

or impending deficiencies in various specialties, including cardiology, rheumatology, and neurosurgery, as well as primary care.

I think most Americans understand the significance of this situation. We can build all of the medical facilities we want, but they serve no purpose if there are not enough medical professionals to work in these hospitals and clinics.

That is where the VA and other medical facilities, be they public, private or nonprofit, run into each other. They are all competing for a pool of health care professionals that is not growing, and that is not growing as quickly as it is needed. I am concerned that ultimately this will diminish the quality of health care that is delivered to our Nation's veterans and, of course, to all Americans.

So how do we address the health care needs of all Americans when faced with these challenges? I think we need to examine how we can integrate VA facilities with other health care facilities to better serve not only veterans but entire communities. Is there a way that we can utilize existing VA facilities to serve all of those living in rural communities that struggle to recruit health care professionals without compromising care for veterans? Is there a way we can change the VA health care system to enable veterans to receive care at their local non-VA health care providers?

I know these kinds of changes will not happen quickly and they will not happen easily. Earlier this session I introduced two pieces of legislation that proposed dramatic changes in the VA health care system. I will say that these proposals were not enthusiastically welcomed by many of those entrenched in the veteran advocacy community. S. 815, the Veterans Health Care Empowerment Act, would allow veterans with a service-connected disability to receive hospital or other medical care at any Medicare or TRICARE-eligible facility.

When I introduced this legislation last March, I stated my belief that most veterans would choose to continue to receive health care at a VA facility. I still believe that is true. But I also know this legislation would enhance access of care for veterans who do not live near a VA facility by serving them in the communities in which they live.

I also introduced legislation, S. 441, the State Veterans Home Modernization Act, which would allow, instead of building veterans homes, noninstitutional care and daycare and respite care for our veterans. I know my time is now limited, so let me close with this thought.

Earlier this year, a group of young Idaho Iraqi and Afghan vets came to my office concerned about health care. One of them pulled from his pocket a credit card and said: Senator, why cannot this become a VA health care card that allows me access to health care in

my community paid for by the Veterans' Administration because I have, upon my service and upon my disability, been granted access to the VA health care system? I live in rural Idaho. But why must I travel miles when there are hospitals and clinics all around me? I cannot have access to them.

What is wrong with that picture? What is wrong with that picture is that this wonderful, marvelous VA health care system is a static, in-place system that does not have the flexibility that modern health care speaks to and that it must have in the future.

I am retiring from the Senate, so these pieces of legislation will not be introduced again. But I am challenging my colleagues, as you stand and so proudly speak of your concern for veterans and your concern for their care, that you step away from the bricks and mortar and from the rigidity of the activist advocacy groups who think that health care for veterans can only be delivered in one form. Modernize it. Change it. Give it flexibility if we want to give ultimate health care to our veterans, and if we want to integrate non-veterans into that quality health care system in a way that strengthens it, improves it, and sustains it in an economical fashion.

I yield the floor.

RECESS SUBJECT TO THE CALL OF THE CHAIR

The ACTING PRESIDENT pro tempore. Under the previous order, the Senate stands in recess subject to the call of the Chair.

There being no objection, the Senate, at 2:29 p.m., recessed subject to the call of the Chair and reassembled at 3:12 p.m. when called to order by the Presiding Officer (Mr. TESTER).

The PRESIDING OFFICER. The Republican leader is recognized.

MORNING BUSINESS

Mr. MCCONNELL. Mr. President, we are in morning business, right?

The PRESIDING OFFICER. We are in a period of morning business.

ECONOMIC STABILIZATION PLAN

Mr. MCCONNELL. Mr. President, Senator McCain has just announced he is willing to suspend his campaign, set politics aside, and sit down with all sides to come to a solution to the looming threat to our economy. That is really an outstanding idea. The threat to Americans and their homes, savings, and retirements is really not a partisan problem, and it will not be fixed with a partisan approach. Americans want to know that their home values and college funds and retirement accounts are safe; in other words, that the problems on Wall Street are not going to spread to Main Street. So I appreciate my colleague's proposal,

and I hope it will be given serious consideration.

My constituents are not calling and asking me to help their brokers. They are asking for help to protect their mortgages, their ability to grow their small businesses, their ability to send their kids to college. And they are worried about the security of their life savings. I am concerned that if we do nothing, their savings, their ability to buy a home or finance college, and their financial security are all at very serious risk.

These are not ordinary circumstances, and if this economic stabilization plan was nothing but a bailout for Wall Street bankers, I would not have anything to do with it.

The only reason to support this action is to save ordinary Americans from an economic disaster that they had absolutely no hand whatsoever in creating. And to say that I am more than a little mad at this situation—created largely by bad decisions of those in the subprime housing market—is an understatement.

But if we are to take action, then it needs to put Main Street ahead of Wall Street. This isn't about bailing out investment bankers; this is about keeping the U.S. economy from entering a downward spiral. To that end, any action we take must include the following: No. 1, limits on executive compensation; No. 2, debt reduction; No. 3, congressional oversight and transparency. And yes, of course, taxpayer protection.

With regard to executive compensation, if weak companies are seeking Government assistance, the taxpayers should expect no less than a firm limit on what kind of executive compensation might be possible for those involved in these distressed companies.

Debt reduction. Any proceeds that are earned from the Government buying these assets and then selling them in the marketplace must be used to reduce the national debt. These revenues must not be used to pay for unrelated and unnecessary pet projects.

Congressional oversight and transparency. Americans need to be able to see how their money is being used and that it is being managed wisely. We in Congress will watch where every dollar goes to ensure there is no waste and no funny business.

Taxpayer protection. Americans have a right to expect that there is no fraud or abuse. It is the taxpayer and the American economy we are protecting, and we must take steps to ensure they are protected first.

The American people who were not involved in creating this situation need to be protected from the mistakes of those who were. Main Street needs to be insulated from Wall Street. That is what this plan is meant to accomplish. But we must insist on the protections I have just enumerated.

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

The PRESIDING OFFICER. The clerk will call the roll.