bureaucracy that denies, delays, and ration health care is not the reform they want. They don’t want the people who brought us the Department of Motor Vehicles making life-and-death decisions for them, their children, their spouses, and their parents. They don’t want to end up like Bruce Hardy or Shona Holmes.

GUANTANAMO BAY

Mr. MCCONNELL. Madam President, on a very timely subject, we understand that discussions are underway on the conference report on the supplemental. I think it is important to remind everybody in the House and in the Senate that, just a few weeks ago, the Senate answered the question that has concerned Americans and that is this: whether the terrorist detainees at Guantanamo Bay, Cuba, should be transferred state side to facilities that could be in or near their communities.

By a vote of 94 to 3, the Senate said: No way, not without a plan. It passed the bipartisan Inouye-Inhofe amendment that bars the administration from transferring these terrorist detainees into the United States.

This is not a change in the Senate’s position. Just a few years ago, the Senate, by a vote of 94 to 3, said the same thing: We should not move some of the world’s most dangerous terrorists out of Guantanamo Bay, modern, safe, and secure facility into our country.

The views of the Senate are abundantly clear. Nevertheless, it has been reported that congressional Democrats are privately considering the entreaties of the White House to repatriate these very clear views and to allow terrorist detainees to come into the United States.

What has changed? What has changed in the last couple weeks? The views of the American people have not changed. In fact, they are more firmly opposed to this now than they were 2 months ago. Nor have the dangers and difficulties of moving the detainees into the United States.

Mr. COBURN. Madam President, a couple weeks ago, testified about the dangers of holding these terrorists in the United States. Most of us are familiar with the problems Alexandria, VA, experienced with the trial of just one terrorist: security, transportation problems, logistical problems, commercial problems and on and on. Indeed, if you want to try these detainees by military commission—something I support—there is no better place than the $12 million modern courtroom right there at Guantanamo Bay.

The administration’s supporters point to Supermax as a place to house these terrorists. But our colleagues from Colorado don’t support moving them there, nor is there anyplace in the facility to put them.

The Denver Post reports there is just one bed open at Supermax—just one. That means these terrorists would have to come somewhere else, perhaps to a facility in your State.

In the world would Senate Democrats be considering the idea of giving the administration millions of dollars for doing this, especially since we still don’t have a plan? According to the Democratic leadership, it is because keeping terrorists at Guantanamo is a “problem politically” for the administration.

That is most curious. Assuming this is a political problem, with whom does the administration have it? It is not with the American people. They don’t want Guantanamo closed, and they certainly don’t want its inmates transferred here. It is not with our colleagues from Colorado. They don’t want these detainees transferred into their State any more than the rest of America does.

It seems like the administration’s “political problem” is a diplomatic one with the Europeans, who want the United States to accept some of these dangerous terrorists before they will.

It is not in the interest of the United States to compromise our security to appease our European critics.

Similar to most Americans, I am for keeping Guantanamo open. It is safe and secure away from our civilian population. Perhaps I could be persuaded to change my mind if the administration comes up with a plan. They have time to do that and still receive full funding a plan through the regular order when we take up the 2010 appropriations bills in a few months.

But we should not rush to give the administration a blank check to do something, sight unseen, that Americans overwhelmingly oppose.

As Senate Democrats have often said, the Senate is not a rubberstamp. We should not flip-flop on our vote of a few weeks ago.

I yield the floor.

RESERVATION OF LEADER TIME

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

MORNING BUSINESS

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

HEALTH CARE

Mr. COBURN. Madam President, I have given a lot of thought to this, and I appreciate what the leader said about health care. I am the only practicing physician in the Senate. We have one of our colleagues who is no longer practicing. But it struck me, as a physician, that what we should do in health care ought to be what patients want us to do. What is it they want—perhaps the very personal aspect of health care—would like to see?

There is no question we have big problems in health care. There is discussion in the insurance side with Medicare and Medicaid, and the lack of access. But what is it we should be talking about that will solve the insecurities, the problems, the concerns of the American people? I wish to go through with you a little list of items I think individuals in this country would agree with on how we ought to handle health care.

First, we ought to make sure health care is available to everybody in this country and that it is affordable. We have this discussion on the Senate floor on health care, 17.5 percent of our GDP. Yet we know that out of that $2.4 trillion, $700 billion doesn’t help anybody get well and doesn’t prevent anybody from getting sick. We now have an administration that wants to spend another $1.3 trillion over the next 10 years, or $130 billion more per year, to try to solve this problem. The money is not the problem. We know, in Medicare alone, there is $70 billion to $80 billion in fraud and in Medicaid $40 billion worth of fraud and that is in the government-run programs.

The second thing we ought to make sure of is that everybody can be covered. We can do that with the money we have today. We can make sure everybody gets covered. The other thing we ought to do is make sure everybody who has a plan they like today can keep it. After all, health care isn’t about health care, it is about individuals, it is about persons, what they desire, what they need, and when they need it.

We can, in fact, fix the fraud, waste, and abuse in health care. It is something we can do. Not long ago, we discovered we had one wheelchair that had been sold multiple times by one durable medical equipment company in Florida, but it was never delivered, and they collected $5 million from Medicare for that one wheelchair. That is just the tip of the iceberg of the fraud. We know this thing is needed to be done, and that patients want us to do—because we have a government-run system for 60 percent of our health care—perhaps we ought to prioritize wellness and prevention. Do you realize Medicare doesn’t pay for wellness and prevention and Medicaid doesn’t pay for wellness and prevention? So we don’t have wellness and prevention. What that leads to is additional chronic disease, which we then will have to medically treat—a disease we could have prevented.

Another issue I was thinking about—especially with my patients—is that