory Committee to consult on natural resources issues concerning the Lake Tahoe Basin;

“(20) at the 2008 and 2009 Lake Tahoe Forums, Senator Reid, Senator Feinstein, Senator Ensign, and Governor Gibbons—

“(A) renewed their commitment to Lake Tahoe; and

“(B) expressed their desire to fund the Federal share of the Environmental Improvement Program through 2018;

“(21) since 1997, the Federal Government, the States of California and Nevada, units of local government, and the private sector have contributed more than \$1,430,000,000 to the Lake Tahoe Basin, including—

“(A) \$424,000,000 from the Federal Government;

“(B) \$612,000,000 from the State of California;

“(C) \$87,000,000 from the State of Nevada;

“(D) \$59,000,000 from units of local government; and

“(E) \$249,000,000 from private interests;

“(22) significant additional investment from Federal, State, local, and private sources is necessary—

“(A) to restore and sustain the environmental health of the Lake Tahoe Basin;

“(B) to adapt to the impacts of changing climatic conditions; and

“(C) to protect the Lake Tahoe Basin from the introduction and establishment of invasive species; and

“(23) the Secretary has indicated that the Lake Tahoe Basin Management Unit has the capacity for at least \$10,000,000 and up to \$20,000,000 annually for the Fire Risk Reduction and Forest Management Program.

“(b) PURPOSES.—The purposes of this Act are—

“(1) to enable the Chief of the Forest Service, the Director of the United States Fish and Wildlife Service, and the Administrator of the Environmental Protection Agency, in cooperation with the Planning Agency and the States of California and Nevada, to fund, plan, and implement significant new environmental restoration activities and forest management activities to address in the Lake Tahoe Basin the issues described in paragraphs (4) through (14) of subsection (a);

“(2) to ensure that Federal, State, local, regional, tribal, and private entities continue to work together to manage land in the Lake Tahoe Basin and to coordinate on other activities in a manner that supports achievement and maintenance of—

“(A) the environmental threshold carrying capacities for the region; and

“(B) other applicable environmental standards and objectives;

“(3) to support local governments in efforts related to environmental restoration, stormwater pollution control, fire risk reduction, and forest management activities; and

“(4) to ensure that agency and science community representatives in the Lake Tahoe Basin work together—

“(A) to develop and implement a plan for integrated monitoring, assessment, and applied research to evaluate the effectiveness of the Environmental Improvement Program; and

“(B) to provide objective information as a basis for ongoing decisionmaking, with an emphasis on decisionmaking relating to public and private land use and resource management in the Basin.”.

SEC. 3. DEFINITIONS.

The Lake Tahoe Restoration Act (Public Law 106-506; 114 Stat. 2351) is amended by striking section 3 and inserting the following:

“SEC. 3. DEFINITIONS.

“In this Act:

“(1) ADMINISTRATOR.—The term ‘Administrator’ means the Administrator of the Environmental Protection Agency.

“(2) ASSISTANT SECRETARY.—The term ‘Assistant Secretary’ means the Assistant Secretary of the Army for Civil Works.

“(3) CHAIR.—The term ‘Chair’ means the Chair of the Federal Partnership.

“(4) COMPACT.—The term ‘Compact’ means the Tahoe Regional Planning Compact included in the first section of Public Law 96-551 (94 Stat. 3233).

“(5) DIRECTOR.—The term ‘Director’ means the Director of the United States Fish and Wildlife Service.

“(6) ENVIRONMENTAL IMPROVEMENT PROGRAM.—The term ‘Environmental Improvement Program’ means—

“(A) the Environmental Improvement Program adopted by the Planning Agency; and

“(B) any amendments to the Program.

“(7) ENVIRONMENTAL THRESHOLD CARRYING CAPACITY.—The term ‘environmental threshold carrying capacity’ has the meaning given the term in article II of the compact.

“(8) FEDERAL PARTNERSHIP.—The term ‘Federal Partnership’ means the Lake Tahoe Federal Interagency Partnership established by Executive Order 13957 (62 Fed. Reg. 41249) (or a successor Executive Order).

“(9) FOREST MANAGEMENT ACTIVITY.—The term ‘forest management activity’ includes—

“(A) prescribed burning for ecosystem health and hazardous fuels reduction;

“(B) mechanical and minimum tool treatment;

“(C) road decommissioning or reconstruction;

“(D) stream environment zone restoration and other watershed and wildlife habitat enhancements;

“(E) nonnative invasive species management; and

“(F) other activities consistent with Forest Service practices, as the Secretary determines to be appropriate.

“(10) NATIONAL WILDLAND FIRE CODE.—The term ‘national wildland fire code’ means—

“(A) the most recent publication of the National Fire Protection Association code numbered 1141, 1142, or 1144;

“(B) the most recent publication of the International Wildland-Urban Interface Code of the International Code Council; or

“(C) any other code that the Secretary determines provides the same, or better, standards for protection against wildland fire as a code described in subparagraph (A) or (B).

“(11) PLANNING AGENCY.—The term ‘Planning Agency’ means the Tahoe Regional Planning Agency established under Public Law 91-148 (83 Stat. 360) and Public Law 96-551 (94 Stat. 3233).

“(12) PRIORITY LIST.—The term ‘Priority List’ means the environmental restoration priority list developed under section 8.

“(13) SECRETARY.—The term ‘Secretary’ means the Secretary of Agriculture, acting through the Chief of the Forest Service.

“(14) TOTAL MAXIMUM DAILY LOAD.—The term ‘total maximum daily load’ means the total maximum daily load allocations adopted under section 303(d) of the Federal Water Pollution Control Act (33 U.S.C. 1313(d)).

“(15) STREAM ENVIRONMENT ZONE.—The term ‘Stream Environment Zone’ means an area that generally owes the biological and physical characteristics of the area to the presence of surface water or groundwater.

“(16) WATERCRAFT.—The term ‘watercraft’ means all motorized and non-motorized watercraft, including boats, personal watercraft, kayaks, and canoes.”.

SEC. 4. ADMINISTRATION OF THE LAKE TAHOE BASIN MANAGEMENT UNIT.

Section 4 of the Lake Tahoe Restoration Act (Public Law 106-506; 114 Stat. 2353) is amended—

(1) in subsection (b)(3), by striking “basin” and inserting “Basin”; and

(2) by adding at the end the following:

“(c) TRANSIT.—

“(1) IN GENERAL.—The Lake Tahoe Basin Management Unit shall, consistent with the regional transportation plan adopted by the Planning Agency, manage vehicular parking and traffic in the Lake Tahoe Basin Management Unit, with priority given—

“(A) to improving public access to the Lake Tahoe Basin, including the prioritization of alternatives to the private automobile, consistent with the requirements of the Compact;

“(B) to coordinating with the Nevada Department of Transportation, Caltrans, State parks, and other entities along Nevada Highway 28 and California Highway 89; and

“(C) to providing support and assistance to local public transit systems in the management and operations of activities under this subsection.

“(2) NATIONAL FOREST TRANSIT PROGRAM.—Consistent with the support and assistance provided under paragraph (1)(C), the Secretary, in consultation with the Secretary of Transportation, may enter into a contract, cooperative agreement, interagency agreement, or other agreement with the Department of Transportation to secure operating and capital funds from the National Forest Transit Program.

“(d) FOREST MANAGEMENT ACTIVITIES.—

“(1) COORDINATION.—

“(A) IN GENERAL.—In conducting forest management activities in the Lake Tahoe Basin Management Unit, the Secretary shall, as appropriate, coordinate with the Administrator and State and local agencies and organizations, including local fire departments and volunteer groups.

“(B) GOALS.—The coordination of activities under subparagraph (A) should aim to increase efficiencies and maximize the compatibility of management practices across public property boundaries.

“(2) MULTIPLE BENEFITS.—

“(A) IN GENERAL.—In conducting forest management activities in the Lake Tahoe Basin Management Unit, the Secretary shall conduct the activities in a manner that—

“(i) except as provided in subparagraph (B), attains multiple ecosystem benefits, including—

“(I) reducing forest fuels;

“(II) maintaining or restoring biological diversity;

“(III) improving wetland and water quality, including in Stream Environment Zones; and

“(IV) increasing resilience to changing climatic conditions; and

“(ii) helps achieve and maintain the environmental threshold carrying capacities established by the Planning Agency.

“(B) EXCEPTION.—Notwithstanding clause (A)(i), the attainment of multiple ecosystem benefits shall not be required if the Secretary determines that management for multiple ecosystem benefits would excessively increase the cost of a project in relation to the additional ecosystem benefits gained from the management activity.

“(3) GROUND DISTURBANCE.—Consistent with applicable Federal law and Lake Tahoe Basin Management Unit land and resource management plan direction, the Secretary shall—

“(A) establish post-project ground condition criteria for ground disturbance caused by forest management activities; and

“(B) provide for monitoring to ascertain the attainment of the post-project conditions.

“(e) WITHDRAWAL OF FEDERAL LAND.—

“(1) IN GENERAL.—Subject to valid existing rights and paragraph (2), the Federal land located in the Lake Tahoe Basin Management Unit is withdrawn from—

“(A) all forms of entry, appropriation, or disposal under the public land laws;

“(B) location, entry, and patent under the mining laws; and

“(C) disposition under all laws relating to mineral and geothermal leasing.

“(2) DETERMINATION.—

“(A) IN GENERAL.—The withdrawal under paragraph (1) shall be in effect until the date on which the Secretary, after conducting a review of all Federal land in the Lake Tahoe Basin Management Unit and receiving public input, has made a determination on which parcels of Federal land should remain withdrawn.

“(B) REQUIREMENTS.—The determination of the Secretary under subparagraph (A)—

“(i) shall be effective beginning on the date on which the determination is issued;

“(ii) may be altered by the Secretary as the Secretary determines to be necessary; and

“(iii) shall not be subject to administrative renewal.

“(f) ENVIRONMENTAL THRESHOLD CARRYING CAPACITY.—The Lake Tahoe Basin Management Unit shall support the attainment of the environmental threshold carrying capacities.

“(g) COOPERATIVE AUTHORITIES.—

“(1) IN GENERAL.—During the 4 fiscal years following the date of enactment of the Lake Tahoe Restoration Act of 2009, the Secretary, in conjunction with land adjustment projects or programs, may enter into contracts and cooperative agreements with States, units of local government, and other public and private entities to provide for fuel reduction, erosion control, reforestation, Stream Environment Zone restoration, and similar management activities on Federal land and non-Federal land within the projects or programs.

“(2) REPORT ON LAND STATUS.—

“(A) IN GENERAL.—Not later than 2 years after the date of enactment of the Lake Tahoe Restoration Act of 2009, the Secretary shall submit to Congress a report regarding the management of land in the Lake Tahoe Basin Management Unit Urban Lots Program, including—

“(i) a description of future plans and recent actions for land consolidation and adjustment; and

“(ii) the identification of any obstacles to desired conveyances or interchanges.

“(B) INCLUSIONS.—The report submitted under subparagraph (A) may contain recommendations for additional legislative authority.

“(C) EFFECT.—Nothing in this paragraph delays the conveyance of parcels under—

“(i) the authority of this Act; or

“(ii) any other authority available to the Secretary.

“(3) SUPPLEMENTAL AUTHORITY.—The authority of this subsection is supplemental to all other cooperative authorities of the Secretary.”

SEC. 5. CONSULTATION.

The Lake Tahoe Restoration Act (Public Law 106-506; 114 Stat. 2351) is amended by striking section 5 and inserting the following:

“SEC. 5. CONSULTATION.

“In carrying out this Act, the Secretary, the Administrator, and the Director shall, as appropriate and in a timely manner, consult with the heads of the Washoe Tribe, applicable Federal, State, regional, and local governmental agencies, and the Lake Tahoe Federal Advisory Committee.”

SEC. 6. AUTHORIZED PROJECTS.

The Lake Tahoe Restoration Act (Public Law 106-506; 114 Stat. 2351) is amended by striking section 6 and inserting the following:

“SEC. 6. AUTHORIZED PROJECTS.

“(a) IN GENERAL.—The Secretary, the Director, and the Administrator, in coordination with the Planning Agency and the States of California and Nevada, may carry out any project described in subsection (c) or included in the Priority List under section 8 to further the purposes of the Environmental Improvement Program if the project has been subject to environmental review and approval, respectively, as required under Federal law, article 7 of the Compact, and State law, as applicable.

“(b) MONITORING AND ASSESSMENT.—All projects authorized under subsection (c) and section 8 shall—

“(1) include funds for monitoring and assessment of the results and effectiveness at the project and program level consistent with the program developed under section 11; and

“(2) use the integrated multiagency performance measures established in the science program developed under that section.

“(c) DESCRIPTION OF ACTIVITIES.—

“(1) STORMWATER MANAGEMENT, EROSION CONTROL, AND TOTAL MAXIMUM DAILY LOAD IMPLEMENTATION.—Of the amounts made available under section 18(a), \$40,000,000 shall be used for the Federal share of the following projects:

“(A) Bijou Stormwater Improvement Project in the City of South Lake Tahoe, California.

“(B) Christmas Valley Stormwater Improvement Project in El Dorado County, California.

“(C) Kings Beach Watershed Improvement Project in Placer County, California.

“(D) Lake Forest Stormwater and Watershed Improvement Project in Placer County, California.

“(E) Crystal Bay Stormwater Improvement Project in Washoe County, Nevada.

“(F) Washoe County Stormwater Improvement Projects 4, 5, and 6 in Washoe County, Nevada.

“(G) Upper and Lower Kingsbury Project in Douglas County, Nevada.

“(H) Lake Village Drive-Phase II Stormwater Improvement in Douglas County, Nevada.

“(I) State Route 28 Spooner to Sand Harbor Stormwater Improvement, Washoe County, Nevada.

“(J) State Route 431 Stormwater Improvement, Washoe County, Nevada.

“(2) STREAM ENVIRONMENT ZONE AND WATERSHED RESTORATION.—Of the amounts made available under section 18(a), \$32,000,000 shall be available for the Federal share of the following projects:

“(A) Upper Truckee River and Marsh Restoration Project.

“(B) Upper Truckee River Mosher, Reaches 1 & 2.

“(C) Upper Truckee River Sunset Stables.

“(D) Lower Blackwood Creek Restoration Project.

“(E) Ward Creek.

“(F) Third Creek/Incline Creek Watershed Restoration.

“(G) Rosewood Creek Restoration Project.

“(3) FIRE RISK REDUCTION AND FOREST MANAGEMENT.—

“(A) IN GENERAL.—Of the amounts made available under section 18(a), \$136,000,000 shall be made available for the following projects:

“(i) Projects identified as part of the Lake Tahoe Basin Multi-Jurisdictional Fuel Reduction and Wildfire Prevention Strategy 10-Year Plan.

“(ii) Competitive grants for fuels work to be awarded by the Secretary to communities that have adopted national wildland fire

codes to implement the applicable portion of the 10-year plan described in clause (i).

“(iii) Biomass projects, including feasibility assessments and transportation of materials.

“(iv) Angora Fire Restoration projects under the jurisdiction of the Secretary.

“(B) MULTIPLE BENEFIT FUELS PROJECTS.—Consistent with the requirements of section 4(d)(2), not more than \$10,000,000 of the amounts made available to carry out subparagraph (A) shall be available to the Secretary for the planning and implementation of multiple benefit fuels projects with an emphasis on restoration projects in Stream Environment Zones.

“(C) MINIMUM ALLOCATION.—Of the amounts made available to carry out subparagraph (A), at least \$80,000,000 shall be made available to the Secretary for projects under subparagraph (A)(i).

“(D) PRIORITY.—Units of local government that have dedicated funding for inspections and enforcement of defensible space regulations shall be given priority for amounts provided under this paragraph.

“(E) COST-SHARING REQUIREMENTS.—As a condition on the receipt of funds, communities or local fire districts that receive funds under this paragraph shall provide a 25 percent match.

“(4) INVASIVE SPECIES MANAGEMENT.—Of the amounts to be made available under section 18(a), \$20,500,000 shall be made available for the Aquatic Invasive Species Program and the watercraft inspections described in section 9.

“(5) SPECIAL STATUS SPECIES MANAGEMENT.—Of the amounts to be made available under section 18(a), \$20,000,000 shall be made available for the Lahontan Cutthroat Trout Recovery Program.

“(6) SCIENCE.—Of the amounts to be made available under section 18(a), \$30,000,000 shall be used to develop and implement the science program developed under section 11.

“(d) USE OF REMAINING FUNDS.—Any amounts made available under section 18(a) that remain available after projects described in subsection (c) have been funded shall be made available for projects included in the Priority List under section 8.”

SEC. 7. ENVIRONMENTAL RESTORATION PRIORITY LIST.

The Lake Tahoe Restoration Act (Public Law 106-506; 114 Stat. 2351) is amended—

(1) by striking sections 8 and 9;

(2) by redesignating sections 10, 11, and 12 as sections 16, 17, and 18, respectively; and

(3) by inserting after section 7 the following:

“SEC. 8. ENVIRONMENTAL RESTORATION PRIORITY LIST.

“(a) FUNDING.—Subject to section 6(d), of the amounts to be made available under section 18(a), at least \$136,000,000 shall be made available for projects identified on the Priority List.

“(b) DEADLINE.—Not later than February 15 of the year after the date of enactment of the Lake Tahoe Restoration Act of 2009, the Chair, in consultation with the Secretary, the Administrator, the Director, the Planning Agency, the States of California and Nevada, the Federal Partnership, the Washoe Tribe, the Lake Tahoe Federal Advisory Committee, and the Tahoe Science Consortium shall submit to Congress a prioritized list of all Environmental Improvement Program projects for the Lake Tahoe Basin, regardless of program category.

“(c) CRITERIA.—

“(1) IN GENERAL.—The priority of projects included in the Priority List shall be based on the best available science and the following criteria:

“(A) The 5-year threshold carrying capacity evaluation.

“(B) The ability to measure progress or success of the project.

“(C) The potential to significantly contribute to the achievement and maintenance of the environmental threshold carrying capacities identified in the Compact for—

- “(i) air quality;
- “(ii) fisheries;
- “(iii) noise;
- “(iv) recreation;
- “(v) scenic resources;
- “(vi) soil conservation;
- “(vii) forest health;
- “(viii) water quality; and
- “(ix) wildlife.

“(D) The ability of a project to provide multiple benefits.

“(E) The ability of a project to leverage non-Federal contributions.

- “(F) Stakeholder support for the project.
- “(G) The justification of Federal interest.
- “(H) Agency priority.
- “(I) Agency capacity.
- “(J) Cost-effectiveness.
- “(K) Federal funding history.

“(2) SECONDARY FACTORS.—In addition to the criteria under paragraph (1), the Chair shall, as the Chair determines to be appropriate, give preference to projects in the Priority List that benefit existing neighborhoods in the Basin that are at or below regional median income levels, based on the most recent census data available.

“(3) EROSION CONTROL PROJECTS.—For purposes of the priority list, erosion control projects shall be considered part of the stormwater management and total maximum daily load program of the Environmental Improvement Program.

“(d) REVISIONS.—

“(1) IN GENERAL.—The Priority List submitted under subsection (b) shall be revised—

- “(A) every 4 years; or
- “(B) on a finding of compelling need under paragraph (2).

“(2) FINDING OF COMPELLING NEED.—

“(A) IN GENERAL.—If the Secretary, the Administrator, or the Director makes a finding of compelling need justifying a priority shift and the finding is approved by the Secretary, the Executive Director of the Planning Agency, the California Resources Secretary, and the Director of the Nevada Department of Conservation, the Priority List shall be revised in accordance with this subsection.

“(B) INCLUSIONS.—A finding of compelling need includes—

- “(i) major scientific findings;
- “(ii) results from the threshold evaluation of the Planning Agency;
- “(iii) emerging environmental threats; and
- “(iv) rare opportunities for land acquisition.

“SEC. 9. AQUATIC INVASIVE SPECIES PREVENTION.

“(a) IN GENERAL.—Not later than 60 days after the date of enactment of the Lake Tahoe Restoration Act of 2009, the Director, in coordination with the Planning Agency, the California Department of Fish and Game, and the Nevada Department of Wildlife, shall deploy strategies that meet or exceed the criteria described in subsection (b) for preventing the introduction of aquatic invasive species into the Lake Tahoe Basin.

“(b) CRITERIA.—The strategies referred to in subsection (a) shall provide that—

“(1) combined inspection and decontamination stations be established and operated at not less than 2 locations in the Lake Tahoe Basin;

“(2) watercraft not be allowed to launch in waters of the Lake Tahoe Basin if the watercraft—

“(A) has been in waters infested by quagga or zebra mussels;

“(B) shows evidence of invasive species that the Director has determined would be detrimental to the Lake Tahoe ecosystem; or

“(C) cannot be reliably decontaminated in accordance with paragraph (3);

“(3) subject to paragraph (4), all watercraft surfaces and appurtenance (such as anchors and fenders) that contact with water shall be reliably decontaminated, based on standards developed by the Director using the best available science;

“(4) watercraft bearing positive verification of having last launched within the Lake Tahoe Basin may be exempted from decontamination under paragraph (3); and

“(5) while in the Lake Tahoe Basin, all watercraft maintain documentation of compliance with the strategies deployed under this section.

“(c) CERTIFICATION.—The Director may certify State agencies to perform the decontamination activities described in subsection (b)(3) at locations outside the Lake Tahoe Basin if standards at the sites meet or exceed standards for similar sites in the Lake Tahoe Basin established under this section.

“(d) APPLICABILITY.—The strategies and criteria developed under this section shall apply to all watercraft to be launched on water within the Lake Tahoe Basin.

“(e) FEES.—The Director may collect and spend fees for decontamination only at a level sufficient to cover the costs of operation of inspection and decontamination stations under this section.

“(f) CIVIL PENALTIES.—

“(1) IN GENERAL.—Any person that launches, attempts to launch, or facilitates launching of watercraft not in compliance with strategies deployed under this section shall be liable for a civil penalty in an amount not to exceed \$1,000 per violation.

“(2) OTHER AUTHORITIES.—Any penalties assessed under this subsection shall be separate from penalties assessed under any other authority.

“(g) LIMITATION.—The strategies and criteria under subsections (a) and (b), respectively, may be modified if the Secretary of the Interior, in a nondelegable capacity and in consultation with the Planning Agency and State governments, issues a determination that alternative measures will be no less effective at preventing introduction of aquatic invasive species into Lake Tahoe than the strategies and criteria.

“(h) FUNDING.—Of the amounts made available under section 6(c)(4), not more than \$500,000 shall be made available to the Director, in coordination with the Planning Agency and State governments—

“(1) to evaluate the feasibility, cost, and potential effectiveness of further efforts that could be undertaken by the Federal Government, State and local governments, or private entities to guard against introduction of aquatic invasive species into Lake Tahoe, including the potential establishment of inspection and decontamination stations on major transitways entering the Lake Tahoe Basin; and

“(2) to evaluate and identify options for ensuring that all waters connected to Lake Tahoe are protected from quagga and zebra mussels and other aquatic invasive species.

“(i) SUPPLEMENTAL AUTHORITY.—The authority under this section is supplemental to all actions taken by non-Federal regulatory authorities.

“SEC. 10. ARMY CORPS OF ENGINEERS; INTER-AGENCY AGREEMENTS.

“(a) IN GENERAL.—The Assistant Secretary may enter into interagency agreements with non-Federal interests in the Lake Tahoe Basin to use Lake Tahoe Partnership-Miscellaneous General Investigations funds to provide programmatic technical assistance for the Environmental Improvement Program.

“(b) LOCAL COOPERATION AGREEMENTS.—

“(1) IN GENERAL.—Before providing technical assistance under this section, the Assistant Secretary shall enter into a local cooperation agreement with a non-Federal interest to provide for the technical assistance.

“(2) COMPONENTS.—The agreement entered into under paragraph (1) shall—

“(A) describe the nature of the technical assistance,

“(B) describe any legal and institutional structures necessary to ensure the effective long-term viability of the end products by the non-Federal interest; and

“(C) include cost-sharing provisions in accordance with paragraph (3).

“(3) FEDERAL SHARE.—

“(A) IN GENERAL.—The Federal share of project costs under each local cooperation agreement under this subsection shall be 65 percent.

“(B) FORM.—The Federal share may be in the form of reimbursements of project costs.

“(C) CREDIT.—The non-Federal interest may receive credit toward the non-Federal share for the reasonable costs of related technical activities completed by the non-Federal interest before entering into a local cooperation agreement with the Assistant Secretary under this subsection.

“SEC. 11. SCIENCE PROGRAM.

“The Administrator, in cooperation with the Secretary, the Planning Agency, the States of California and Nevada, and the Tahoe Science Consortium, shall develop and implement a Lake Tahoe Science Program that—

“(1) develops and regularly updates an integrated multiagency programmatic assessment and monitoring plan—

“(A) to evaluate the effectiveness of the Environmental Improvement Program;

“(B) to evaluate the status and trends of indicators related to environmental threshold carrying capacities; and

“(C) to assess the impacts and risks of changing climatic conditions and invasive species;

“(2) develops a comprehensive set of performance measures for Environmental Improvement Program assessment;

“(3) coordinates the development of the annual report described in section 13;

“(4) produces and synthesizes scientific information necessary for—

“(A) the identification and refinement of environmental indicators for the Lake Tahoe Basin; and

“(B) the evaluation of standards and benchmarks;

“(5) conducts applied research, programmatic technical assessments, scientific data management, analysis, and reporting related to key management questions;

“(6) develops new tools and information to support objective assessments of land use and resource conditions;

“(7) provides scientific and technical support to the Federal Government and State and local governments in—

“(A) reducing stormwater runoff, air deposition, and other pollutants that contribute to the loss of lake clarity; and

“(B) the development and implementation of an integrated stormwater monitoring and assessment program;

“(8) establishes and maintains independent peer review processes—

“(A) to evaluate the Environmental Improvement Program; and

“(B) to assess the technical adequacy and scientific consistency of central environmental documents, such as the 5-year threshold review; and

“(9) provides scientific and technical support for the development of appropriate management strategies to accommodate changing climatic conditions in the Lake Tahoe Basin.

“SEC. 12. PUBLIC OUTREACH AND EDUCATION.

“(a) IN GENERAL.—The Secretary, Administrator, and Director will coordinate with the Planning Agency to conduct public education and outreach programs, including encouraging—

“(1) owners of land and residences in the Lake Tahoe Basin—

“(A) to implement defensible space; and

“(B) to conduct best management practices for water quality; and

“(2) owners of land and residences in the Lake Tahoe Basin and visitors to the Lake Tahoe Basin, to help prevent the introduction and proliferation of invasive species as part of the private share investment in the Environmental Improvement Program.

“(b) REQUIRED COORDINATION.—Public outreach and education programs for aquatic invasive species under this section shall—

“(1) be coordinated with Lake Tahoe Basin tourism and business organizations; and

“(2) include provisions for the programs to extend outside of the Lake Tahoe Basin.

“SEC. 13. REPORTING REQUIREMENTS.

“Not later than February 15 of each year, the Chair, in cooperation with the Secretary, the Director, the Administrator, the Planning Agency, and the States of California and Nevada, shall submit to Congress a report that describes—

“(1) the status of all Federal, State, local, and private projects authorized under this Act, including to the maximum extent practicable, for projects that will receive Federal funds under this Act during the current or subsequent fiscal year—

“(A) the project scope;

“(B) the budget for the project; and

“(C) the justification for the project, consistent with the criteria established in section 8(c)(1);

“(2) Federal, State, local, and private expenditures in the preceding fiscal year to implement the Environmental Improvement Program and projects otherwise authorized under this Act;

“(3) accomplishments in the preceding fiscal year in implementing this Act in accordance with the performance measures and other monitoring and assessment activities; and

“(4) public education and outreach efforts undertaken to implement programs and projects authorized under this Act.

“SEC. 14. ANNUAL BUDGET PLAN.

“As part of the annual budget of the President, the President shall submit information regarding each Federal agency involved in the Environmental Improvement Program (including the Forest Service, the Environmental Protection Agency, and the United States Fish and Wildlife Service), including—

“(1) an interagency crosscut budget that displays the proposed budget for use by each Federal agency in carrying out restoration activities relating to the Environmental Improvement Program for the following fiscal year;

“(2) a detailed accounting of all amounts received and obligated by Federal agencies to achieve the goals of the Environmental Improvement Program during the preceding fiscal year; and

“(3) a description of the Federal role in the Environmental Improvement Program, including the specific role of each agency involved in the restoration of the Lake Tahoe Basin.

“SEC. 15. GRANT FOR WATERSHED STRATEGY.

“(a) IN GENERAL.—Of the amounts to be made available under section 18(a), the Ad-

ministrator shall use not more than \$500,000 to provide a grant, on a competitive basis, to States, federally recognized Indian tribes, interstate agencies, other public or nonprofit agencies and institutions, or institutions of higher education to develop a Lake Tahoe Basin watershed strategy in coordination with the Planning Agency, the States of California and Nevada, and the Secretary.

“(b) COMMENT.—In developing the watershed strategy under subsection (a), the grant recipients shall provide an opportunity for public review and comment.

“(c) COMPONENTS.—The watershed strategy developed under subsection (a) shall include—

“(1) a classification system, inventory, and assessment of stream environment zones;

“(2) comprehensive watershed characterization and restoration priorities consistent with—

“(A) the Lake Tahoe total maximum daily load; and

“(B) the environmental threshold carrying capacities of Lake Tahoe;

“(3) a monitoring and assessment program consistent with section 11; and

“(4) an adaptive management system—

“(A) to measure and evaluate progress; and

“(B) to adjust the program.

“(d) DEADLINE.—The watershed strategy developed under subsection (a) shall be completed by the date that is 2 years after the date on which funds are made available to carry out this section.”.

SEC. 8. RELATIONSHIP TO OTHER LAWS.

Section 17 of The Lake Tahoe Restoration Act (Public Law 106–506; 114 Stat. 2358) (as redesignated by section 7(2)) is amended by inserting “, Director, or Administrator” after “Secretary”.

SEC. 9. AUTHORIZATION OF APPROPRIATIONS.

The Lake Tahoe Restoration Act (Public Law 106–506; 114 Stat. 2351) is amended by striking section 18 (as redesignated by section 7(2)) and inserting the following:

“SEC. 18. AUTHORIZATION OF APPROPRIATIONS.

“(a) IN GENERAL.—There is authorized to be appropriated to carry out this Act \$415,000,000 for a period of 8 fiscal years beginning the first fiscal year after the date of enactment of the Lake Tahoe Restoration Act of 2009.

“(b) EFFECT ON OTHER FUNDS.—Amounts authorized under this section and any amendments made by this Act—

“(1) shall be in addition to any other amounts made available to the Secretary, Administrator, or Director for expenditure in the Lake Tahoe Basin; and

“(2) shall not reduce allocations for other Regions of the Forest Service, Environmental Protection Agency, or United States Fish and Wildlife Service.

“(c) COST-SHARING REQUIREMENT.—Except as provided in subsection (d) and section 6(c)(3)(E), the States of California and Nevada shall pay 50 percent of the aggregate costs of restoration activities in the Lake Tahoe Basin funded under section 6 or 8.

“(d) RELOCATION COSTS.—Notwithstanding subsection (c), the Secretary shall provide to local utility districts $\frac{2}{3}$ the costs of relocating facilities in connection with—

“(1) environmental restoration projects under sections 6 and 8; and

“(2) erosion control projects under section 2 of Public Law 96–586 (94 Stat. 3381).

“(e) SIGNAGE.—To the maximum extent practicable, a project provided assistance under this Act shall include appropriate signage at the project site that—

“(1) provides information to the public on—

“(A) the amount of Federal funds being provided to the project; and

“(B) this Act; and

“(2) displays the visual identity mark of the Environmental Improvement Program.”.

SEC. 10. CONFORMING AMENDMENTS.

(a) ADMINISTRATION OF ACQUIRED LAND.—Section 3(b) of Public Law 96–586 (94 Stat. 3384) is amended—

(1) by striking “(b) Lands” and inserting the following:

“(b) ADMINISTRATION OF ACQUIRED LAND.—

“(1) IN GENERAL.—Land”; and

(2) by adding at the end the following:

“(2) INTERCHANGE.—

“(A) IN GENERAL.—Notwithstanding paragraph (1), the Secretary of Agriculture (acting through the Chief of the Forest Service) (referred to in this paragraph as the ‘Secretary’) may interchange (as defined in the first section of Public Law 97–465 (16 U.S.C. 521c)) any land or interest in land within the Lake Tahoe Basin Management Unit described in subparagraph (B) with appropriate units of State government.

“(B) ELIGIBLE LAND.—The land or interest in land referred to in subparagraph (A) is land or an interest in land that the Secretary determines is not subject to efficient administration by the Secretary because of the location or size of the land.

“(C) REQUIREMENTS.—In any interchange under this paragraph, the Secretary shall—

“(i) insert in the applicable deed such terms, covenants, conditions, and reservations as the Secretary determines to be necessary to ensure—

“(I) protection of the public interest, including protection of the scenic, wildlife, and recreational values of the National Forest System; and

“(II) the provision for appropriate access to, and use of, land within the National Forest System;

“(ii) receive land within the Lake Tahoe Basin of approximately equal value (as defined in accordance with section 6(2) of Public Law 97–465 (96 Stat. 2535)); and

“(iii) for the purposes of any environmental assessment—

“(I) assume the maintenance of the environmental status quo; and

“(II) not be required to individually assess each parcel that is managed under the Lake Tahoe Basin Management Unit Urban Lots Program.

“(D) USE OF LAND ACQUIRED BY UNITS OF STATE GOVERNMENT.—Any unit of State government that receives National Forest System land through an exchange or transfer under this paragraph shall not convey the land to any person or entity other than the Federal Government or a State government.”.

(b) INTERAGENCY AGREEMENT FUNDING.—Section 108(g) of title I of division C of the Consolidated Appropriations Act, 2005 (Public Law 108–447; 118 Stat. 2942) is amended by striking “\$25,000,000” and inserting “\$75,000,000”.

Mrs. FEINSTEIN. Mr. President, Lake Tahoe is a national treasure. Her alpine beauty has drawn and inspired people for centuries: artists and poets, John Muir and Mark Twain, and countless millions the world over.

But the “Jewel of the Sierra” is in big trouble. If we don’t act now, we could lose Lake Tahoe—lose it with stunning speed—to several devastating threats.

Invasive species, such as the quagga mussel, could decimate the lake, much as it has Lake Mead. Just one quagga mussel attached to a boat could lay 1 million eggs. An infestation would devastate the lake. It would ruin its biology, foul its beaches, deliver a body

blow to the regional economy. It would turn this "noble sheet of clear water," as Twain put it, into just another dull, gray, polluted body of water. We must get a stranglehold on invasive species before they get a stranglehold on the lake.

Catastrophic wildfires could spiral out of control and consume the basin. The Angora Fire of 2007 destroyed 242 homes and scorched 3,100 acres. It was just a wakeup call. Today, 25 percent of the basin's forests are marred by dead, downed or dying trees. These fuels—combined with hot, tinder-dry conditions—threaten explosive wildfires that could incinerate the basin. We must make their removal a top priority.

Pollution and sedimentation threaten Lake Tahoe's fabled water clarity. In 1968, the first year UC Davis scientists made measurements using a device called a Secchi disk, clarity was measured at an average depth of 102.4 feet. Clarity declined over the next three decades, hitting a low of 64 feet in 1997. We have seen improvements in this decade. This year scientists recorded average clarity at 69.6 feet—roughly within the range of the past 8 years. Scientists say the rate of decline in Lake Tahoe's clarity has slowed. I believe we can build on this. But the gains could easily be reversed if we are not diligent.

Climate change is real and adding to all these problems. It leaves the basin hot and tinder-dry, and vulnerable to wildfires. The lake's surface water temperature has risen 1.5 degrees in 38 years. That means the cyclical deep-water mixing of the lake's waters will occur less frequently, and this could significantly disrupt Lake Tahoe's ecosystem.

We must face facts—we could lose Lake Tahoe.

So it is with a real sense of urgency that today I join with Majority Leader REID as he introduces sweeping legislation to attack these threats. The Lake Tahoe Restoration Act of 2009 is also cosponsored by Senators ENSIGN and BOXER. Representative DEAN HELLER of Nevada is introducing a companion in the House of Representatives.

This legislation would authorize \$415 million over 8 years to mount a robust attack against these threats.

Against invasive species.

Against catastrophic wildfires.

Against the sedimentation and pollution that could forever ruin Lake Tahoe's crystal waters.

With this legislation we can rise to the challenges presented by all these threats, and build upon the gains set in motion by the Lake Tahoe Restoration Act of 2000.

Bottom line—this bill will help ensure the protection and preservation of Lake Tahoe, now and for future generations.

Now, to see where we are headed, it's important to review where we have been. So I would like to touch on the work that's been done so far at Lake Tahoe, work that sets the foundation for the effort that lies ahead.

The Lake Tahoe Restoration Act of 2000 set in motion a partnership between the Federal Government, the States of California and Nevada, local governments and organizations, and the private sector.

All were brought together with a common purpose—to save Lake Tahoe.

I am proud to have been an original sponsor, along with Senators REID and BOXER, and then-Senator Dick Bryan.

This legislation set in motion investments that have enabled us to get a foothold. These investments included \$424 million by the Federal Government, \$612 million by the State of California, \$87 million by the State of Nevada, \$59 million by local governments and \$249 million by the private sector.

It financed more than 300 projects under the Environmental Improvement Program, a combined Federal, State, local, and private-sector partnership to restore Lake Tahoe. One hundred eighty three more projects are in progress.

We have seen improvements across the board:

Water Clarity: Stormwater, erosion-control, and road improvement projects enabled us to begin to tackle the problem of sedimentation and pollution, which enters the lake and degrades its fragile water clarity. This includes improvements to 429 miles of roadways and restoring 739 acres of wetlands. As I noted a moment ago, we have seen gains in water clarity in this decade, and this year's average clarity was 69.6 feet. Scientists report that the rate of decline has slowed. But these gains could easily be reversed if we don't continue and broaden our efforts to keep sediments out of the lake.

Catastrophic Wildfires: One-fourth of the forests of the Tahoe Basin are comprised of dead, downed, and dying trees. Combined with hot, tinder-dry conditions, they can feed massive wildfires that could destroy the basin. Removal of these hazardous fuels has been a priority. The Fire Safe Councils and the local Fire Departments have done good work. They deserve our continued support, and with this legislation, they will get it. As with efforts on water clarity, efforts to clear the forests of hazardous fuels, and to institute sensible fire-safe practices must be continued. So far, hazardous fuels reduction treatment has occurred on 33,549 acres, including 12,256 acres treated since 2006. In the next 8 years, we plan on treating 68,000 additional acres.

Stream Restoration and Wildlife Habitat Improvement: So far more than 13,927 acres of wildlife habitat have been improved and 800 acres of Stream Environment Zones restored. This includes restoration of the Upper Truckee Watershed to reduce the flow of sedimentation into the lake, and re-introduction of the Tahoe Yellow Cress, a plant that grows no place else on Earth.

Much work has been done. Much work lies ahead. It must be done, because the old threats are still there.

And new ones—such as the quagga mussel—have arisen.

The bill introduced today by Senator REID is essential to continuing the good work done to date, and to meeting the threats facing the lake today.

It would authorize \$415 million over 8 years to improve water clarity, reduce risk of catastrophic wildfire, and restore the environment. Specifically, it would do the following:

The bill provides \$248 million over 8 years for the highest priority restoration projects, according to scientific data. The legislation authorizes at least \$72 million for stormwater management and watershed restoration projects scientifically determined to be the most effective ways to improve water clarity. This bill also requires prioritized ranking of environmental restoration projects and authorizes \$136 million for state and local agencies to implement these projects. Now—and this is an important point—this legislation would direct investments to where it is needed most. For example, today we know the major sources of stormwater runoff that send sedimentation into the lake, degrading water clarity. So the monies would go to specific projects addressing California State roads, source of 23 percent of urban particle loads; the city of Lake Tahoe, CA, 22 percent; Washoe County, Nevada, 17 percent; and so forth. In this bill, these stormwater projects are targeted to the areas of greatest concern. Priority projects will improve water quality, forest health, air quality and fish and wildlife habitat around Lake Tahoe. In addition, projects that benefit low-income neighborhoods are encouraged.

The bill authorizes \$136 million over 8 years to reduce the threat of wildfire in Lake Tahoe. This would finance hazardous fuels reduction projects, at \$17 million per year, including grants to local fire agencies. It provides the Forest Service up to \$10 million for fuels projects that have multiple environmental benefits, with an emphasis in restoring Stream Environment Zones. This is critical because, again, these streams feed into the lake, and form a critical link in the ecosystem. We need to pay attention to these stream zones if we hope to restore water clarity. The bill also creates incentives for local communities to have dedicated funding for defensible space inspections and enforcement.

This bill protects Lake Tahoe from the threat of quagga mussels and other invasive aquatic species. Quagga mussels pose a very serious threat to Lake Tahoe, a threat made more intractable because these mussels have been shown to survive in cold waters. And this summer UC scientists reported that they found up to 3,000 Asian clams per square meter at spots between Zephyr Point and Elk Point in Lake Tahoe. The spreading Asian clam population could put sharp shells and rotting algae on the lake's beaches and help spread other invasive species such as quagga mussels.

The bill would authorize \$20 million for watercraft inspections and removal of existing invasive species. It would also prohibit watercraft that have had contact with quagga or zebra mussel-infested waters from entering waters in the Tahoe Basin. As I noted earlier, one quagga or zebra mussel can lay 1 million eggs in a year. This means that a single boat carrying quagga could devastate the lake's biology, local infrastructure, and the local economy. The damage that could be inflicted at Lake Tahoe by a quagga infestation has been estimated in the tens of millions of dollars annually.

The threat to Lake Tahoe cannot be overstated. There were no quagga mussels in Lake Mead 3 years ago. Today there are more than 3 trillion. The infestation is probably irreversible. Quagga mussels attach themselves to underwater structures and clog water intake pipes, canals, aqueducts and dams. They degrade water quality and can alter the taste and smell of drinking water. They can devastate aquatic ecosystems by consuming large amounts of microscopic plants, leaving little or nothing for native fish and other aquatic species. They are a very real threat.

But the fix need not be drastic. Only about 1.5 percent of boats that have been inspected in Lake Tahoe would be prohibited from entering the lake, according to the Tahoe Regional Planning Agency. The bill would also require that all watercraft be inspected and decontaminated to prevent the introduction of invasive aquatic species. Watercraft last launched in Lake Tahoe would be exempted. The Secretary of the Interior can modify these regulations if scientific information leads to new technologies or techniques that would be no less effective than current measures. And there's good news. There's promising news on this front. This week, scientists reported that under proper conditions, plastic "bottom barriers" laid on top of clam beds can kill all Asian clams living there within 28 days. We can fight off these invaders. But it will require drive and imagination—and the help authorized within this bill.

The bill supports reintroduction of the Lahontan Cutthroat Trout. The legislation authorizes \$20 million over 8 years for the Lahontan Cutthroat Trout Recovery Plan. The Lahontan Cutthroat Trout is an iconic species that has an important historic legacy in Lake Tahoe. When John C. Fremont first explored the Truckee River in January of 1844, he called it the Salmon Trout River because he found the Pyramid Lake Lahontan Cutthroat Trout. The trout relied on the Truckee River and its tributaries for their spawning runs in spring, traveling up the entire river's length as far as Lake Tahoe and Donner Lake, where they used the cool, pristine waters and clean gravel beds to lay their eggs. But dams, pollution and overfishing caused the demise of the Lahontan Cutthroat

Trout. Lake Tahoe is one of the historic 11 lakes where Lahontan Cutthroat Trout flourished in the past, and it's a critical part of the strategy to recover the species.

The bill funds scientific research. The legislation authorizes \$30 million over 8 years for scientific programs and research which will produce information on long-term trends in the basin and inform the most cost-effective projects.

The bill prohibits mining operations in the Tahoe Basin. The legislation would prevent the start of any mining operations in the basin, ensuring that the fragile watershed, and Lake Tahoe's water clarity, are not threatened by pollution from mining operations.

The bill increases accountability and oversight. Every project funded by this legislation will have monitoring and assessment to determine the most cost-effective projects and best management practices for future projects. The legislation also requires the Chair of the Federal Partnership to work with the Forest Service, Environmental Protection Agency, Fish and Wildlife Service and regional and state agencies, to prepare an annual report to Congress detailing the status of all projects undertaken, including project scope, budget and justification and overall expenditures and accomplishments. This will ensure that Congress can have oversight on the progress of environmental restoration in Lake Tahoe.

The bill provides for public outreach and education. The Forest Service, Environmental Protection Agency, Fish and Wildlife Service, and Tahoe Regional Planning Agency will implement new public outreach and education programs including encouraging basin residents and visitors to implement defensible space, conducting best management practices for water quality and preventing the introduction and proliferation of invasive species. In addition, the legislation requires signage on federally financed projects to improve public awareness of restoration efforts.

The bill allows for increased efficiency in the management of public land. Under this legislation, the Forest Service would have increased flexibility to exchange land with State agencies which will allow for more cost-efficient management of public land. There is currently a checkerboard pattern of ownership in some areas of the basin. Under this new authority, the Forest Service could exchange land with the California Tahoe Conservancy of approximately equal value without going through a lengthy process to assess the land. For example, if there are several plots of Forest Service land that surround or are adjacent to Tahoe Conservancy land, the Tahoe Conservancy could transfer that land to the Forest Service so that it can be managed more efficiently.

Finally, it is important to note that this bill would increase accountability

and oversight. All projects funded by this legislation would be monitored and assessed to ensure cost-effectiveness. The bill would also require annual reports to Congress detailing the status of all projects—including expenditures and accomplishments. Scientific data will be used to inform every aspect of this legislation. It will help us refine and adjust our restoration programs and ensure that we fund only the highest priority projects.

Let there be no doubt: Lake Tahoe is in grave danger. Grave danger from catastrophic wildfires. Grave danger from invasive species. Grave danger from sedimentation and pollution that threaten to dull her crystal waters.

Mark Twain called Lake Tahoe "the fairest picture the whole world affords." Mr. President, we must not be the generation that lets this picture fall into ruin. We must rise to the challenge, and do all we can to preserve the "Jewel of the Sierra." This legislation will do exactly that.

Mr. ENSIGN. Mr. President, I rise to talk about a bill that has been introduced today by myself, along with Senators REID, FEINSTEIN, and BOXER, that will be the next chapter in our continuing support of one of the most pristine and magnificent areas in the United States.

Since it was formed 2 million years ago, the breathtaking beauty of Lake Tahoe has awed all who have visited its crystal-clear waters and inspiring views. Mark Twain once said about the landmark, "I thought it must surely be the fairest picture the whole world affords." From the Washoe tribe that originally inhabited its shores to John C. Fremont who first saw Lake Tahoe 165 years ago, this alpine lake is a part of our history and a part of our future.

Next year, the Lake Tahoe Restoration Act, originally enacted in 2000, will expire. Over the course of a decade, \$300,000,000 was invested in environmental projects for water clarity, erosion control, and fire suppression. I am proud to have led the effort to amend the Southern Nevada Public Land Management Act in 2003 in order to guarantee funding for the Lake Tahoe Restoration Act from land auctions across southern Nevada. Great work has gone into protecting this national legacy, but we are not done.

The Lake Tahoe Restoration Act of 2009 is our continued commitment to protecting this Nevada treasure for future generations. This effort, a collaboration among Senators FEINSTEIN, REID, BOXER, and me, authorizes \$415 million for 8 years and provides for fuels reduction, Environmental Improvement Program projects, storm water management, and watershed restoration. It devotes significant funding—for the first time ever—to prevent the introduction of quagga and zebra mussels into the lake, one of the greatest threats facing Tahoe today. There is also funding for Lahontan Cutthroat Trout recovery and public outreach and education.

Unfortunately, there are many threats facing Lake Tahoe. This legislation addresses each of those threats in a manner that is fiscally responsible with the most effective and efficient use of Federal funds. Hazardous fuels reduction is one of the most important investments we can make. If you have ever been to Lake Tahoe, you know that one catastrophic fire could wipe out the entire basin. Just 2 years ago, we watched in horror as the Angora fire spread and consumed land, trees, homes, and businesses. It spewed sediment and ash into the lake and turned our worst fears into reality. That is why we must be aggressive with our fuels reduction efforts. This bill also provides grants to Fire Protection Districts in the Lake Tahoe Basin to work in partnership with homeowners on defensible space.

The Lake Tahoe Restoration Act is not just a Federal effort. Nevada, California, and private entities are also partners in the Environmental Improvement Program. In Nevada, where the legislature recently committed 100 million to the Environmental Improvement Program, Lake Tahoe is beloved and treasured. I had the privilege of spending several years of my childhood at the lake. My wife Darlene and I have made it a point to instill the same love for Lake Tahoe in our children. We spend our family's summer vacations there—biking, boating, waterskiing, and rock climbing. To this day, my favorite spot is the Tahoe Rim Trail looking down on Sandy Harbor, where you can see deep into the lake. You can see huge boulders. The clarity is so amazing, it is literally one of the most spectacular views in all the world. There really is no place in the world like Lake Tahoe.

Let us make sure this inheritance is cared for and passed on to future generations.

By Mrs. FEINSTEIN (for herself, Mr. HATCH, Mr. LEAHY, and Mr. GRAHAM):

S. 2725. A bill to provide for fairness for the Federal judiciary; to the Committee on the Judiciary.

Mrs. FEINSTEIN. Mr. President, I rise to introduce the Federal Judicial Fairness Act of 2009.

I want to thank my cosponsors—Senator HATCH, Senator LEAHY, and Senator GRAHAM—for working with me on this important legislation.

The salaries of our Federal judges are eroding in their real buying power over time. This bill would solve that problem.

Over the past 30 years, pay for Federal judges has declined dramatically. Since 1969, the inflation-adjusted salaries of Federal judges have dropped by 24 percent, even as other Federal workers have received an average salary increase of 18 percent.

The way the pay system works now, Federal judges are at a stark disadvantage each year for receiving a cost-of-living adjustment to keep their sala-

ries in pace with inflation. While most Federal civilian employees receive an automatic cost-of-living adjustment, Federal judges do not. Instead, they currently receive an adjustment only if Congress passes a special law and also provides an adjustment for itself.

Judicial salaries should not be ensnared in Congressional-pay politics. Judges should simply be on the same system that other Federal employees are.

That is what this bill would do.

It would repeal "Section 140," which currently requires Congress to pass a special law each year in order for judges to receive a cost-of-living adjustment; and it would provide judges with an automatic, annual cost-of-living adjustment under the same General Schedule used for other Federal civilian employees.

In other words, the bill would simply put Federal judges on an even playing field.

Why is this important?

The drop in real pay for Federal judges has created what Chief Justice John Roberts has called "a Constitutional crisis." More and more judges are being forced to leave the bench for financial reasons during what should be the peak years of their judicial careers.

Recently, the Federal court for the Central District of California lost a U.S. District Judge, Stephen Larson, after only 4 years of service. Larson had been a public servant for over a decade and said that because of his large family, he was finally faced with an impossible choice: He could either continue serving the public as a judge, or he could retire from the bench in order to be able to afford a college education for his children.

Judge Larson's story is not an anomaly. The Federal bench has lost 103 judges since 1990, 80 percent of whom ended up taking other, usually higher-paying, positions in the private sector.

The problem is especially acute in high-cost states like California. In California, State court judges have higher salaries than Federal Article III judges.

The rate at which our Federal courts are losing judges has increased by 24 percent since the 1990s, even as case-loads have gone up and the replacement process has slowed down.

Departures like Judge Larson's are only half the problem. As former Federal judge and former Representative Abner Mikva has pointed out, a primary effect of the erosion of judicial salaries is to discourage our Nation's most talented lawyers from joining the bench in the first place.

In 1969, the salary of a Federal district court judge was about 20 percent higher than the salary of a top law school dean and about 30 percent higher than that of a senior law professor at a top law school. Today, judges make only two-thirds the salary of similarly credentialed law professors, and half the pay of deans.

In many cases, judges make less than first-year associates fresh out of law school.

The bill that I am introducing today does not say that Federal judges should make as much as law firm partners or law school deans. It simply says that Federal judges should not be at a disadvantage vis-à-vis other Federal employees in getting a cost-of-living adjustment each year. It simply ensures that the salary Congress intended judges to receive will keep pace with inflation.

Congress has already delayed action on this issue for too long. Our Nation now risks losing both our most experienced judges and the next generation of talented jurists.

As early as 2003, the nonpartisan National Commission on the Public Service, also known as the Volcker Commission, concluded that "the lag in judicial salaries has gone on too long, and the potential for the diminished quality in American jurisprudence is now too large."

I believe that the legislation that I am introducing today with Senators HATCH, LEAHY, and GRAHAM is a straightforward solution. It is not a raise. It is simply an assurance that judges will not have to jump through special hoops or rely on the politics of Congressional pay in order to get the cost-of-living adjustment received by other Federal employees.

I do not believe that judges should expect to make the kind of salaries available to partners at private law firms. The rewards of public service are of a different kind. But we must ensure that judicial service remains a viable option for the most talented members of the bar.

Basic fairness requires that judges' salaries not diminish over time. It is time to provide these critical public servants with a fair pay system that will guarantee the future health of the judiciary.

I urge my colleagues to support this important legislation.

Mr. President, I ask unanimous consent that the text of the bill be printed in the RECORD.

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

S. 2725

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Federal Judicial Fairness Act of 2009".

SEC. 2. JUDICIAL COST-OF-LIVING INCREASES.

(a) REPEAL OF STATUTORY REQUIREMENT RELATING TO JUDICIAL SALARIES.—Section 140 of the resolution entitled "A Joint Resolution making further continuing appropriations for the fiscal year 1982, and for other purposes," approved December 15, 1981 (Public Law 97-92; 95 Stat. 1200; 28 U.S.C. 461 note), is repealed.

(b) AUTOMATIC SALARY ADJUSTMENTS.—Section 461(a) of title 28, United States Code, is amended to read as follows:

"(a) Effective at the beginning of the first applicable pay period commencing on or

after the first day of the month in which an adjustment takes effect under sections 5303 and 5304 of title 5 in the rates of pay under the General Schedule, each salary rate which is subject to adjustment under this section shall be adjusted by an amount, rounded to the nearest multiple of \$100 (or, if midway between multiples of \$100, to the next higher multiple of \$100) equal to the percentage of such salary rate which corresponds to the overall average percentage of the adjustment in the rates of pay under the General Schedule.”.

AUTHORITY FOR COMMITTEES TO MEET

COMMITTEE ON ENVIRONMENT AND PUBLIC WORKS

Mr. WEBB. Mr. President, I ask unanimous consent that the Committee on Environment and Public Works be authorized to meet during the session of the Senate on November 3, 2009, at 9 a.m. in Room 406 of the Dirksen Senate Office Building.

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

COMMITTEE ON HEALTH, EDUCATION, LABOR, AND PENSIONS

Mr. WEBB. Mr. President, I ask unanimous consent that the Committee on Health, Education, Labor, and Pensions be authorized to meet, during the session of the Senate, to conduct a hearing entitled “Increasing Health Costs Facing Small Businesses” on Tuesday, November 3, 2009. The hearing will commence at 2:30 p.m. in room 106 of the Dirksen Senate Office Building.

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

SELECT COMMITTEE ON INTELLIGENCE

Mr. WEBB. Mr. President, I ask unanimous consent that the Select Committee on Intelligence be authorized to meet during the session of the Senate on November 3, 2009, at 2:30 p.m.

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

PRIVILEGES OF THE FLOOR

Mr. CRAPO. Mr. President, I ask unanimous consent that an intern from my office, Matthew Spencer, be granted floor privileges.

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

NATIONAL ADOPTION DAY AND NATIONAL ADOPTION MONTH

Mr. DURBIN. Mr. President, I ask unanimous consent that the HELP Committee be discharged from further consideration of S. Res. 291, and the Senate proceed to its immediate consideration.

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

The clerk will report the resolution by title.

The legislative clerk read as follows:

A resolution (S. Res. 291) expressing support for the goals of National Adoption Day and National Adoption Month by promoting national awareness of adoption and the children awaiting families, celebrating children and families involved in adoption, and encouraging Americans to secure safety, permanency, and well-being for all children.

There being no objection, the Senate proceeded to consider the resolution.

Mr. DURBIN. Mr. President, I ask unanimous consent the resolution be agreed to, the preamble be agreed to, the motions to reconsider be laid upon the table, with no intervening action or debate, and any statements be printed in the RECORD.

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

The resolution (S. Res. 291) was agreed to.

The preamble was agreed to.

The resolution, with its preamble, reads as follows:

S. RES. 291

Whereas there are approximately 510,000 children in the foster care system in the United States, approximately 129,000 of whom are waiting for families to adopt them;

Whereas 61 percent of the children in foster care are age 10 or younger;

Whereas the average length of time a child spends in foster care is over 3 years;

Whereas, for many foster children, the wait for a loving family in which they are nurtured, comforted, and protected seems endless;

Whereas the number of youth who “age out” of foster care by reaching adulthood without being placed in a permanent home has continued to increase since 1998, and more than 26,000 foster youth age out every year;

Whereas every day loving and nurturing families are strengthened and expanded when committed and dedicated individuals make an important difference in the life of a child through adoption;

Whereas a 2007 survey conducted by the Dave Thomas Foundation for Adoption demonstrated that though “Americans overwhelmingly support the concept of adoption, and in particular foster care adoption . . . foster care adoptions have not increased significantly over the past five years”;

Whereas, while 4 in 10 Americans have considered adoption, a majority of Americans have misperceptions about the process of adopting children from foster care and the children who are eligible for adoption;

Whereas 71 percent of those who have considered adoption consider adopting children from foster care above other forms of adoption;

Whereas 45 percent of Americans believe that children enter the foster care system because of juvenile delinquency, when in reality the vast majority of children who have entered the foster care system were victims of neglect, abandonment, or abuse;

Whereas 46 percent of Americans believe that foster care adoption is expensive, when in reality there is no substantial cost for adopting from foster care and financial support is available to adoptive parents after the adoption is finalized;

Whereas both National Adoption Day and National Adoption Month occur in November;

Whereas National Adoption Day is a collective national effort to find permanent, loving families for children in the foster care system;

Whereas, since the first National Adoption Day in 2000, more than 25,000 children have joined forever families during National Adoption Day;

Whereas, in 2008, adoptions were finalized for over 4,500 children through more than 325 National Adoption Day events in all 50 States, the District of Columbia, Puerto Rico, and Guam; and

Whereas the President traditionally issues an annual proclamation to declare November as National Adoption Month, and National Adoption Day is on November 21, 2009: Now, therefore, be it

Resolved, That the Senate—

(1) supports the goals and ideals of National Adoption Day and National Adoption Month;

(2) recognizes that every child should have a permanent and loving family; and

(3) encourages the citizens of the United States to consider adoption during the month of November and all throughout the year.

ORDERS FOR WEDNESDAY, NOVEMBER 4, 2009

Mr. DURBIN. I ask unanimous consent that when the Senate completes its business today, it adjourn until 9:30 a.m. Wednesday, November 4; that following the prayer and pledge, the Journal of proceedings be approved to date, the morning hour be deemed expired, the time for the two leaders be reserved for their use later in the day, and the Senate proceed to a period of morning business for 2 hours with Senators permitted to speak therein for up to 10 minutes each, with the time equally divided and controlled between the two leaders or their designees, with the Republicans controlling the first half and the majority controlling the final half; and that following morning business the Senate resume consideration of H.R. 3548, the Worker, Homeownership, and Business Assistance Act of 2009, as provided for under the previous order.

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

PROGRAM

Mr. DURBIN. Under the previous order, following the adoption of the substitute amendment tomorrow morning, the Senate will proceed to a closure vote on H.R. 3548, as amended. This vote will be the first vote of the day and will begin at 12:15 p.m.

ADJOURNMENT UNTIL 9:30 A.M. TOMORROW

Mr. DURBIN. Mr. President, if there is no further business to come before the Senate, I ask unanimous consent it adjourn under the previous order.

There being no objection, the Senate, at 7:02 p.m., adjourned until Wednesday, November 4, 2009, at 9:30 a.m.

NOMINATIONS

Executive nominations received by
the Senate:

EQUAL EMPLOYMENT OPPORTUNITY COMMISSION
VICTORIA A. LIPNIC, OF VIRGINIA, TO BE A MEMBER OF
THE EQUAL EMPLOYMENT OPPORTUNITY COMMISSION
FOR THE REMAINDER OF THE TERM EXPIRING JULY 1,
2010, VICE NAOMI CHURCHILL EARP.
VICTORIA A. LIPNIC, OF VIRGINIA, TO BE A MEMBER OF
THE EQUAL EMPLOYMENT OPPORTUNITY COMMISSION
FOR A TERM EXPIRING JULY 1, 2015. (REAPPOINTMENT)

ADMINISTRATIVE CONFERENCE OF THE UNITED
STATES
PAUL R. VERKUIL, OF FLORIDA, TO BE CHAIRMAN OF
THE ADMINISTRATIVE CONFERENCE OF THE UNITED
STATES FOR THE TERM OF FIVE YEARS, VICE
THOMASINA V. ROGERS, TERM EXPIRED.