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Senate

The Senate met at 9:30 a.m. and was called to order by the Honorable KIRSTEN E. GILLIBRAND, a Senator from the State of New York.

PRAYER

The PRESIDING OFFICER. Today's opening prayer will be offered by Rev. Dr. James L. Merrell, retired Disciples of Christ journalist, serving as pastor of Trinity United Church of Christ, St. Louis, MO.

The guest Chaplain offered the following prayer:

Creator God, source of all things in heaven and on Earth, give wisdom and strength to those who seek. We come today with fresh anticipation. We assemble in this place where history is made, knowing that Your presence has guided those serving here so faithfully in challenging decades past. We give thanks that Your sure and merciful hand continues to uphold the life of our blessed Nation. We are grateful for the light and love You never fail to show to those who accept their calling as Senators. Now we would ask You to continue empowering this body to make decisions in keeping with Your purpose. Amen.

PLEDGE OF ALLEGIANCE

The Honorable KIRSTEN E. GILLIBRAND 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 bill clerk read the following letter:

U.S. SENATE,
PRESIDENT PRO TEMPORE,
Washington, DC, October 15, 2009.

To the Senate:

Under the provisions of rule I, paragraph 3, of the Standing Rules of the Senate, I hereby appoint the Honorable KIRSTEN E. GILLIBRAND, a Senator from the State of New York, to perform the duties of the Chair.

ROBERT C. BYRD,
President pro tempore.

Mrs. GILLIBRAND thereupon assumed the chair as Acting President pro tempore.

RECOGNITION OF THE MAJORITY LEADER

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

Mr. REID. Madam President, under my leader time, I yield to Mr. LUGAR, the Senator from Indiana.

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

The Senator from Indiana.

WELCOMING THE GUEST CHAPLAIN

Mr. LUGAR. Madam President, I thank the distinguished majority leader for the opportunity to thank my friend, Rev. James Merrell, for opening our session with prayer this morning. He has been a very dear friend from high school days onward. We attended Shortridge High School in Indianapolis, IN. He was 2 years older than I and was already well established with the Shortridge Daily Echo, a daily high school newspaper at Shortridge, writing for the Tuesday paper. I was grateful for the opportunity to write weekly for the Thursday paper. We shared experiences with the late Jean Grubb, a distinguished teacher of journalism at our school. Then likewise we were mentored by C.C. Shoemaker, the debate coach at Shortridge High School.

Jim proceeded on to distinguished honors at Indiana University and then

on to the Disciples of Christ Church in his ministry. He was most distinguished as the editor for many years of World Call and then established an additional paper at the Church of Christ on his own, The Disciple. He has been a pastor in St. Louis for many years. He has many mutual friends from Indianapolis.

I am delighted he could be a part of our session today. I greet Jim Merrell as a very dear friend, someone I respect as a clergyman, a writer, and debater. I am thankful to the Senate Chaplain for inviting him to be with us.

I thank the majority leader for yielding.

The ACTING PRESIDENT pro tempore. The majority leader.

SCHEDULE

Mr. REID. Following leader remarks, there will be a period of morning business for 2 hours. Republicans will control the first hour and the majority will control the second hour. Following morning business, the Senate will resume consideration of the conference report to accompany H.R. 3183, which is the Energy and Water appropriations bill. We hope to reach agreement that would allow us to yield back postcloture time and vote on the conference report this afternoon. We are also working on an agreement to consider conference reports on the Homeland Security bill and the Defense authorization bill. Senators will be notified when any votes are scheduled.

RECOGNITION OF THE MINORITY LEADER

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

HEALTH CARE WEEK XIII, DAY III

Mr. McCONNELL. Madam President, from the very outset of the debate over

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



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health care, Americans have made it known that they support reform. But over the course of the past several months, Americans have come to realize that not all reforms are created equal.

And while they still support reform, very few of them support the specific proposals they have seen from Democrats in Washington. Americans want reform. But higher premiums, higher taxes, and cutting Medicare is not reform.

Somewhere along the way, the terms of the debate shifted.

At the outset, nobody expected that reform would lead to higher premiums. In fact, most people thought the whole point was to reduce costs, not raise them.

At the outset of this debate, nobody expected they would be paying higher taxes, particularly in the midst of the worst recession in generations. Yet that is what they are now being told, that middle class Americans will take the brunt of a whole slew of new taxes to pay for a trillion-dollar experiment with our health care system.

And at the outset of this debate, seniors had no idea they would be asked to help foot the bill for this massive experiment in government health care through cuts to Medicare. Yet that is precisely what they're now being told—that Medicare will be cut by half a trillion dollars, whether the 40 million seniors who depend on it like it or not.

Let us focus for a moment on those Medicare cuts.

For months, Americans have been hearing that if they like the health care plans they have, they will be able to keep them. Evidently, that pledge didn't apply to the millions of seniors currently enrolled in the popular Medicare Advantage program, because the Finance Committee bill explicitly calls for more than \$130 billion in cuts to Medicare Advantage, cuts that will undoubtedly alter the plans that more than 11 million seniors on Medicare Advantage now enjoy.

These cuts might lead to fewer benefits; or they might force seniors off their plans altogether. But under either scenario, seniors would no longer enjoy the plans they have and like. No one expected that at the outset of this debate.

And this is just a fraction of the Medicare cuts that the Finance Committee calls for as the cost of reform. Other cuts include more than \$120 billion in cuts to hospitals that care for seniors. The Kentucky Hospital Association warned earlier this year that these kinds of cuts would affect the services hospitals provide in my State. I am sure if my colleagues talked to doctors and hospitals back home, they would hear the same.

Then there is more than \$40 billion in cuts to home health agencies which give seniors the option of receiving care in their homes.

The bill also takes another \$15 billion in cuts to nursing home which care for

seniors who can no longer be cared for at home.

And then there is nearly \$8 billion in cuts to hospice care.

Nobody expected a free lunch when it came to health care reform. But no one expected this either. Americans are doing the cost-benefit analysis, and they don't think half a trillion dollars in cuts to Medicare is an acceptable tradeoff, especially since none of these cuts would do anything to strengthen and protect Medicare.

It would be one thing if Medicare reforms were used to ensure its solvency for future generations. But the proposals we have seen do nothing of the sort. Instead, they use Medicare as a piggy bank to create another government program that will undoubtedly face the same financial stresses that we see in Medicare and in just about every other entitlement program.

The President thought this was a bad idea on the campaign trail. It is still a bad idea today.

Americans know the dangers of holding off on Medicare reform. When Medicare Part A was created in 1965, it was projected to spend out \$9.1 billion on hospital services and related administration in 1990. As it turned out, costs that year were more than seven times the original estimates. Forty-four years after its creation, Medicare is already paying out more money than it is taking in. It is already committed to spend nearly \$40 trillion it doesn't have, and current forecasts indicate that Medicare will face bankruptcy in less than a decade.

It is time to restore this vital program for the sake of our seniors, not raid it to pay for a massive government-driven experiment that could make our health care worse.

The American people want reform. But higher premiums, higher taxes, and cutting Medicare, that is not reform. That is why they overwhelmingly oppose this proposal, and they shouldn't have to apologize for it. They should expect Congress to listen to them, and keep up the pressure until Congress listens.

I yield the floor.

RESERVATION OF LEADER TIME

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

MORNING BUSINESS

The ACTING PRESIDENT pro tempore. Under the previous order, the Senate will 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 hour and the majority controlling the final hour.

The Senator from Arizona.

HEALTH CARE REFORM

Mr. KYL. Madam President, I wish to take 10 minutes this morning to respond to some comments made by my friend from Illinois, my counterpart, the Democratic whip, comments made in response to Minority Leader MCCONNELL's remarks earlier this week.

Yesterday, Senator DURBIN made a couple of points. One I specifically want to focus on has to do with the national debt. Senator MCCONNELL had talked about the fact that spending by the Democrats, especially with regard to proposals for new health care legislation, was going to increase the national debt. The Senator from Illinois came back and said he agreed the debt is too high, but he said we need to understand that the reason it is too high is the Bush administration—that, in effect, President Obama inherited the debt. That is not exactly accurate. Here are the actual facts regarding the debt today. On Tuesday, 2 days ago, the Treasury Department reported that the deficit this past fiscal year totaled \$1.4 trillion. That is a figure higher than the previous 4 years combined. The previous 4 years were Bush years. Last year was primarily the Obama administration.

The Republican leader said:

Since January 20 of this year, the Federal Government has borrowed \$1.2 trillion or more than \$10,500 for every household in the United States.

What is the significance of January 20? That is the day President Obama was sworn in as President.

Under the President's budget that every Democrat voted for this year, we will have budget shortfalls or deficits averaging \$1 trillion each year for the next 10 years. We can't blame this on the Bush administration if spending was as much as the last 4 years combined and the budget shortfall is going to be \$1 trillion for the next 10 years. It was never \$1 trillion. It wasn't even half that much ever under President Bush.

Let me put this in perspective. The President's budget, supported by every Democrat, will double the national debt in 5 years, increasing it from \$5.8 trillion to \$11.7 trillion. It would almost triple the debt in 10 years. These are estimates from the Congressional Budget Office. By contrast, look at the last 219 years in the history of the country. From 1789 to 2008, Americans amassed a \$5.8 trillion national debt. In other words, in 5 years, this President will have a debt equal to all of the previous Presidents from George Washington all the way through George W. Bush. We cannot claim that is inherited from the past.

This President's deficit spending is not sustainable. By the end of the budget period, the debt will have skyrocketed to 82 percent of the gross domestic product, which everyone agrees, including the President's advisers, is not sustainable. Think about the interest payments. Think about your own credit card interest payments for interest payments on debt. These will soon

be the single largest item in the Federal budget.

What if debt interest payments were the single largest item in your own family budget? More than \$800 billion a year in 10 years will be spent on interest alone—\$800 billion a year. That eclipses what we spend on national security. It is four times as much as we spend on education, energy, and transportation combined. These are not abstract numbers. This will have an effect on every American.

In 2019, under the President's plan, each U.S. household's share of the Federal debt will be more than \$130,000. That is more than most of us owe on our mortgages. Notably, since the Democrats have taken over the Congress—we are not talking about "inherited" now—the Congress has increased the debt limit four times, and the administration has made a request for a fifth increase that we anticipate occurring this November.

So should we be worried about the debt? I believe so. Was it a problem inherited from the Bush administration? No. The real problem is what we have done since January 20, since President Obama came into office, since Democrats have been in control of the Congress and the adoption of a budget which is going to triple our debt in just 10 years. And in 5 years we will have more debt than every single President and Congress in the entire history of the country right up through George W. Bush accumulated—in one budget of this administration.

The other thing I would like to speak to is comments the Senator from Illinois made on Tuesday. Again, he was critical of Senator McCONNELL, who noted that all of these bills passed in the House and in the Senate were passed on essentially partisan votes, and that Republican ideas had been ignored. My colleague said: Well, in the HELP Committee there were 150 amendments adopted that had been offered by Republicans. The vast majority of those were purely technical corrections, misspellings, typos, and things of that sort. I do not think anybody can contend that Republicans have had a fair voice in the creation of the health reform legislation around here.

Then there was an attack on the messengers. There have been several reports that demonstrate that insurance premiums are going to go up, not down, in this legislation. The attack was not to contend that the figures were wrong but, rather, to attack the messengers—in two cases—to say: Well, the insurance industry actually paid for some of those reports. Does that make the reports wrong? It might raise a question in our minds as to whether they are appropriate, but how about analyzing them to see whether they are wrong.

The majority whip then went on to say that the Congressional Budget Office even disagrees with the Republican leader and predicted that the health care premiums would actually not go up. Specifically, he said: "They pre-

dicted if health care reform went through, health care insurance premiums would go up" on American families.

The Senator from Illinois said:

Well, there are those who disagree, people with the Congressional Budget Office and others. . . .

Let me quote the Congressional Budget Office. It does not disagree. The Congressional Budget Office specifically supports what Senator McCONNELL said:

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

CBO was very clear in conversations we have had with them that specifically with regard to American families premiums will be higher.

So the Senator from Kentucky, the Republican leader, was correct and the Democratic whip was incorrect. CBO says premiums will be higher.

This report issued yesterday from Oliver Wyman said premiums will increase in the individual market approximately \$1,500 for single coverage and \$3,300 for family coverage every year.

In my State and some other States it is even worse. For Arizona, Idaho, Kentucky, Virginia, and the District of Columbia, we will have the highest premium increases, where premiums could increase by as much as \$2,619 for individuals and—think about this—\$7,426 for families. Think about that as a premium increase under a bill that is supposed to help us afford our health care, but we get socked with a \$7,000 increase in the health care premium for our families.

Part of this is because of the minimum benefit requirements the bill provides for. They note this will increase costs about 10 percent in the individual market and 3 percent in the small group market. This is under the Baucus bill. Small employers purchasing new policies in this new market will experience premiums that are up to 19 percent higher in year 5 of the reform. Premiums are going up.

Milliman, another independent actuarial firm, found that the average actuarial value of a high deductible plan is 48 percent. In Arizona, incidentally, it is 61 percent. What does this mean? Under the legislation, the lowest insurance plan value is defined by the Federal Government. It has to be 65 percent. That means there will be an increase in health insurance premiums by 35 percent for those with high deductible plans. Individuals enrolled in individual health plans with a lower actuarial value than 65 percent will see their premiums increase by 18 percent. So to the allegation that somehow Republicans are wrong when we criticize the Baucus bill for raising individual and family insurance premiums, the reality is, all the experts agree, including the Congressional Budget Office.

Then there was another question that had to do with medical devices. The reality is, because of taxes imposed in the Baucus bill, there are going to be a

lot of increased expenses, including expenses that are going to be passed on to individuals. One of those is in the medical device industry.

Let me quote a letter that some Democratic colleagues of ours—Senators KLOBUCHAR, BAYH, and FRANKEN and then Senator LUGAR on the Republican side sent to Chairman BAUCUS. I am quoting from it:

[T]he provision would harm economic development and health care innovation nationwide.

[W]e are concerned that this tax will stifle technological innovations that can improve patient outcomes and lower health care costs.

It is also a fact, as I said, that these expenses are passed through. There are several studies that demonstrate that—as well as the comments of the Congressional Budget Office and the Joint Tax Committee—all of whom say it is virtually a dollar-for-dollar pass-through. So if we raise taxes on the medical device industry by \$40 billion, then people are going to be paying \$40 billion more in insurance premiums because the cost of those medical devices will be reflected in the cost to the insurer and, therefore, the cost to the people who are paying the premiums.

There was a concern expressed by my colleague from Illinois that insurance companies will raise their premiums—the point I have been making—but they will do it in a collusive fashion and maybe we should look at the anti-trust laws in that regard.

Well, they do not have to collude to raise their premiums. Every one of them has an incentive—as the Congressional Budget Office and these other reports demonstrate—for them to be able to stay in business; they have to be able to raise their premiums to reflect their cost of doing business. They do not have to collude to do that.

Then the Democratic whip made what I would say is a rather odd argument: Republicans have been critical of the concept of government-run insurance. The Democratic whip said: Well, we have government-run insurance—Federal employees and Members of Congress—and we think it is a good program. And he said under the program, there are nine different health plans to choose from, and we pick the best one for us, and the employer pays part of it and we pay part of it, and so on.

That certainly is all true, except for one thing: It is not government run. As he noted, there are nine private plans. This is no different than any other employer. Most large employers, such as the Federal Government, give their employees a choice of two, three, four, maybe sometimes as many as nine or ten plans if they are a big enough employer. The Federal Government is a huge employer, so we can offer nine different plans. But there is no Federal insurance. This is not federally run.

This is the Federal Government as the employer doing the same thing

that Honeywell as an employer would do for its employees. It gets three or four insurance companies with different kinds of plans and says to its employees: We will pay for part of the cost. You get to pay for the rest of it. That is not federally run or government-run insurance. So the Democratic whip is simply wrong when he says the plan Members of Congress and Federal employees have is government run. That is simply not true.

I mentioned the medical device issue. I would note Senator KERRY is another one of our colleagues who, like me and like others, has expressed concerns about this issue because of the fact that the taxes paid by the medical device industry will, in fact, be passed on to consumers.

Finally, the Democratic whip asked where the Republican health care plan is. I do not know how many times we have to repeat this, but let me do it one more time. Time and time again, we have said: Here are things we believe will reduce the cost of health care, will help people get coverage who do not have it now, and will reform the system.

What are some of the ideas we have proposed? By the way, each of these were offered as amendments in the HELP Committee and in the Finance Committee and in the House of Representatives, and Democrats voted against every one of them every time. So it is not as if we do not have ideas and alternatives that would solve specific problems, it is that the Democrats do not like the ideas and, therefore, have rejected them. But I will repeat a couple of them one more time.

Republicans lead with medical malpractice reform, to try to do something about this jackpot justice system where lawyers end up getting most of the money, and doctors and hospitals have to practice defensive medicine to anticipate litigation and to be able to protect themselves against it. There are estimates: as much as 10 cent out of every health care dollar spent is on premiums that doctors have to pay for their liability insurance. There is over \$100 billion a year that can be saved from defensive medicine practices if we are able to have medical malpractice reform. The CBO even scored it—in a very narrow way—at \$54 billion just in savings to the Federal Government.

As my colleague, Senator ENSIGN, pointed out in an exchange with the CBO Director in the Finance Committee, one could anticipate that about twice that much savings would occur if we add in all of the savings to the private sector as well. So we could be talking about well over \$100 billion in savings. This is a huge amount of money. It does not cost the Federal Government a dime. It makes the system more fair, and it is a savings that can be passed on in the form of lower premiums and lower health care costs.

Another idea we have talked about a lot—you have heard it—the sale of insurance across State lines. Let's make

the insurance companies have to compete with each other. Sometimes they have little monopolies; there are only two or three companies in a particular State. Well, if we could buy our health insurance like we can buy our casualty insurance, our homes or our car insurance, from any company anywhere in the country, those insurance companies in our States would have to be better competitors. My guess is they would lower our rates and they would give us better benefits. That competition would help us. Again, it does not cost a dime.

How about association health plans, letting small businesses and groups band together to create larger risk pools? Risk pools help define the coverage. If we have a big risk pool, chances are we can get cheaper coverage. If we have a small risk pool, it is hard. That is why small businesses find it so hard. So we talk about larger risk pools through association health plans.

Madam President, I think I have exceeded my 10 minutes. We could go on and on with Republican ideas that have been proposed but get shot down by the Democrats. So it is not a matter of looking for a Republican proposal.

Let me conclude with this: It is true that Republicans will probably not propose a massive trillion-dollar bill as the Democrats have. That is true. We are not going to because we do not do 1,000-page bills in the Congress very well. We do not know the consequences of them. The cost is always enormous.

Republicans have a better approach. We believe we should do this step by step: First, regain the trust of the American people that we can do it right, and that we are listening to them about what they want rather than coming up with some grand scheme that a bunch of staffers and consultants in Washington, DC, came up with.

Let's listen to the American people, hear what it is they want. They do not want a massive, big spending bill that is going to add to our deficit, that is going to raise their taxes and raise their insurance premiums, and, in the end, not insure very many more Americans. That is not reform.

Madam President, I see my colleague from Tennessee is in the Chamber. He has been an eloquent spokesman on this issue, and I am pleased to yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from Tennessee.

Mr. ALEXANDER. Madam President, I congratulate the Senator from Arizona for identifying so well, among other things, how Republicans would like to approach the health care reform costs. We want to reduce costs for individuals who are buying insurance, and we want to reduce the cost of our government. Rather than a comprehensive 1,000-page, trillion-dollar bill filled with surprises, we prefer to go step by step in the right direction; that is, reducing costs.

The Senator from Arizona has mentioned ways to do that. Whether it is

allowing small businesses to pool their resources, which could add millions of people to the rolls of the insured in the country, whether it is reducing junk lawsuits against doctors, whether it is allowing for the buying of insurance across State lines or health insurance exchanges or using health information technology, we can take steps in the right direction to regain the trust of the American people and move toward reducing costs.

The Senator also did a very clear job of pointing out how the Baucus bill may actually increase costs. There has been a lot of squirming around on the other side because it has been suggested that instead of premiums going down—which is the whole point of this exercise, reducing costs—they might go up. I would like to talk about that a little bit today.

Premiums, your premiums—and let's talk about you the "you" is. We have about 170 million Americans who have employer-based insurance, and we have a total of about 250 million Americans—that is most of us—who have some kind of insurance premium that either we pay or is paid for us. I think our goal is to make it easier to afford those premiums; in other words, to reduce costs. But the Baucus bill, in at least four ways, increases costs, and raises premiums.

One way is it reduces the penalty for individuals and families who are required to buy insurance so they might not buy insurance, and if the young and healthy go out of the insurance pool, premiums of everybody who is in the insurance pool go up.

No. 2, the Baucus bill will say—and so do the other bills the Democrats have presented—that my children, who pay lower premiums than I do, will have higher premiums because under the law there can't be as much difference between what an older person pays and what a younger person pays. So for most young Americans who buy insurance—and in this case they will be required to buy insurance or pay a penalty, so their premiums go up.

There is a third reason premiums go up. Premiums will go up because, when you buy insurance, you don't just get to buy any kind of insurance; you buy a government-approved, basic policy. It sounds like a little more Washington takeover to me. When you go out to buy your government-approved, basic policy, what you will find under this bill is that for millions of Americans, it will cost you more. Your premiums will go up. There are a great many Americans who make the sensible decision of buying a high deductible policy. They say: I will pay most of my health care costs up to a point, but I will buy the insurance for the catastrophe in my life that I could never afford. Well, those policies will not be as available.

Then, finally, there are going to be \$955 billion in new taxes. The bill is very careful about not placing them directly on you; it puts them on everybody you buy things from. It puts them

on people from whom you buy your medical devices; it puts them on people from whom you buy your health insurance. We all know what will happen when we put taxes on people from whom we buy things. If we put taxes on oil companies, what happens? They pass it on to us at the gas pump. If you put taxes on all these health care services, what happens? Our insurance premiums go up.

So one does not have to be an actuary to figure this out. If the individual mandate penalty is weaker, premiums go up. If young people can't buy cheaper policies—cheaper than mine if there is a rule—their premiums go up. If we all have to buy government-approved policies, or most of us do, that are richer than what many of us want to buy today, our premiums go up. If we have \$955 billion in new taxes when the bill is fully implemented, most of which are passed along to us, our premiums go up.

So I would ask this question: What is this exercise all about? I thought it was about reducing costs. I thought it was about lowering the cost of our insurance premiums. But it looks as though it will increase the cost of our insurance premiums and, if that is true, we ought to reject this bill for that one reason alone. Of course, we haven't even seen the bill. It is not written yet. It has to be combined by the majority leader in a dark office somewhere and then we will see it. But that is what we should be looking for.

It is often said that—that is another reason why the Republican idea of a step-by-step approach to reduce costs makes a lot more sense than these big, comprehensive, 1,000-page, \$1 trillion bills. We want to reduce the cost of insurance, but we don't want to pass a bill that raises premiums to do that.

It has been said there is not much bipartisanship.

Madam President, I hope you will please let me know when I have consumed 9 minutes.

The ACTING PRESIDENT pro tempore. The Chair will notify the Senator.

Mr. ALEXANDER. Again, it has been said there is not much bipartisanship in this debate. That is not true. There has been a partisan rejection of a bipartisan bill. Fourteen of us signed up on the bill which Senator WYDEN, a Democrat, and Senator BENNETT, a Republican, offered.

There is another option the various committees had. It didn't increase the debt a penny. It gave people more choices. It didn't have a new government program. It had a lot of good principles in it, but that was rejected. That didn't get the time of day, no more than the Republican step-by-step proposals, but there are other bipartisan efforts other than Wyden-Bennett. There is the Reid amendment offered by the majority leader. He became concerned about how the Baucus bill was going to transfer to the State of Nevada big, new Medicaid costs that

might result in new taxes. Every single Governor in the country is concerned about that, Democratic or Republican. So the majority leader fixed the problem for Nevada and three other States. We will call that the Reid amendment and when this bill comes to the floor we are going to introduce a Reid amendment and we are all going to support it because we want it for Texas, we want it for South Dakota, we want it for New York, we want it for California. If the Federal Government is going to expand Medicaid, the Federal Government needs to pay for the Medicaid expansion and not send it to the States. So that will be a bipartisan step.

Then there is another bipartisan step, and that was from eight Democratic Senators who wrote in and said: We want to be able to read the bill and know what it costs before we start voting on it. All 40 of us agree with that on the Republican side and we believe that is the right thing to do: Put it on the Internet for 72 hours. Senator BUNNING has offered an amendment for that. That now has bipartisan support.

That means, when this bill is finally written—it is not a bill yet—when it comes out of the back rooms, it will at least be on the Internet for 72 hours. Then we will need to have a complete fiscal estimate. That ought to take a couple or 3 weeks. Then we need to come to the floor and debate it because we need to know: Are your premiums going up or down? Are taxes going up or down? What about these Medicare cuts: \$500 billion in Medicare cuts not spent to restore Medicare but for a new government program, I think. My point is, there are a number of questions that need to be answered.

Let me conclude in this way: We have a bipartisan approach. We want to read the bill and know what it costs. Enough of us do that, so I think we will do that, and we will have at least as good a debate as we did on the farm bill. That took a month. The Energy bill took 2 or 3 months. This is one-sixth of the economy, and we will need several weeks to talk. What will we be talking about? We will be talking about—whether this bill is reform; whether it will reduce costs, and whether it will raise your premiums or lower your premiums. If it weakens the individual mandate; if it says young people can't buy inexpensive policies anymore; if it says millions of us have to buy government-approved, richer policies instead of policies with high deductibles; and if it imposes \$955 billion of taxes that will be passed on, raising our premiums; if it raises our premiums instead of lowering our premiums, then why are we doing this?

That is not health care reform. That is not reducing costs. We should instead take the Republican approach and go step by step to reduce costs starting with small business health care plans, reducing junk lawsuits, allowing insurance to be sold across

State lines, creating health insurance exchanges, implementing health information technology, and changing tax incentives.

I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from South Dakota is recognized.

Mr. THUNE. Madam President, I wish to pick up where my colleague from Tennessee left off and talk a little bit about this issue that is before us and before the country right now, the issue of health care reform. I would submit to my colleagues in the Senate that the purpose of reform, as has been stated now for many years as reform has been talked about, is that we have to do something to get health care costs under control. We have to rein in these increasing, double-digit, every year inflationary increases people are seeing in their health care costs. So the purpose of health care reform, as stated, is to lower the costs of health care for people in this country, as well as to extend coverage, provide access to coverage for those who don't normally have it, which, as has been noted in the past, is about 15 percent of the population. About 85 percent of the people in this country do have health care, and their concern is: What are we going to do to drive down the costs of health care? What are we going to do to make my health insurance cost less and my health care coverage cost less?

In that vein, I wish to point out an article from yesterday in the Wall Street Journal, which I would recommend to my colleagues and which was written by former CBO Director Douglas Holtz-Eakin.

Madam President, I ask unanimous consent to have that article printed in the RECORD.

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

[From the Wall Street Journal, Oct. 13, 2009]

THE BAUCUS BILL IS A TAX BILL

(By Douglas Holtz-Eakin)

Remember when health-care reform was supposed to make life better for the middle class? That dream began to unravel this past summer when Congress proposed a bill that failed to include any competition-based reforms that would actually bend the curve of health-care costs. It fell apart completely when Democrats began papering over the gaping holes their plan would rip in the federal budget.

As it now stands, the plan proposed by Democrats and the Obama administration would not only fail to reduce the cost burden on middle-class families, it would make that burden significantly worse.

Consider the bill put forward by the Senate Finance Committee. From a budgetary perspective, it is straightforward. The bill creates a new health entitlement program that the Congressional Budget Office (CBO) estimates will grow over the longer term at a rate of 8% annually, which is much faster than the growth rate of the economy or tax revenues. This is the same growth rate as the House bill that Sen. Kent Conrad (D., N.D.) deep-sixed by asking the CBO to tell the truth about its impact on health-care costs.

To avoid the fate of the House bill and achieve a veneer of fiscal sensibility, the

Senate did three things: It omitted inconvenient truths, it promised that future Congresses will make tough choices to slow entitlement spending, and it dropped the hammer on the middle class.

One inconvenient truth is the fact that Congress will not allow doctors to suffer a 24% cut in their Medicare reimbursements. Senate Democrats chose to ignore this reality and rely on the promise of a cut to make their bill add up. Taking note of this fact pushes the total cost of the bill well over \$1 trillion and destroys any pretense of budget balance.

It is beyond fantastic to promise that future Congresses, for 10 straight years, will allow planned cuts in reimbursements to hospitals, other providers, and Medicare Advantage (thereby reducing the benefits of 25% of seniors in Medicare). The 1997 Balanced Budget Act pursued this strategy and successive Congresses steadily unwound its provisions. The very fact that this Congress is pursuing an expensive new entitlement belies the notion that members would be willing to cut existing ones.

Most astounding of all is what this Congress is willing to do to struggling middle-class families. The bill would impose nearly \$400 billion in new taxes and fees. Nearly 90% of that burden will be shouldered by those making \$200,000 or less.

It might not appear that way at first, because the dollars are collected via a 40% tax on sales by insurers of "Cadillac" policies, fees on health insurers, drug companies and device manufacturers, and an assortment of odds and ends.

But the economics are clear. These costs will be passed on to consumers by either directly raising insurance premiums, or by fueling higher health-care costs that inevitably lead to higher premiums. Consumers will pay the excise tax on high-cost plans. The Joint Committee on Taxation indicates that 87% of the burden would fall on Americans making less than \$200,000, and more than half on those earning under \$100,000.

Industry fees are even worse because Democrats chose to make these fees non-deductible. This means that insurance companies will have to raise premiums significantly just to break even. American families will bear a burden even greater than the \$130 billion in fees that the bill intends to collect. According to my analysis, premiums will rise by as much as \$200 billion over the next 10 years and 90% will again fall on the middle class.

Senate Democrats are also erecting new barriers to middle-class ascent. A family of four making \$54,000 would pay \$4,800 for health insurance, with the remainder coming from subsidies. If they work harder and raise their income to \$66,000, their cost of insurance rises by \$2,800. In other words, earning another \$12,000 raises their bill by \$2,800—a marginal tax rate of 23%. Double-digit increases in effective tax rates will have detrimental effects on the incentives of millions of Americans.

Why does it make sense to double down on the kinds of entitlements already in crisis, instead of passing medical malpractice reform and allowing greater competition among insurers? Why should middle-class families pay more than \$2,000 on average, by my estimate, in taxes in the process?

Middle-class families have it tough enough. There is little reason to believe that the pain of the current recession, housing downturn, and financial crisis will quickly fade away—especially with the administration planning to triple the national debt over the next decade.

The promise of real reform remains. But the reality of the Democrats' current effort is starkly less benign. It will create a dan-

gerous new entitlement that will be paid for by the middle class and their children.

Mr. THUNE. Madam President, I wish to highlight a few sentences from that article regarding the bill that was reported out of the Finance Committee earlier this week. In that article he says this:

The bill would impose nearly \$400 billion in new taxes and fees. Nearly 90 percent of that burden will be shouldered by those making \$200,000 or less. It might not appear that way at first because the dollars are collected via a 40-percent tax on sales by insurers of "Cadillac" policies, fees on health insurers, drug companies, and device manufacturers. But the economics are clear. These costs will be passed on to consumers by either directly raising insurance premiums or by fueling higher health care costs that inevitably lead to higher premiums.

Mr. MCCAIN. Madam President, will the Senator yield for a question?

Mr. THUNE. I am happy to yield to my colleague from Arizona.

Mr. MCCAIN. It is my understanding of the proposal that this reform will begin to be implemented in what year?

Mr. THUNE. I believe the answer to that question, I might state through the Chair, is 2013, 2014.

Mr. MCCAIN. 2013, 2014. But when do the taxes that would supposedly implement this proposal kick in?

Mr. THUNE. The taxes, I would say to my colleague, again through the Chair, kick in immediately. You get the revenues starting to come in right away. So the revenues are front-loaded, the costs of the program are back-loaded, so it understates and distorts what this new proposal will cost.

Mr. MCCAIN. So we have 10 years' worth of tax increases to pay for 5½ years of the implementation of this so-called reform, and then what are the implications in the future?

Mr. THUNE. Well, that is clearly the case. If you look at the 10-year cost of this, because the revenues—the tax increases—are front-loaded, and we get to see basically 10 years of tax increases and only about 5½ years of actual implementation of the program, what you have to do to get a full picture of what the cost of this program will be is take the fully implemented cost. When you take the fully implemented cost, I would say to my colleague from Arizona, you are looking not at the \$829 billion that was reported by the CBO; because of this distortion and this creation of a revenue source before the actual costs kick in, you are looking at a \$1.8 trillion new entitlement program fully implemented over a 10-year period.

Mr. MCCAIN. I have one more question for my colleague. Is there any provision in the legislation, as you have seen it, that has any approach whatsoever to medical malpractice reform or medical liability reform which, in the view of many experts, could be as much as \$100 billion to \$200 billion a year?

Mr. THUNE. There is not.

Mr. MCCAIN. Isn't that incredible?

Mr. THUNE. I think it is incredible because it is now validated by the Con-

gressional Budget Office that if you were to incorporate that, you would drive down the cost of health care in this country by literally billions and billions of dollars. Yet there is no mention or reference to medical malpractice reform in this bill.

Mr. MCCAIN. Isn't it true, as much as we respect the Congressional Budget Office and their figures as to the amount of money that can be saved by implementing meaningful medical malpractice reform, such as is the case in the State of Texas, that it doesn't reduce the costs as far as litigation is concerned? Not only that, but I don't believe it is calculated using the way they calculate costs: The incredible increase in health care costs associated with the practice of defensive medicine, with doctors prescribing unneeded, unnecessary and, many times, because of the nature of the procedure, unwanted additional tests and procedures because that physician is practicing what we call defensive medicine, which is the fear of finding themselves in court; and not only because of the increasing premiums for medical malpractice but also obviously the time, the effort, the energy, including damage to reputation that could accrue from a lawsuit brought against that physician.

The ACTING PRESIDENT pro tempore. The Senator from South Dakota is recognized.

Mr. THUNE. Madam President, my understanding is that the Congressional Budget Office does not only contemplate the cost of litigation, it does not take into consideration the cost of the practice of defensive medicine, which, as the Senator from Arizona noted, is an enormous additional cost, and many independent estimates suggest \$100 billion to \$200 billion annually. The CBO study only took into consideration government health care, so it didn't include the private health care delivery in this country. But many physicians, as the Senator noted, practice defensive medicine because they are worried about being sued. All these duplicative tests and additional practices that are undertaken by doctors in this country to avoid the lawsuit potential or the risk they incur when they practice medicine adds significantly—as I said, as independent estimates suggest, to the tune of \$100 billion to \$200 billion annually.

Mr. MCCAIN. Madam President, isn't it absolutely incredible that in the name of reducing health care costs, and with the burden that rising health care costs impose on every American family, that there should not be one provision—one meaningful provision—for medical liability reform, which is, in the judgment of any objective observer—except maybe the trial lawyers—something that must be implemented if you are going to have a serious effort at reducing the cost of health care in America?

Mr. THUNE. Absolutely. I think that in a moment of honesty Howard Dean

recently said that the reason medical malpractice reform is not included in this legislation is because they didn't want to take on the trial lawyers. It seems to me that you cannot have a meaningful discussion about lowering health care costs in this country absent the inclusion of this issue—an important issue—of the practice of defensive medicine, which is tied directly to medical malpractice lawsuits in this country, and the desperate need we have for reform in that area.

Mr. MCCAIN. I thank my colleague.

Mr. THUNE. Madam President, as the Senator from Arizona noted, an important component of the debate is the cost curve, which leads to higher premiums and health care costs both in government-held care—Medicare and Medicaid—and in private health care delivery.

Despite all of the promises the President has made to the contrary, there isn't anything in these bills to date, according to the CBO, that drives the cost curve down. In fact, what we are looking at is higher health care costs attributable to many of the provisions in these bills. It is interesting to know, because during the hearing, the Director of CBO, Doug Elmendorf—and earlier I mentioned Douglas Holtz-Eakin, a former CBO Director, but the current Director has repeatedly admitted that he did not have the opportunity to find answers to some of the important questions in this debate. CBO told us increased taxes will be passed on in the form of higher premiums, general dollar for dollar. When he was asked if CBO calculated how much insurance premiums will rise for Americans who already have coverage, he said no. When he was asked whether they calculated whether total spending on health care would go up or down, he said no. When he was asked if they calculated how the bill would affect access to health care, he said no. Because of the way the bill has so many holes and no real legislative language, and the way it has been rushed through, there has simply not been time, evidently, for CBO to look at this and to know for certain what some of the impact will be. I have to ask, would Americans buy a health care plan without knowing how much it costs? Does anybody in this country look at buying a plan without knowing its cost? That is exactly what the Democrats are doing with this bill—buying a national health care plan without any idea about how much it is going to cost the Nation or individual taxpayers.

We do know that the plan is going to bring us higher taxes, higher premiums, and cuts in Medicare. I think that is a fair assessment. Two studies last week—independent analyses—verified that premiums are going to go up. I will point out that one of those studies which came out yesterday—the Oliver Wyman study—said premiums will increase in the individual market approximately \$1,500 for single coverage and \$3,300 for family coverage an-

nually. That is exclusive of inflation. So the annual inflationary increases we are seeing in medical expenses are not included in that estimate, but it is \$1,500 for an individual and \$3,300 for a family annually, the increase in cost for coverage.

Small employers purchasing new policies in the reform market are going to experience premium increases that are up to 19 percent higher. This is in year 5 of reform. The other study—the PricewaterhouseCoopers study—which came out a couple days ago, also had some statistics that were revealing. It illustrated, too, that these premium costs that are going to be borne by the American people will go up significantly. So you have two independent analyses that have been done in the last week, talking about how much premiums are going to go up. We know now, with the Joint Tax Committee's assessment and CBO's assessment, that taxes will go up. We have said how the impact of that is going to fall. If you look at the biggest impact of the tax increases, families earning 150 percent of the Federal poverty line, \$32,200, will face an effective marginal tax rate of 59 percent. And 89 percent, according to the CBO, of the tax increases will fall on earners making less than \$200,000 a year. Fifty percent would fall on those making less than \$100,000 a year.

You have average Americans out there trying to cope with the cost of health care, along with the cost of everything else, who are going to be hit with higher taxes and premiums, and our senior population will be hit with higher Medicare premiums because Medicare will be cut, and it is going to impact the Medicare Advantage Program, and it will impact providers across this country.

What we know for certain about this bill is that it is going to spend \$1.8 trillion, when fully implemented over a 10-year timeframe; it is going to leave 25 million people without coverage; it is going to raise premiums for people in this country; it is going to raise taxes on people in this country, particularly those who make under \$100,000 a year—half of the tax burden will fall on them, according to the CBO and the Joint Committee on Taxation. That is what we are looking at with this legislation.

As much as is talked about in health care reform and covering more people and lowering costs, at the end of the day we are looking at higher premiums, higher taxes, and cuts in Medicare. That is the bottom line. That is why we, as Republicans, are looking for real solutions that bend the cost curve down. As the Senator from Arizona noted, one of those solutions certainly would be throwing into this mix the issue of medical malpractice reform.

I want to point out a couple of statistics before I conclude about how this would impact people in South Dakota, according to one of the studies. In the South Dakota market, the individual market, if you are buying in that market, you are going to see your pre-

miums go up by 47 percent. If you are a family, it will go up by 50 percent; and if you are in the small group market, you will see a 14-percent increase in premiums; and if you are an individual and for a family, it is 15 percent.

My State of South Dakota isn't going to fare very well when it comes to the costs associated with this plan. I argue that most Americans, as they evaluate the personal impacts of this health care reform proposal, are going to give it a thumbs down and, hopefully, we can go back to the drawing board and address this in the way we should have in the first place, and that is step by step, not rushing to jam through this massive expansion, this \$1.8 trillion program, with higher taxes, higher premiums, and cuts in Medicare.

I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from Arizona is recognized.

Mr. MCCAIN. Madam President, I congratulate the Senator from South Dakota on a very important statement. I see the Senator from New Hampshire and others on the floor waiting to speak on this issue. I will be brief.

As the majority leader begins discussions behind closed doors to create the Senate bill that he is going to bring to the floor, I think it is important for the American people to understand the impact these policies will have on the cost of health insurance premiums, tax rates, and our economy for generations to come.

I think we should understand the smoke and mirrors used to make the Democrat proposal appear to improve the budget over the next 10 years. The following taxes start next year. If you have insurance, \$201 billion is raised in excise taxes on health plans. If you don't buy a plan, or you buy one that the government doesn't think is good enough, the concept proposal raises \$4 billion in fines on the uninsured. If you are an employer who today cannot afford to provide health insurance to your employees, which is the case with small business, the ones hurting the most—not Goldman Sachs or JPMorgan but the small businesses—the concept proposal raises \$23 billion in employer penalties and contributions. If you use medical devices, such as hearing aids or artificial hearts, the concept proposal raises taxes by \$38 billion on medical device manufacturers. Who will pay for that in the long run? The user. If you take prescription drugs, the concept proposal raises \$22 billion in new taxes on medicines.

The Congressional Budget Office estimates that Americans will face higher health insurance premiums, while waiting 4 years for the reform proposal to begin. This gimmickry is incredible. The President and Senate Democrats claim the proposal is under \$1 trillion and slightly reduces the deficit over 10 years. That is a joke—ten years of taxes but only 5½ years of implementation. To get the true 10-year cost of implementation, you should look at the

10 years beginning in 2013. Using the CBO numbers, we are told that the proposal spends \$1.8 trillion. That is the real cost of this proposal.

You might be justified in wondering what Americans get for that \$1.8 trillion. The answer is more government, with 13 million more people placed into the failed Medicaid Program. Medicaid is a program that is busting the Federal budget and State budgets all over America. Medicaid is a program that fails in patients having access to physicians. Forty percent of doctors will not see Medicaid patients. Medicaid is a program that fails in health outcomes for low-income Americans. We are not going to give low-income Americans more options for better health coverage; we are just giving them the status quo.

It is bad enough that the proposal massively increases government regulation of health care and insurance, massively expands the government-sponsored Medicaid Program—which the States cannot afford to pay for, as we all know—massively cuts Medicare and drives up insurance premiums in the process. But the proposal ignores what Americans want: less government, less taxes, more freedom, and more choices.

The concept paper in the Senate Finance Committee—it is not even a bill—slams Americans with an entitlement program that will grow faster, according to the CBO, than the economy, while at the same time dramatically increasing the tax burden on all Americans.

Let's restate the obvious about the Senate Finance Committee concept proposal. As the majority leader conducts his closed-door process to create the Senate bill he will bring to the floor, it is important for the American people to understand what impact these policies will have on the cost of health insurance premiums, on tax rates, and on our economy for generations to come.

I have seen recent information that the Medicare Part D Program, which is touted as a success—which I voted against because it wasn't paid for—is now having—guess what—increased costs. The problem is that we are not addressing the fundamental problems that cause a dramatic increase in health care costs in America. In fact, we are continuing a process that we have done, which is new entitlement programs, without ways to pay for them.

I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from New Hampshire is recognized.

Mr. GREGG. Madam President, I congratulate the Senator from Arizona and the Senator from South Dakota for framing this debate on health care with very specific and excellent points.

The simple fact is that the cost of this program is grossly understated, but the cost is extraordinary, even when understated—almost a trillion

dollars. The real cost is \$1.8 trillion, when it is fully phased in. In fact, if you include in it the doctor fix, which was taken off the table so the cost would look better, which is \$200 billion-plus, the cost of this proposal, when fully phased in, is over \$2 trillion over a 10-year period.

And the offsets that are going to be used to pay for this? Their plan is basically to cut Medicare Advantage, eliminate that program for seniors—a lot of seniors like Medicare Advantage—and try to save about \$400 billion doing that and take that money and create a brand new entitlement to benefit people who do not have insurance or people who do not have enough insurance, as defined by this bill. In addition, they will raise taxes and raise fees. Most of the fees will be coming in from the hospital associations, the doctors, the drug companies, and the insurers, all of which will be passed through, of course, to consumers in the form of higher premiums or higher costs. Again, it is going to be the consumers of America, Middle America, the people who use health care in this country, who are going to pay the cost.

It is a huge gap even between the stated amount that is going to be raised in this bill, and the real expenditure in this bill. And that gap goes directly onto the debt of our children—the debt of this country, which has to be paid for by our children.

This is in the context of an administration which has exploded the size of government in the first 10 months of its term—exploded the size of government. They have proposed a budget which over the next 10 years will run on the average \$1 trillion of deficit every year, which will take the Federal debt from about 41 percent of gross domestic product up to 80 percent of gross domestic product, which will take Federal spending from about 20 percent of gross domestic product up to about 25 percent of gross domestic product.

What do all those numbers mean? They mean quite simply that our children are going to be passed a country which will have so much debt and such a large government that it simply cannot afford it; that the quality of life of our children, as they move into their earning years, is going to be fundamentally undermined—their ability to buy a home, their ability to send their kids to college, their ability to just live the quality of lifestyle our generation has had is going to be fundamentally harmed by this administration's decisions to spend today as if there is no tomorrow or to spend today and pass the bills on to tomorrow. It is a true affront to the traditions of this country.

Let me quote from Thomas Jefferson because Thomas Jefferson is deemed to be the founder of the Democratic Party. Thomas Jefferson got a lot of things right, of course. He wrote the Declaration of Independence, the most brilliant document in the history of

mankind stating freedoms to which we subscribe. He played a major role in defining our Nation and what makes our Nation special.

He said this about debt. This was a letter to John Taylor in 1816:

I sincerely believe . . . that the principle of spending money to be paid by posterity under the name of funding is but swindling futurity on a large scale.

That is a pretty strong word, "swindling," used by the founder of the Democratic Party relative to the use of debt.

Then he wrote to William Plumer, who, coincidentally, was the Governor of New Hampshire, in a letter. He said:

I, however, place economy among the first and most important republican virtues, and public debt as the greatest of the dangers to be feared.

The proposals which are coming out of this administration do swindle our children's future, just as Thomas Jefferson said. To run debts of this size, to run deficits of this size, to put in place a program that is going to cost almost \$2 trillion when it is fully implemented is basically to guarantee that this Nation is going to have such a burden of government that we will be unable to sustain our government in the form it is today.

What does that lead to when you run up those types of deficits and debt, when you run up that type of spending? It leads to two options: Our children are either going to inherit a nation where we have to devalue the dollar, and basically create a situation where everybody's savings and everybody's net worth is dramatically impacted by lessening the value of that through inflation or, alternatively, you are going to have to dramatically increase the tax burden of this country to a point where you will undermine the fundamental productivity of our Nation and put job creation and the capacity to have prosperity through job creation at risk because the tax burden will become so high.

In fact, it was pointed out, studies have shown that the tax burden will go up to 59 percent of income under some of the proposals that are pending just on this bill, to say nothing of when you start totaling up all the other bills, all the spending that will occur. Even today, the administration announced they want to spend \$14.5 billion more without offsetting it in any way to fund an interest group they feel needs to be funded.

This raises the fundamental question: Why do you proceed in this way? Why would you create a program that is going to have such a devastating impact on the economic future of our Nation? You do it because it gets you votes in the next election, I guess. I guess that is why you do it.

Certainly there are ways to reform health care, to improve health care that do not require this massive expansion in the size of government. There are a lot of ways to do that. Let me give a few.

For example, we could focus on the chronic diseases which are the drivers of health care costs in this country, diseases such as obesity and Alzheimer's. We could try to get those under control. That would help control costs.

We could give employers the incentive through monetary payments—actual cash—to say to their employees: Listen, if you go out and live a healthy lifestyle, we will give a reward in cash. If you stop smoking, if you get yourself into a workout situation where you drop weight, if you take tests such as having a colonoscopy, if you have a mammogram, we are going to reward you with money. That is a step which would significantly improve health care delivery and costs in this country.

We can say to the delivery systems: Listen, rather than doing a lot of quantity for the purposes of generating revenue, why don't you do a little quality with value tied to it? There are health care delivery systems in this country today which accomplish that. Rochester, MN; Salt Lake City, UT; Pittsburgh, PA—there are a whole series of these centers which have shown you can deliver better quality at lower costs if you are intelligent about it and reduce overutilization.

We could, as was discussed at length by the Senator from South Dakota and the Senator from Arizona, do something about abusive lawsuits. The simple fact is, abusive lawsuits are driving huge costs in the health care system. Thirty percent of health care is deemed to be defensive medicine. There is no reason doctors should have to give tests they don't believe they have to give, but they have to give in order to defend themselves from lawsuits. Those are foolish and expensive. Madam President, \$54 billion is the cost estimate from CBO of savings just from that one item, and that is an understated cost because it doesn't, as was pointed out, calculate the defensive medicine side.

Those are a few good ideas, but there are a lot more good ideas. It can be done on a step-by-step approach which gives us better health care without this attempt to basically take over the entire system.

Let's not play any more games around here. What is this about? This is about creating a system, putting in place an alleged comprehensive reform, the purpose of which is to drive private activity out of the market because there are a lot of people on the other side of the aisle who believe profit is bad and the marketplace does not work in health care, and that we should move towards a single-payer system. That is what this is about. Raise premiums to a level where employers will be forced to drop their insurance and push people into what is called this exchange. There will be a public plan in the exchange when it comes from the conference committee, should it get that far—hopefully it will not but if it does—and then basically push every-

body into the public plan and create an atmosphere where the playing field is so tilted against any sort of private activity that people who have their insurance today will lose it and you will have to choose a public plan, for all intents and purposes. That will be your choice 4 or 5 years from now.

The effect of that, of course, of moving toward a single-payer system, which is the stated goal of many of my colleagues on the other side and a majority of the people in the House of Representatives, the effect of moving to a single-payer system or a nationalized system is very destructive to our health care generally. Primarily, it means people will end up with delays. There will be price controls put in place relative to certain types of medicines you can receive. Innovation will be stifled because people will not be able to invest money and get a reasonable return, especially in the area of development of new pharmaceuticals and new biologics, which are so critical to the health care system today. We will have people standing in line. We will have people basically being subject to delays. We will have people, I absolutely guarantee you, finding their health care rationed depending on their age, as occurs in England under its system. And we will simply see a significant lessening of innovation and, most important, people will not have choices. You will basically be forced off the private system into a public system.

This is the ultimate goal here—not stated but clearly intended of what is going to happen if you move toward a system as has been outlined at least in the Kennedy-Dodd bill, as it came out of the HELP Committee and is now somewhere in this building—we don't know where—being merged into a new piece of legislation with the Finance Committee bill. So when Thomas Jefferson makes this point that you should not swindle the next generation by radically expanding your debt, we should live by that because it is a pretty good point. When a bill is brought forward on this floor which alleges to be fiscally responsible and it claims it meets the obligation, it meets its costs, but it understates the costs by almost \$1.2 trillion and overstates how much it is going to generate in revenues and you don't get these Medicare cuts unless—I have never seen Medicare reductions occur in this Congress. Then basically you are loading up the debt of our children. It is that simple. That is the inevitable response of this piece of legislation, that the debt will expand.

As Thomas Jefferson said, he believed in “the principle of spending money to be paid by posterity under the name of funding is but swindling futurity on a large scale.” And this may be the largest scale of swindling that has ever occurred in America's history.

I yield the floor.

The PRESIDING OFFICER (Mr. KIRK). The Senator's time has expired.

The Senator from Colorado.

HEALTH CARE REFORM

Mr. BENNET. Mr. President, I am pleased to be here today, as we were last week and the week before that, with other freshman colleagues to talk about the need for health care reform in this Congress. Today, what we want to focus on is the effect of health care reform on small business.

When I am in Colorado, what we always start with is a conversation about what problem is it we are trying to solve. When it comes to small businesses, they are the biggest losers in the current health care system we have today and, by extension, the people who work for small businesses.

Today in my State, small business pays 18 percent more to cover their employees than large business does. Some people say to me: Michael, that is obviously because they have a smaller pool of people; it is harder to spread the risk. And that is true, but from a business perspective, that is ridiculous. From a small business perspective, if you are going to spend 18 percent more on something, you ought to expect to get 18 percent more productivity out of your company or you ought to at least expect to get 18 percent better coverage for your employees. Of course, every small business owner in this country knows the reverse is true—coverage is worse, deductibles are higher. It is just an illustration of how challenging the status quo is for small businesses that, after all, employ most of the people in our economy and are going to be responsible for carrying us out of this recession.

One can see on this chart the extraordinary effect this has had on my State. Even before this current recession, we saw a huge drop in the number of people who were getting coverage at work and many fewer small businesses. Now we are almost at 40 percent—I guarantee that number is well below 40 percent today after this recession has occurred. Even fewer smaller businesses are able to offer their employees coverage, which is heartbreaking for small business owners all over my State and all over the other States represented here today. Many of these businesses are family-owned businesses. The businesses feel like a family. People feel responsibility and care for one another and take responsibility for, among other things, health care. But they are not able to do it anymore. They are making very tough choices as a result.

By the way, one of the choices they are making is to not raise wages. Median family income in Colorado went down by \$800 over the last 10 years, and in the country it went down over \$300 in the same period, while in my State health insurance premiums went up by 90 percent. Small businesspeople say to me that those things are directly related to each other. In other words, people have to make a choice between

covering their employees and paying them a living wage, and more often than not they are having to choose to compress wages just because of the skyrocketing costs of health insurance.

Health care reform done right is going to make an enormous difference for small businesses and for the people employed by small businesses. It will lower premiums and the cost of health insurance coverage; provide tax credits for small businesses that provide health insurance—that do the right thing; exempt most small businesses from employer responsibility requirements; subsidize health insurance for employees in small businesses that do not provide health insurance; increase entrepreneurship to expand the pool of workers available to small businesses; and eliminate job lock. Job lock means having to stay in a job because you are so scared of losing your insurance.

The estimate is that the administrative costs for small businesses, when it comes to health care insurance, will drop by over 50 percent. Most small businesspeople I know, who are skeptical sometimes of the reform we are talking about, will tell me this administrative burden is extraordinary for them today. Today, it is a paper-and-pencil system of trying to root out and sort out the health insurance market for their employees. Tomorrow, what we are going to have is an exchange where people can easily compare prices, compare coverage, and get the best deal for their employees, not to mention the fact they are going to be able to pool their purchasing power and drive down cost as a result.

The estimates are, small business will save billions of dollars over the course of this reform—\$432 billion by 2013, \$855 billion just 9 years from now. That is money that can be put into wages. In fact, the estimates are that of those savings, what we will see is small businesses being able to increase wages for their employees by almost \$300 billion by the end of this period of time.

So today we are here to talk about why reform is important for small business. We are at a very perilous moment in our economy for small businesses that do not have access to the credit they need to help get us where we need to be. They are facing an incredible credit crunch out there, which is making it hard for them to hire again, which is driving up our unemployment rate. Over the medium and long term, what is critical to the success of our small businesses is that we reform our health care system, we make it more transparent, we make it more efficient, we make coverage more available to small businesses and to the millions of Americans who are employed by small businesses in their communities.

We are going to go through a series of colleagues today from the freshman class, as we did last week and the week before, and I will now yield the floor for the Senator from Alaska to give his

perspective on why, as a former small businessperson himself, health care reform is so critical to keeping our small businesses competitive.

The PRESIDING OFFICER. The Senator from Alaska.

Mr. BEGICH. Mr. President, I thank the Senator from Colorado for his presentation, especially on small businesses and the impact health care reform will have on them. The Senator from Colorado has done a great lay of the land on the impact to small business, and I wish to step it up and talk about what I heard as I sat here and listened to several of my colleagues on the other side, the Republicans, talking about what is going to happen if we don't do something or if we do health care reform. In that regard, I wish to talk about at least one myth that I hear over and over from the other side that will impact not only small business but impact everybody.

I am pleased to join my fellow colleagues and talk about the importance of health insurance reform in general, but the myth I wish to talk about today, which I have heard stated over and over, involves scare tactics and, in particular, a word which I think belongs in the soup lines of the Great Depression—"rationing." Opponents of health insurance reform have resurrected the word to suggest that Americans will get less care when reform legislation passes.

Is there anything more cynical than telling Americans their health care will be rationed because of reform; that they will lose or get less care when Congress and the President finally take action? Defenders of the status quo ought to be embarrassed. They know the opposite is true—that more Americans will have access to more health care when reforms are finally adopted.

Rationing is not some roadblock waiting down the road for the vast majority of Americans, it is what is happening right now. Let's use my State as an example—a State where 52 percent of the folks employed are from small businesses. When I came into the Senate at the start of this year, the Census Bureau said 123,000 Alaskans were uninsured. But new data came out last month—just a few months after the earlier statistic—and that number is up to 133,000. In other words, 10,000 more Alaskans have been rationed out of their coverage. Insurance companies no longer cover them.

Unable to pay the skyrocketing insurance premiums, or maybe their employers can no longer afford it—as laid out so well by the Senator from Colorado—people and businesses are struggling to make sure they can afford their insurance premiums for their employees or they are rationed out of the system because they have switched jobs. Then, when they apply for new insurance, they are disqualified because of a preexisting condition or perhaps the annual cap on how much their insurance company will pay is so low people get sick and hit their limit

early. From that point on, they can't afford to see a doctor for the rest of the year or ensure their coverage or their quality of care is maintained. This is another form of rationing, and it is real.

By one estimate, 14,000 Americans lose their health insurance every day. These are friends and neighbors and loved ones and it is inexcusable. Maybe the reasoning for rationing is even more outrageous—the cases where insurance companies revoke coverage by a process of rescission. Unfortunately, that is very real. A report by the House Ways and Means Committee says insurance companies saved themselves \$300 million over 5 years through this practice of rescission.

So, again, let's put the word "rationing" in proper context. It is the status quo, and the insurance industry is making lots of money because of it.

Let's talk about what will change when we pass health insurance reform. As you can see on the chart, reform will easily take care of many of the issues Americans face: Tell insurance companies they can no longer deny coverage because of preexisting conditions; stop them from setting low annual or lifetime caps and refusing to pay the care after that; reform will offer Americans more choices by creating health insurance exchanges—as so well described by the Senator from Colorado. As I like to call it, it is health insurance Expedia. As we do with travel, we can do with health insurance. It will require insurance companies and Medicare to pay for more preventive care so people can have regular checkups and screenings. This means we can recognize and even prevent oncoming chronic illness. Of course, this is better for the patient, and it saves us money.

Let me say it again: The scare tactic of so-called health care rationing is just that, a tactic trotted out by those who want to kill reform. The truth is, health insurance reform will give Americans more—more people have more access to more health care.

Mr. President, I yield the floor.

Mr. BENNET. Mr. President, I thank the Senator from Alaska, and I think he raises such an important point because so much of the debate has been about dividing one set of Americans from another set of Americans. Health care reform is something that needs to be of concern to 300 million Americans—if you are concerned about the double-digit increases every year of your premiums; if you are concerned about spending almost 20 percent of our GDP on health care, when every other industrialized country in the world is spending less than half that; concerned, as the other side is and this side is, with the fiscal condition of our government, when we know the biggest drivers of our medium-term deficits are rising Medicare and Medicaid costs, and the biggest drivers of those are health care costs. We are all in this together.

It is a great pleasure for me to turn now to the Senator from Oregon, who will talk about the fact that this isn't just about trying to cover one small group of Americans, it is about all 300 million Americans in this country.

The PRESIDING OFFICER. The Senator from Oregon.

Mr. MERKLEY. Mr. President, I am delighted to join my colleagues from Colorado and Alaska to tackle some of the myths being printed about health care reform. It is startling to stand on the floor and hear increasingly shrill presentations from those who wish to defend the status quo broken system of health care in America. I wonder to myself, do they not hear what I hear from my constituents about the challenges they encounter each and every day if they do not have insurance; who are worried about getting sick or, if they have insurance, are worried about losing that insurance; worried about the problems and challenges faced with utilizing that insurance?

I rise to talk about one of the most prevalent myths—that health care reform is only about expanding access to those who don't have health insurance. Because here is the truth: Health care reform is about improving health care for those who already have insurance. Those with insurance in the United States live in a precarious state. Their rates often go up by double-digit increases every year, so affordability is hanging by a thread. Those who have insurance through their jobs can change jobs and lose that coverage. They could get dropped from their insurance because they become sick or injured or they could find that their insurance has lifetime or annual limits that block them from obtaining the medical care they need if they do become injured or ill. We want to make health care insurance more stable and secure for those who have it, and that is what health care reform will do.

First, health care reform will make insurance portable. If you lose your job, you often lose your coverage. That is a terrible double whammy for American families. Health care reform will make sure your coverage goes with you if you lose your job or if you choose to take on a new career.

Second, health care reform will end dumping—the terrible practice of insurance companies canceling policies when those citizens become seriously ill. That is wrong. What kind of health care system is it when you pay insurance premiums for 15 years and then your child or your spouse or perhaps yourself becomes seriously ill and you get a letter from your insurance company saying they are canceling your insurance? That is not health insurance. That is a scam. Health care reform will end that scam in America.

Finally, health care reform will get rid of annual or lifetime limits that drive people into bankruptcy, even when they have coverage. Here is an example from my home State of Oregon.

Alaya Wyndham-Price lives in Oswego. She had insurance through her previous job as an event planner and is currently on COBRA. Six months ago, Alaya developed a tumor the size of a golf ball just below her brain, and she has had numerous tests performed by a neurologist to determine the best course of treatment. Her insurance caps treatment costs at \$20,000 annually, and she has already approached \$30,000 of expenses with the diagnostic tests over the last few months.

Through COBRA, Alaya's insurance will renew in January, but the surgery to remove her tumor will cost about \$50,000—or \$30,000 over the amount her insurance will pay in 2010. So she is trying to work as much as possible—doing freelance writing, taking on projects—but on many days is too ill to do much of anything. She is scheduled to see a doctor again soon to have an expensive MRI test in November, but with every single medical visit she goes deeper into debt.

This is not right, but it is common. More than half of bankruptcies in America are due to medical bills and in more than half of those situations where medical bills drive people into bankruptcy, the individuals had health insurance. No American should be driven into bankruptcy because he or she becomes sick or injured. Health care reform will end arbitrary annual and lifetime limits to make sure Americans get the care they need when they need it, not having to delay care to the next year in order to benefit from a new annual ceiling.

In conclusion: The myth is that health care reform is simply about extending coverage. The truth is this: Reform will mean better, fairer, and more affordable coverage for the millions of Americans who already have insurance.

Mr. President, I yield the floor.

Mr. BENNET. Mr. President, I wish to thank the Senator from Oregon for pointing out the incredible lack of stability that exists in the system today. The bankruptcy numbers are unbelievable. In my State, I think roughly 62 percent of all bankruptcies are caused by health care issues. Of those health-care-related bankruptcies, 78 percent, nearly 80 percent of them, are bankruptcies involving people who actually were covered by insurance. We are not getting done the job that needs to get done. That is why we are here today to talk about these issues.

I am going to call on the Senator from Virginia to talk a little bit about how, under the current system, we pay for the uninsured in our country today, but we do it in the most inefficient way possible. Just one fact from my State: We have a public hospital in Denver called Denver Health. It is an incredibly well-run hospital, run by a person named Dr. Patty Gabow. She told me they did a study a couple of years ago that showed they spent, in 1 year, \$180 million for uncompensated care for people employed by small businesses who could not get insurance at work.

I will yield for the Senator from Virginia.

The PRESIDING OFFICER. The Senator from Virginia is recognized.

Mr. WARNER. Mr. President, first of all, I thank my colleague, the Senator from Colorado, for organizing this effort today and leading freshmen Senators this week as we, once again, come down to the floor, as some of the folks who are newest to the Senate, most recently hired in most cases, to talk about the need for health care reform. I particularly thank my colleague, the Senator from Colorado, for raising the very important issue of the cost of health care to small businesses.

The remarkable thing about small businesses is they are basically the only people who pay retail for their health care costs in America today. Those who have Medicaid, large employers—they all can leverage their purchasing power. But small businesses are the folks who take it on the chin, and I am grateful for my colleague's comments today, describing how health care reform can benefit small businesses.

My colleagues, the Senator from Alaska and the Senator from Oregon, have also pointed out some other myths, as the Senator from Colorado indicated. The one I am going to take on today, because we hear a lot from our friends on the other side of the aisle about the problems with reform, and sometimes they do actually dispel some of these myths—but one of the myths I have dealt with for 18 years, as somebody who founded the Virginia Health Care Foundation in the early 1990s, is, how do we deal with the uninsured? Yes, part of our health care reform is about extending coverage to the uninsured. There will be some additional cost to do that, but I think it is very important to recognize that under our current system, right now we pay for the uninsured. We pay for the uninsured through uncompensated care, as my colleague from Colorado mentioned. We pay for the uninsured in higher health insurance premiums for all of us who buy private insurance. We pay for the uninsured, candidly, in higher costs to our Medicare and Medicaid system.

Our uninsured end up on the emergency room doorsteps, oftentimes receiving care in the most inefficient way possible and oftentimes without good quality care.

We have seen, on average, 8 percent of families' 2009 health care premiums—about \$1,000 a year for all of us who purchase private health insurance—we pay in effect a \$1,000-a-year tax to compensate and pay for the cost of the uninsured.

As my colleague mentioned, and I know from my experience in Virginia 18 years ago, we started this Virginia Health Care Foundation to deal with how we could provide health care coverage for the uninsured. We saw folks ending up, as I mentioned, on hospital doorsteps. We saw folks waiting too

long before they could access the health care system. Oftentimes, if they had a chronic disease and then waited to get that health care coverage, the cost of covering that person was not only much higher—obviously, the person has to deal with a much more serious illness—but they too ended up in the emergency room, which is an inefficient delivery mechanism.

If we are going to truly start to bring down the cost of insurance, if we are going to do the right thing in giving the uninsured in this country a chance to receive a medical home and make sure they access health care through a more affordable and more long term, healthier way, we must pass health care reform this year.

A lot of numbers have been bandied about concerning what kind of extended coverage we are talking about in this health care reform. There have been arguments that we are talking about covering 30 million additional people. I believe the Senate Finance bill covers 25, 26 million. One of the things that is often absent from this debate is that while these are the numbers we are trying to deal with right now, literally triple that number, about 87 million Americans during a year, at one point or another, through either being unemployed for a while or moving off one plan to another, go through some period of being uninsured and uncovered.

On top of that 87 million, we also have the problem of literally tens of millions of people who are stuck in dead-end jobs, who want to change jobs, who want to become more productive, but they are afraid to make that change because of concerns over losing their health care coverage. If we can provide the kind of health care reform we are talking about, if we can provide the kind of coverage we are talking about, those kinds of problems will go away. We will become a more effective and cost-effective society.

I know we have other colleagues who want to speak, and I want to come back to where we started, at least the freshmen did a few weeks back, and why some of our colleagues on the other side who seem to be this “caucus of no,” who seem to say: Let’s take more time, let’s put it off, let’s wait a little bit longer before we take on health care reform—why that policy choice is so wrong.

If we do nothing, if we choose not to act this year, our current health care system is financially unsustainable. If we do nothing, Medicare, under the current projections, will go bankrupt in 2017. Many of us on this side of the aisle share the concerns of some of our colleagues on the other side of the aisle about the exploding deficit our Nation faces. The largest single driver of our Federal deficit is not the stimulus program, it is not the TARP program, it is not some of the other things we debate back and forth, it is the rising cost of health care that we pay for with Federal dollars in Medicare, Medicaid, and the VA.

If we do nothing, our deficit and those health care costs will continue to explode, undermining the dollar, undermining our ability for economic recovery. If we do nothing, an average family in Virginia—and I would argue probably an average family in the State of Colorado—will see literally 40 percent of their disposable income go to paying their health insurance premiums within the next decade. Those costs are unaffordable and unsustainable.

Finally, as a former business guy and somebody who believes, as my colleague from Denver does, that the heart of what keeps our economy growing is the business community, and particularly the small business community, if we can’t lower our health care costs, then American business will not be competitive in the global economy. No matter how productive American workers are, America builds into our cost structure, for almost every business, about \$3,000 to \$4,000 more per employee because we have so much higher health care costs than any of our competitors around the rest of the world. We cannot maintain that competitive disadvantage in a global economy.

The time is now. There are ways we can continue to improve these bills. We are looking forward to the melding of the Finance bill and HELP bill, and I know myself and some of my fellow freshmen colleagues will have some ideas about how we can improve programs even in that package.

I thank my colleague from Colorado for his leadership on this issue, and I look forward to working with not only my freshmen colleagues but all colleagues on this side of the aisle, and hopefully those on the other side, to make sure we do get health care reform this year.

I yield my time.

Mr. BENNET. I thank the Senator from Virginia. I particularly, on behalf of all the colleagues here today, thank him for his leadership over the last couple of months on the question of personal responsibility: how do we incentivize people to make sure they are doing a better job to take care of themselves; how do we work with some of the corporations in this country that have done an extraordinary job of lowering health care costs by incentivizing folks to take personal responsibility for their health care. I have enjoyed working on those issues with him and look forward to continuing to work on it.

Next, we have the Senator from New Mexico who is here to talk about another myth, which is the idea that our health care system always works well for everybody.

We have great things in our health care system. We have some of the best health care technology in the world. We have some of the greatest treatments in the world. If you are going to get sick, a place you want to get sick, depending on what you have, is the

United States. But we are not perfect by any stretch of the imagination, and the Senator from New Mexico is going to comment on that.

The PRESIDING OFFICER. The Senator from New Mexico is recognized.

Mr. UDALL of New Mexico. Mr. President, it is good to see our Presiding Officer, the new Senator from Massachusetts, here, who has joined us within the last couple of weeks. Mr. PAUL KIRK.

Today we are talking about myths, inaccuracies, deliberate exaggerations, and outright lies that have abounded over the months we have been debating health care reform. Some have been dreamed up by those who stubbornly cling to the status quo. Others reflect fears lying just beneath the surface.

If we step back, it is easy to see these scare tactics for the lies they are, but for Americans who will be most impacted by this reform, it may be difficult to separate fact from fiction. The myth I would like to talk about today is a bit different from the others being discussed by my colleagues. It is a myth that existed long before the current debate but is being used in a new way by people fighting this reform. They are using it as a weapon against change. It is a myth we have all heard about. It is the myth that reform is not necessary because we have the greatest health care system in the world.

What makes this myth different from the others is that parts of it are absolutely true. Americans are blessed with some of the best doctors and nurses and health care professionals in the world, hard-working men and women who have dedicated their lives to the health and healing of others but often work in difficult situations.

Our technology is unmatched. Our emergency care system is repeatedly cited as the best of the best, and we rank highly regarding the levels of dignity and respect with which patients are treated. But all these achievements, as great as they are, do not add up to the best health care system in the world for all Americans—not as long as we are spending \$2.4 trillion a year on medical care but continue to rank near the bottom when it comes to premature deaths from diseases such as diabetes, stroke, and pneumonia; not when we spend twice as much of our GDP on health care as Japan and the UK but have lower life expectancy at birth; not when we rank last in infant mortality among industrialized countries; and not when half of the personal bankruptcies in the United States are related to medical bills.

Right now in America, if people have the money, they have access to the best health care money can buy. For the vast majority of Americans, that access is not there. If a person is a small business employee or laid off from a job or someone with a pre-existing condition, the “best health care system in the world” is much harder to come by. When 80 million

people are either uninsured or underinsured, there is no way a country can lay claim to that title.

But there is something we can do about it. With this reform, we have the opportunity to build on the strengths of the U.S. health care system while also addressing its weaknesses. Comprehensive health reform will go a long way toward remedying these and other inequalities and reducing the health care disparities between rich and poor, the majority and minority.

The solution is not always spending more money. Sometimes it is about making better use of the money we are already spending. It is about finding ways to achieve better returns on our investment. The reforms we are proposing would allow us to do that by ridding the system of waste, by increasing our investment in prevention, by helping small businesses afford insurance for their employees, and by covering more individuals whose only medical option right now is expensive emergency room visits.

The status quo is unsustainable, but that is what reform opponents are hoping to continue with, myths like those we are discussing today. America has the potential, the talent, the technology to achieve the best health care outcomes in the world. Whether we reach that goal depends on the actions we take now.

I yield the floor.

Mr. BENNET. Mr. President, I thank the Senator from New Mexico, and I am reminded of the trips I made around my State during recess when everybody settled down and we could actually get into a conversation about how well the status quo was working for people. It took about 40 minutes into the meeting before people would stand up and start to say: Let me tell you my story about how I was laid off from a company or lost my insurance, had a preexisting condition, couldn't get new insurance and, therefore, can't get the health care I need.

That is the kind of conversation we need to have about what we are facing. I was left with the impression from people in Colorado that while they don't like the status quo, they are worried that we are going to make it worse. We can't blame people for thinking that, as they watch what is on TV every night or on the Internet. Our obligation is to make sure as we go through this legislative process, we deliver something that builds on our strengths, as the Senator said, but also fills in gaps that are clearly present and disrupting the lives of working families.

I turn now to the Senator from Illinois to talk about the public option and choice. It is apparent to me, as people have begun to see there might be a requirement that they have insurance, what I am hearing from people is they want more choices, not fewer. They don't want to necessarily be forced into a private insurance plan. They want their family to have

choices. Today the Senator from Illinois will talk about the public option.

The PRESIDING OFFICER. The Senator from Illinois.

Mr. BURRIS. Mr. President, to my colleagues who are making this presentation on behalf of the people on health care, it is my pleasure to join them and speak briefly about what will take place if we do not pass, as part of insurance reform, a public option. When it comes to health care reform, we have all heard the myth that a public option would amount to a government takeover of the health care system. This is completely false and has no basis in the legislation under consideration by the Senate.

Let's examine the facts: 45,000 Americans die each and every year because they do not have health insurance and cannot get quality care. That is 1 death every 12 minutes. Clearly, the system is broken. The time for action is long past. I believe we need to restore choice and accountability to the health care system. The only way to accomplish this is with a public option. It would increase the availability of care. It would help fight the disparities that plague our current system.

At the moment, people of color represent half of the Nation's uninsured, even though they make up only a third of the total population. A low-cost public option would meet the needs of these who are at a disadvantage, regardless of background or skin color. The public option would restore competition to a market that is currently monopolized by only a few corporations. Take my State. In the State of Illinois, two companies dominate 69 percent of the insurance market. That is why their profits are growing four times faster than wages. This is unsustainable. It is breaking America's businesses and bankrupting American families.

We talked about businesses earlier. My colleagues mentioned what this will do for small businesses.

We must make sure there are choices for them to have an exchange where small businesses can shop for their insurance. If these companies have to compete with a public plan, everyone's premiums will go down. It will bring about competition in the marketplace. If you like your current insurance providers, nothing will change except that you will save money, and you won't have to worry about losing coverage when you need it. No government bureaucrat will alter your insurance plan, your doctor, or the level of care you receive. But if you can't afford insurance or your coverage has been denied due to a preexisting condition, you will be able to get quality care at an affordable rate. Just like any business, a not-for-profit public insurance option would require initial capital to get off the ground. But afterwards it would rely on the premium it collects to remain self-sufficient.

The current system is a drain on American taxpayers. The public option

would not be. The public option would complement private insurance providers, not drive them out of business. In fact, it will result in an increase of 1 to 3 million additional customers for private companies. In other words, by bringing all those persons into coverage, insurance companies will benefit when all these uninsured people will now be covered. There will be no government takeover, no death panels, no rationing, and no redtape between you and your doctor.

It is time to reject these myths and to take decisive action. The only way to achieve meaningful health care reform and bring costs down is through a public option that creates real competition in the system.

Let it be clear to all of my colleagues in this august body: I will not vote for any health care bill that does not include a public option.

I yield the floor.

The PRESIDING OFFICER. The Senator from Colorado.

Mr. BENNET. I thank the Senator from Illinois for his eloquent discussion about trying to provide more choice rather than less to our working families. A lot of what we are trying to do with health care reform—and I hope the bills will improve over the coming weeks—is give people more control over choices with respect to their doctors and their medical care, to make sure that it is doctors and patients making decisions about treatment and not insurance company bureaucrats or a government bureaucrat.

Next I will yield for the Senator from Delaware to talk about why this is such an urgent problem and why we need to address it now and not wait, as we have over the last 20 years. As the President said, the first President to call for health care reform was Teddy Roosevelt. Here we sit in 2009, confronted by the same sorts of arguments about why today is the wrong time to do this and why we ought to kick the can down the road for another generation of Americans.

I turn the floor over to the Senator from Delaware.

The PRESIDING OFFICER. The Senator from Delaware.

Mr. KAUFMAN. Mr. President, I thank Senator BENNET for organizing this event today. He has been a leader in our effort to try to achieve meaningful health care reform. I am looking to him, as we move down the road on health care reform, to continue to show leadership to make sure we achieve meaningful health care reform.

I appreciate the opportunity once again to join my colleagues and show our united support for health care reform. I want to address one of the biggest myths reform opponents have spread throughout the debate, the myth that America cannot afford to change the health care system. They say our country has too much debt and the health care reform would only increase the Nation's deficit. They say we spent too much money on TARP

and the stimulus package. They say we must rein in spending and push off health reform until we straighten out our fiscal house. When we hear this kind of criticism, especially during this time of economic downturn, it is reasonable to ask if now is the time for reform of the health care system. The answer is: We need health care reform now. We need health care reform now because economic recovery for the long term is completely dependent on controlling health care costs.

We cannot afford to wait for reform because the status quo is absolutely, positively unsustainable.

Medical costs account for one-sixth of domestic spending and are headed upward. They are handcuffing families and workers, strangling Federal and State Governments. In 2000, the average premium for family health care in Delaware was just over \$7,500. In 2008, that number jumped to \$14,900, almost doubling in only 8 years. If we do not enact health care reform now, the same premium for family coverage is expected to reach \$29,000 in 2016, another doubling in price.

The status quo is unsustainable because of health care spending on a national level. In 1979, we spent approximately \$220 billion as a nation on health care. In 1992, we spent close to \$850 billion. In 2009, we will spend \$2.5 trillion on health care. That trajectory of health care expenditures is totally out of control. We must begin to bend the cost curve down on the health care system. We need to do this now. We cannot wait any longer. We cannot afford to wait for reform because failure to do so will place even more pressure on the Federal budget and on taxpayers to continue support for Medicare and Medicaid.

Clearly, one of the major driving forces behind our Federal deficit is the skyrocketing cost of Medicare and Medicaid. Combined, these programs account for 20 percent of all government expenditures. If we do nothing to start bending the cost curve down for Medicare and Medicaid, we will eventually spend more on these two programs than all other Federal programs combined.

Let me say that again: If we do nothing to start bending the cost curve down on Medicare and Medicaid, we will eventually—and not that far off—spend more on these two programs than all other Federal programs combined. Because of this, people who are concerned about deficits should welcome health care reform now. The plans being considered by the Congress would require some upfront cost, but reform done the right way will mean savings for families and businesses, money that could be pumped into the economy.

We all know in the short term the cost of expanding coverage to Americans will temporarily increase government spending. Quickly, however, the net impact of the cost containment provisions will accumulate, and there

will be a reduction in government spending. It is important to remember that while we are awaiting the cost containment provisions to take hold, the President and congressional leaders have insisted that health care reform be deficit neutral. In other words, the administration and Congress are committed to responsible health care reform that reduces the deficit over 10 years and major reductions over the long term. We will not be able to get the major reductions we need to sustain the budget and sustain the Government if we don't do these things now which will only begin to benefit us in the long term. For this reason we cannot afford to wait for health care reform.

Finally, if we lose this opportunity to pass health care reform, we will not have an opportunity to reform our health system in the foreseeable future. We will be stuck with the unsustainable status quo. This Congress, this President is not about to return to this issue if we do not pass it because it is so incredibly difficult and so traumatic and takes everyone's concern. I have been around Congress for 36 years, and I have learned something about how Washington works. Trust me, we have truly a unique window of opportunity for health care reform. The window is now open. It will soon close. We have a new President in his first year in office who has a good relationship with Congress. There is major support for reform among providers, patients, business, labor, and everyday Americans. With the major players in health care seeking reform, this could be our chance. I believe it is our chance, and this will be the only chance for a while.

Mark my words: If we don't take this opening and enact health care reform this year, it will not be done until the health care system crashes down around our ears. We cannot continue the status quo for one more day. We cannot wait to enact health care reform. We must gather our collective will and do the right thing during this historic opportunity by passing health care reform. We can do no less. The American people deserve no less.

Mr. BENNET. I thank the Senator from Delaware for pointing out that maintaining the status quo, being unwilling to act, in fact, is making a choice.

It is making a choice about having another decade of double-digit cost increases every year. It is making a choice about devoting a fifth of our economy to health care when every other industrialized country in the world is devoting less than half of that. It is making a choice about having increasing and mounting and rising deficits in the outyears.

I thank the Senator from Delaware for pointing out that we have a once-in-a-lifetime opportunity right now to try to address a number of these issues at the same time.

Mr. President, our closer today is the Senator from New Hampshire, who is

here to talk about what this reform is about versus what some have claimed it is about. I welcome her here this morning.

Let me turn the floor over to the Senator from New Hampshire.

The PRESIDING OFFICER. The Senator from New Hampshire.

Mrs. SHAHEEN. Mr. President, I thank very much Senator BENNET for coordinating this effort today.

As you have all heard for the past few weeks, the freshmen Senators have joined together to deliver a very simple message: We need to act, and we need to act now, on health care reform.

As people have been pointing out all morning, there is a lot of confusing and, unfortunately, some false information that has been going around about who is going to be included in health care reform legislation and what that is going to mean for people. So as everyone has said, we are joining together today to try to dispel some of those myths and to focus on what really matters, which is making our health care system better for our families, for our businesses, and for our Nation's economy.

One common myth we have heard is that health reform is a government takeover of our health care system. This is simply not true. The truth is, health care reform is being driven by consumers who are concerned about the cost of health care and about their coverage, and it is being driven by the market because health care costs are so high that too many businesses and too many people cannot get the health care they need when they need it.

Under the current legislation, everyone will have the freedom to keep their health care plan if they like it. But for the millions of hard-working Americans who cannot find affordable coverage or who have been discriminated against because of a preexisting condition or for women like me who too often are discriminated against in the costs of health care, health reform will give them a choice.

Last week, my office heard from a man named Andrew from New Boston, NH. Sadly, his story is all too common. Andrew and his family had employer-sponsored insurance coverage through his wife's job. Unfortunately, she was laid off recently. Now not only is she out of work, but her family has to find another source of health insurance coverage. The fact is, the individual market simply does not provide sufficient affordable options for families. The coverage they managed to find—Andrew and his family—puts a significant financial burden on their family.

The good news is, health reform legislation offers a solution for families such as Andrew's by offering more choice. The health insurance exchange creates a marketplace where insurance companies must compete for our business. Individuals and small businesses will be able to shop for the most affordable plans in a way that is transparent and easy to understand—similar to the

way Members of Congress get their insurance, and Americans should have the same choice.

Increased competition and transparency do not sound like a government takeover to me. Rather, it sounds like the markets acting in a way that best serves the American people.

My health reform reality check is that health care reform is consumer based and market driven. You can keep your insurance if you like it. It will increase choices for families. It will promote competition.

We need to move past the rhetoric and the myths. We need to rise to the occasion in this pivotal moment in our Nation's history. We must pass meaningful health reform for the citizens of New Hampshire and all Americans.

Mr. President, I yield the floor.

Mr. BENNET. Mr. President, I wish to thank the Senator from New Hampshire for closing in such a perfect way today. I agree with her that for far too long Washington special interest politics has gotten in the way of fixing this system, and the result has been enormously unfortunate for working families all across the United States of America.

When your median family income is going down by \$300 over a decade, and the cost of health insurance is doubling over the same period of time—by the way, in my State, it has gone down by \$800—and the cost of insurance has gone up 97 percent, the cost of higher education has gone up by 50 percent over the same period of time, essentially what we are saying to working families is: You are going to take home less, but you have to pay more for, not "nice to haves" but things that are critical to move your family ahead to have the kind of stability that is essential for everybody to have a shot at the American dream, and for some reason we in Washington cannot figure out how to make some changes that would help working families and small businesses all across the United States.

That moment has come now, and we are here. We have the next few weeks to figure this out. I believe we will. I am enormously optimistic we can pass a bill in this Senate and in the Congress that the President can sign that will make a material impact, an improvement in the lives of working families and those employed by small businesses all over this country. In fact, anything less than that should be unacceptable to all of us.

I hope we can do that in a bipartisan way. I hope we can have cooperation across the aisle and the best ideas from both parties as we design it. But, to me, the most important thing is to make sure people who live in my State do not need to endure another decade of double-digit cost increases every single year, do not need to endure another decade where they lose their health insurance because they lose a job or because they have a preexisting condition or because, as happened in my State last week, a baby was born who was

deemed to be too heavy to insure—fortunately, the insurance company did the right thing in the end—to not have another decade where people are wrestling with their insurers to get paid, so that doctors and people providing health care do not have to spend 30 percent of their overhead or more trying to get reimbursed for services they provided to their patients.

I am optimistic in part because of all my wonderful colleagues who were here this morning. I thank them for joining me today.

Mr. President, with that, I yield the floor and suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

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

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

Mrs. SHAHEEN. Mr. President, I ask unanimous consent that I be allowed to speak as in morning business.

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

UNEMPLOYMENT EXTENSION

Mrs. SHAHEEN. Mr. President, I rise to speak in support of the Unemployment Compensation Extension Act. This bill will extend at least 14 weeks of unemployment benefits to workers across the country who will exhaust their benefits by the end of the year.

This the second time I have come to the floor to urge those who are holding up this critical legislation to stop blocking its passage.

This week we learned that Wall Street firms are expected to pay out a record \$140 billion in compensation. While the economy seems to have turned around for Wall Street executives, it sure hasn't turned around for millions of American workers who still can't find a job.

If we can bail out the big banks that got us into this financial mess, shouldn't this Senate be able to act quickly to help the people hit hardest by this recession—unemployed workers?

Apparently not, because there are Members of this Senate who are playing partisan political games and delaying an extension of unemployment benefits. This needs to stop.

Today, more 5 million workers have been unemployed for 6 months or longer. Through no fault of their own, millions of Americans cannot find work because there are now more than 6 unemployed workers for each job opening. Until the job market improves, we have a responsibility to help these workers keep food on the table and pay the mortgage.

Not only is this the right thing to do for families, it is the right investment to make in our economy. An effective

stimulus is timely, targeted and temporary, and that's how this extension is designed.

This extension is temporary. It is targeted at those who have been unemployed for more than 59 weeks and have exhausted their benefits. And no one can question that it is timely.

Unemployment compensation is money that gets spent immediately on necessities. People who are out of work need this money to help pay rent and mortgages, buy food, and pay for gas.

So when we extend unemployment benefits, we are not just helping workers who have lost their jobs, we are helping small businesses across the country by boosting demand for their products and services.

In fact, economists say that dollar-for-dollar, extending unemployment benefits is one of the most cost effective actions we can take to stimulate the economy.

Temporary extensions of unemployment benefits are an especially effective stimulus when the long-term unemployment rate is high, and, unfortunately, that is the situation today. Nationally, the number of long-term unemployed—those jobless for 27 weeks or more—rose to 5.4 million in September. In my home State, New Hampshire, the number of long-term unemployed has more than tripled in the past year.

I do not understand why any Senator would delay an extension of unemployment compensation that will help workers and small businesses in every single State.

People are counting on us to act now. American workers who have exhausted unemployment benefits cannot wait another week to pay the rent or buy groceries.

I urge my colleagues to stop the games and pass this critical extension without further delay.

Mr. President, I yield the floor and suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

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

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

CLIMATE CHANGE

Mr. CARDIN. Mr. President, I have the honor of chairing the United States Helsinki Commission, representing the Senate. The Helsinki Commission is the U.S. participation in the Organization for Security and Cooperation in Europe. Fifty-six countries representing Europe, Central Asia, Canada, and the United States got together in 1975 in order to further advancements in security, in human rights, and in economics.

We had our full meeting in Athens this past weekend, and the center subject for that meeting was climate change and the need for the international community to come together to enact meaningful goals for reducing greenhouse gases and carbon emissions. It was clear, from the urgency of this mission, that we need to act now; that the circumstances of floods and droughts in so many parts of the world are causing immediate concern. We now have what is known as climate migrants—people who are forced to leave their countries because of the impact of global climate change. This is causing serious concerns in many parts of the world in regard to stability and security, which affects U.S. interests.

I know each of us in our own States can give our own examples of the impact of climate change. In my State of Maryland, the residents of Smith Island understand that their island is disappearing during their lifetime because of sea level changes, due in part to global climate change. The watermen in Maryland know their livelihood is being jeopardized because of the warming of the Chesapeake Bay, affecting sea grasses, which affects the ability of the blue crab to survive. So we all know the immediate impact.

But in Athens it became apparent to the international community that we need to act now. We need to act now for the sake of our security, we need to act now because of the economic imperative, and we need to act now because of the environmental risk. The good news is it was apparent to all of us that there is a common solution. If we deal with our energy issues, we can solve all three of those problems.

We can strengthen our economies, particularly in these difficult times, by creating good new jobs; we can deal with international security threats, when one nation threatens to cut off its oil or gas to another country; or the fact that so many places in the world that have the mineral wealth have values that are different than our values and we are actually helping to support their values; and for the environmental need of making sure that we deal with global climate change in future generations and we work together.

The question that was asked at this meeting was: Where is the United States? Where is the leadership from the strongest Nation in the world? Well, my reply was: The United States is back. We are ready to assume international leadership on global climate change issues.

The Obama administration has already taken action. They have taken action on CAFE standards for automobiles. They have taken action through the Environmental Protection Agency. It is clear that we are ready to act. The House of Representatives has already passed legislation, and Senator KERRY and Senator BOXER have brought forward the Clean Energy Jobs and the American Power Act, and I am proud to be part of that effort and that

legislation. That legislation builds on the work done in the last Congress with Senator LIEBERMAN and Senator WARNER, and it is very similar to the bill that has passed the House of Representatives.

What that legislation will do is to re-establish U.S. leadership on international efforts to deal with global climate change. The legislation would establish a 20-percent reduction by the year 2020. That is stronger than in the House bill and it establishes America as a leader. It dedicates investment toward domestic clean energy and 21st century infrastructure by providing the necessary investments in wind and solar. These technologies were developed in the United States and now it is time for us to put that technology to work creating jobs in America and alternative renewable energy sources that will wean us off the need for imported oil.

The legislation also dedicates funds for other types of green transportation, which we know can be very valuable. Green transportation represents 30 percent of our greenhouse gas emissions and 70 percent of our oil. We can do much better. I am personally working very hard to promote additional funding sources for public transportation. You can't help, when you travel to Europe, but know that their models are much stronger than ours in transporting people through public transportation. I happen to represent two of the most congested urban areas in our country—Baltimore and Washington. Both have transit systems that are in need of expansion. By doubling the ridership on public transportation, we can reduce our imported oil by 40 percent alone.

This legislation is friendly toward alternative energy sources and nuclear energy, which has a very favorable carbon footprint. It also creates jobs. We know that we can create four times as many jobs here in America by investing in green energy rather than in oil or gas. Japan also knows that. They have been investing in renewable energy sources. Germany knows that. They are investing today because they know it is good for jobs. China knows that. They are investing today. They are going forward with these programs for alternative and renewable energy sources in wind and solar and many other areas, because they know that is where the competition will be tomorrow, and they are going to be prepared. We also need to be prepared.

The legislation Senator KERRY and Senator BOXER have brought forward protects the consumers, making sure that in our transition we don't add to the cost of the typical consumer in America. It also helps industries that are very dependent today on carbon energy sources. It helps them in transition so they can transition to the new energy of tomorrow. It invests in clean coal. We have plenty of coal, but it emits too much carbon. Well, this bill invests in figuring out how we can use

coal in an environmentally friendly way.

The legislation also deals with our international responsibilities. As a developed nation, we have a responsibility to developing countries. They have already been impacted much more adversely than we due to the impacts of global climate change. We need to strengthen their ability and resolve to protect our forests, to be good stewards of our environment, and to help them deal with development. The bill also provides for wildlife—to preserve wildlife.

One last part about the Kerry-Boxer bill. It is deficit neutral. It will not add any additional debt for future generations. This is truly a bill that my two granddaughters, that all our children and grandchildren will benefit from by having a cleaner environment, a safer country through energy security, good jobs for the future, and all without adding to the deficit.

I reminded my colleagues in Athens that for Copenhagen to be successful, we need to have a bill that sets reasonable targets, absolutely—short term and long term. We have to have the mechanisms that get us to those targets in place in Copenhagen. We also have to have the financing to help the developing countries, and we also have to have enforcement. We have to have enforcement.

What do I mean by that? Well, we are not going to accomplish our goals if the United States does everything it does to reduce carbon emissions but we find other countries don't do that and then they send their products here to America at a cheaper price. That is unfair to U.S. manufacturers and producers, and it doesn't accomplish our international goals of bringing down carbon emissions. So what I have suggested is that in Copenhagen there needs to be a mechanism that says if your country does not meet the international standards, your products are subject to a border adjustment reflective of the cost to bring that product in compliance with international carbon standards. That is fair to the manufacturers in those countries that have met those standards, and it also permits us to make sure that other countries in fact do act to deal with their international responsibilities.

I am optimistic. I am optimistic we are going to be able to achieve these results. The urgency of the issue requires us to act. We have Senator KERRY and Senator BOXER who have brought forward a reasonable bill, and hearings are scheduled before the Environment and Public Works Committee later this month.

Recently Senator KERRY and Senator GRAHAM have gotten together on a blueprint on how we can move forward on global climate change legislation in this Congress, and they bring up two subjects I have already mentioned—the use of nuclear power in America, which clearly needs to be part of the solution, and how we can deal with clean burning coal.

In Copenhagen, in December, we need to achieve the international results that are the strongest in setting these goals and mechanisms in place. I am confident that America will be a leader in Copenhagen, and a leader in bringing forward responsible legislation to deal with energy.

For those who say we should go slow, let me tell you, reviving our economy is intrinsically linked to rethinking how we solve our energy challenges. Investing in new technology creates new jobs. Diversifying our energy sources creates competition, stabilizing and lowering energy prices. And thinking beyond fossil fuel buried in unstable and unreliable countries makes us all more secure. Our dependence on old ways, old patterns, and old resources puts us at a financial and national security disadvantage. Those same fossil fuels we burn to drive our cars, power our homes and heat and treat our water are polluting our air, making our children sick, and raising our planet's temperature. The good news is that in solving our energy security challenge, we can also grow our economy and clean our environment.

But let's remember that any deals we reach in Copenhagen and any laws we pass here are but the beginning. The work must continue with earnest follow-through dedicated to truly changing the way we work and live and move around this Earth.

Mr. President, I yield the floor.

The PRESIDING OFFICER. The Senator from Georgia.

Mr. ISAKSON. Mr. President, I ask unanimous consent that I be recognized for up to 5 minutes in morning business, and that I then am followed by the Senator from Michigan, Senator STABENOW.

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

HEALTH CARE REFORM

Mr. ISAKSON. Mr. President, I rise for two purposes. First, there is a huge argument in America with regard to health care, and we all know one of the main contributing factors to the health difficulties of all Americans is the subject of obesity. There are many opinions about ways to address it, but the most comprehensive way to address it is to be intellectually honest in addressing it.

The President of the Coca-Cola Company was published in an October 8 Wall Street Journal article, and it is a brilliant article on obesity, weight, sugar content, and soft drinks. I commend it to the Senate for their study.

Mr. President, I ask unanimous consent to have printed in the RECORD the full article.

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

[From the Wall Street Journal, Oct. 8, 2009]

COKE DIDN'T MAKE AMERICA FAT

(By Muhtar Kent)

Obesity is a complex issue, and addressing it is important for all Americans. We at the

Coca-Cola company are committed to working with government and health organizations to implement effective solutions to address this problem.

But a number of public-health advocates have already come up with what they think is the solution: heavy taxes on some routine foods and beverages that they have decided are high in calories. The taxes, the advocates acknowledge are intended to limit consumption of targeted foods and help you to accept the diet that they have determined is best.

In cities and states across America—and even at the federal level—this idea is getting increased attention despite its regressive nature and inherent illogic.

While it is true that since the 1970s Americans have increased their average caloric intake by 12%, they also have become more sedentary. According to the National Center for Health Statistics 2008 Chartbook, 39% of adults in the U.S. are not engaging in leisure physical activity. The Centers for Disease Control and Prevention has found that 60% of Americans are not regularly active and 25% of Americans are not active at all. The average American spends the equivalent of 60 days a year in front of a television, according to a 2008 A.C. Nielsen study. This same research data show that the average time spent playing video games in the U.S. went up by 25% during the last four years.

If we're genuinely interested in curbing obesity, we need to take a hard look in the mirror and acknowledge that it's not just about calories in. It's also about calories out.

Our industry has become an easy target in this debate. Sugar-sweetened beverages have been singled out for demonization in spite of the fact that soft drinks, energy drinks, sports drinks and sweetened bottled water combined contribute 5.5% of the calories in the average American diet, according to the National Cancer Institute. It's difficult to understand why the beverages we and others provide are being targeted as the primary cause of weight gain when 94.5% of calorie intake comes from other foods and beverages.

Those pushing for this tax lack some essential facts, not to mention some basic common sense. Over the past 20 years, the average caloric content of soft drinks has dropped by nearly 25%. This is due in large part to a determined focus by our company and others on the diet/light category with brands like Diet Coke, Coca-Cola Zero and Powerade Zero. Even soft drinks with sugar, like Coca-Cola, contain no more calories (140 calories in a can) than common snacks, breakfast foods and most desserts served up daily in millions of American homes. And while obesity rates have skyrocketed, sales of regular soft drinks decreased by nearly 10% from 2000 to 2008, according to the industry publication Beverage Digest.

So where are all of the extra calories in the American diet coming from? Research from the United States Department of Agriculture shows that added sugars, as a percentage of total daily available calories, have declined 11% since 1970. Yet the percent of calories from added fats and flour/cereal products has increased 35% and 13%, respectively, during that same time period.

Will a soft drink tax change behavior? Two states currently have a tax on sodas—West Virginia and Arkansas—and they are among the states with the highest rates of obesity in the nation.

Obesity is a serious problem. We know that. And we agree that Americans need to be more active and take greater responsibility for their diets. But are soft drinks the cause? I would submit to you that they are no more so than some other products—and a lot less than many, many others.

As a leader in our industry, we have a role to play in solving this issue. Globally, we have led the industry for nearly 30 years with innovations across the diet and light beverage categories. Today, more than 25% of our global beverage portfolio is comprised of low- or no-calorie beverages.

Policy makers should stop spending their valuable time demonizing an industry that directly employs more than 220,000 people in the U.S., and through supporting industries, an additional three million. Instead, business and government should come together to help encourage greater physical activity and sensible dieting, while allowing Americans to enjoy the simple pleasure of a Coca-Cola.

TRIBUTE TO FURMAN BISHER

Mr. ISAKSON. Mr. President, on Sunday of this past week, an event of journalistic magnitude took place in the city of Atlanta and the State of Georgia. A man by the name of Furman Bisher published his last sports column in the Atlanta Journal-Constitution. He typed that column on the same manual Royal typewriter upon which he typed his first column 59 years ago.

Furman Bisher is a distinguished employee of the Atlanta Journal-Constitution, a distinguished resident of our city and our State. Unlike many in his profession, he had a profound positive effect on his city and his State and on sports. Furman Bisher started writing in Atlanta, GA when Atlanta's only professional sports team was the Atlanta Crackers, a Double-A team playing in a small bandbox stadium in Ponce de Leon Park. In the 1960s, as his career emerged, he, along with Jesse Adler, were the principal writers of sports in the Atlanta Journal-Constitution. He began to be published in other magazines, magazines such as Sports magazine, magazines such as the Sporting News. He developed respect around the United States as a gifted, talented, and honest sports writer.

Had it not been for Furman Bisher, the Atlanta Braves probably would not be in Atlanta, GA because when Mills B. Lane and Mayor Ivan Allen risked what then was a huge amount of money, \$18 million, to build a major league sports stadium without a sports team, it was not until Furman Bisher went and talked to the Bartholomay family who were getting ready to move the Milwaukee Braves from Milwaukee and convinced them to bring major league baseball for the first time ever to the South.

The same was true a few years later when Rankin Smith petitioned to buy the first NFL franchise to exist in the South, and that \$7.5 million purchase happened for a lot of reasons but probably the most important of which was Furman Bisher.

What is so great about Furman is he could make sports come alive, from cricket to football, from boxing to golf. His writing on boxing is historic and his following of Atlanta native Evander Holyfield helped elevate Evander to where he became the Heavyweight Champion of the World. But probably

nothing was more important than the years of coverage of the greatest golf tournament on the face of the Earth—the Masters. None other than Bobby Jones, none other than Jack Nicklaus, none other than Arnold Palmer, none other than Tiger Woods acknowledged that the gifted writing of Furman Bisher about that treasured tournament helped to elevate it to where it is today, the preeminent event in golf around the world.

A lot of people contribute a lot to their profession. We in Georgia are proud of so many who have given so much to our State. Today I want to pay tribute to a man who for 59 dedicated years covered sports in Georgia and made it possible for many great things to happen, a man who was gifted, a man was talented and a man who, even today, shares his wisdom and his commitment to sports as he approaches his 91st birthday.

On a personal note, as a young boy and a sports fan in the late 1940s and 1950s, I used to rush to the mailbox to get our Atlanta Journal and our Atlanta Constitution and I didn't go to the funny papers, I didn't go to the comics, I didn't go to the crossword puzzle. I went to Furman Bisher. Furman was a great writer and to me an inspiration for sports in Atlanta, GA. I wish him and his family the very best in their retirement.

I yield the remainder of my time.

The PRESIDING OFFICER. The Senator from Michigan is recognized.

UNEMPLOYMENT COMPENSATION

Ms. STABENOW. Mr. President, I rise this afternoon to discuss our efforts to extend unemployment benefits to over 15 million people who are looking for work today. That is only the number of people we know are out there based on the unemployment statistics, not those who have tried for a long time and been unsuccessful and are currently neither in the workforce nor are working two or three or four part-time jobs trying to hold things together for themselves and their families. We do know this. Over 15 million people today who are trying to support their families in this very tough economic time need our help immediately to stay afloat.

Two nights ago I asked for agreement to move to the unemployment insurance bill. Our leader had asked for agreement to do that before. This has already passed the House and is awaiting Senate action. Unfortunately, Republican colleagues objected. They have objected several times and continue to object to our bringing forward an effort to help families who, through no fault of their own, find themselves in an extraordinarily difficult situation, relying on unemployment in order to be able to keep their families afloat.

Unemployment is not a partisan issue. Right now, 14 States and the District of Columbia, blue States and red

States, have unemployment rates over 10 percent: Illinois, Georgia, Alabama, Florida, North Carolina, Ohio, Tennessee, Kentucky, South Carolina, California, Oregon, Rhode Island, Nevada and, of course, my great State of Michigan, where we are now seeing over a 15.3-percent unemployment rate, the highest in the country.

Our people are hurting and they have been hurting for a long time. I was very proud of our President as he came into office for understanding that and joining with us in a recovery package to make sure we were extending unemployment at the beginning of the year. But unfortunately the recession continues and people are still hurting. Democrats are unemployed and Republicans are unemployed. The people getting unemployment insurance are looking for work, they are pounding the pavement and they are putting in applications every day. This is not their fault.

The economic situation in this country is not their fault. The bank failures are not their fault. The foreclosure crisis is not their fault. But they are the ones paying the price every single day. Every single day, every single time the other side objects to bringing up this bill, people across the country are hurting. They are exhausting their unemployment insurance and are being left with no way to pay the mortgage, to take the kids to the doctor, to pay their heating bills, to be able to hold it together, waiting for this economy to turn around and jobs to be available, jobs they so desperately want.

It is getting cold outside. Winter is coming and families across the country are turning on their heaters for the first time in months. They need us to extend unemployment insurance so they can keep the heat on for their kids. Pulling the rug out from under these hard-working men and women doesn't just hurt them and their families, it hurts every community and it hurts our economy in America. When they can afford to pay their bills, that money goes back into the economy, as we know. We know that for every \$1 spent on unemployment benefits, \$2.15 goes back into the economy. That is exactly what we need at this point—immediate stimulus.

This is an incredibly difficult time for families, certainly in my State and all across the country. Blocking this legislation, saying no to everything, delaying everything—that is not going to pull us out of this recession and it is not going to help American families.

The time to act is now, right now. I urge my colleagues to stop blocking an important effort to help working men and women in this country, people who have followed the rules all their lives, have done nothing but find themselves at this place and this time, with the economy where it is, as we rebuild it—and we are and we will. We need to support them so they can do the right thing for their families and keep a roof over their heads and food on the table

and the lights on and the heat on and know that their country has got their back.

That is what this is about. We need to pass the extension of unemployment insurance now. I hope we will.

I yield the floor and I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

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

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

Mr. BROWN. I ask unanimous consent to speak up to 10 minutes as in morning business.

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

HEALTH CARE REFORM

Mr. BROWN. Mr. President, last night I joined Senator UDALL from New Mexico and Senator WHITEHOUSE and the Presiding Officer, Senator BURRIS, and some others. Senator DURBIN, the other Illinois Senator, was there too for part of the evening, talking about the public option and why it is so important to keep the insurance industry honest, to help constrain costs and to compete directly with private insurance so that people, as they join those who are uninsured, who want to get insurance, can choose. They can choose Cigna, they can choose Aetna, they can choose WellPoint, they can choose United. In my State they can choose Medical Mutual, or they can choose a public option, so they would have that choice and it provides more choice to people. It is not a government takeover in any way. It simply provides more choice for those people who are insured.

I come to the floor, day after day, sharing letters I received from people in Ohio, from Cincinnati and Dayton, from Athens and Saint Clairsville, from Toledo and Lima. People who generally write most of these letters are people who were satisfied with their health insurance. They thought they had pretty good health insurance.

They find out, when they get sick, that their health insurance isn't what they thought it was. They end up battling every week with their insurance company trying to get something paid for. They find out maybe their insurance coverage got cut off—insurance companies call it rescission, their official bureaucratic word—as so many people lose their health insurance when it has gotten too expensive. These are people who were satisfied with their insurance and then found out it is not so great after all.

I wish to share some of the letters I have received from Ohio. This is from Tony from Rocky River. He writes:

I'm the Executive Director of a provider of residential and group homes for people with developmental disabilities. We employ 250

staff members, most of whom make a starting wage of \$8.50 per hour. We offer health insurance to staff who work at least 24 hours a week. We don't have a Cadillac plan, we provide just basic coverage. We believe in doing this [because] many of our staff members are part-time workers and have to work two other jobs just to pay for bills, groceries, and utilities. We recently started negotiations with our health insurance carrier for our 2010 rates. We were informed that we may have an 84 percent increase over last year's rate.

That is almost double what they had last year.

We were told the increase was due, in part, because one staff member [out of 250] had a heart attack in the past year and another staff member is being treated for renal failure. We were shocked as we already pay close to \$500,000 per year for our coverage. We could now be facing an additional \$420,000 just to cover [the same number of] employees. You would expect in a staff of 250 that someone would have an illness, yet we are being severely penalized for being responsible and offering coverage to our workers and their families.

That is what is happening. This is not a tiny, small business, but in a small business, so often one person, two people, three people get an expensive illness. Sometimes the insurance company will cut them off individually or as a group. Other times the increase for insurance will be so much that people such as Tony may not be able to offer insurance to their employees. This is so important. These are low-income people making \$8.50, \$9 an hour doing work that most people in this Chamber wouldn't be willing to do, getting paid such low wages. At least they offer health insurance. That may be gone. That is why reform is so important. That is why the public option is so important, so we don't see this kind of profiteering by the insurance industry.

Rebecca from Summit County writes:

I have two sons with severe ADHD. They were both diagnosed at an early age, due to their extremely impulsive behavior. Each son requires three prescriptions per day to enable them to go to school and get through their daily life. With the medication and periodic exams with a neurologist, they are doing well. My employer pays over half the cost of our premiums, but my portion of the premium is \$600 per month out of my paycheck. I'm worried that soon my employer will be unable to continue our coverage. As it is, my husband and I don't go to the doctor because we simply can't afford it. Even though it might not seem like a life-or-death situation, it really is. Without their medication, my sons have serious illnesses with impulsiveness that could be dangerous. If they don't complete their education, they won't be able to support themselves in the future.

Nothing scares a parent more than leaving behind children who can't support themselves because of some kind of illness. I don't think anything terrifies parents more than that.

I know our situation isn't unique, so I hope something can be done to help all Americans.

Rebecca's is another plea for help from this institution. It is simply unconscionable for us not to move forward.

Let me close talking about Virgil from Akron. He is a retired 30-year vet-

eran of the Akron Police Department and has to spend one-third of his retirement pay on health insurance premiums. Virgil retired in 1999, when the premium for him and his wife Marlene was \$45. Only 11 years later, Virgil and Marlene pay monthly premiums of \$700—from \$45 to \$700. This is a retired 30-year veteran police officer who served his community as a law enforcement official for three decades. Struggling with high out-of-pocket medical expenses, Virgil and his family resorted to pill cutting to make their prescriptions last longer. Virgil and the dedicated police officers, firefighters, teachers, nurses, and public servants deserve better than. They deserve health reform now.

I yield the floor and suggest the absence of a quorum.

The PRESIDING OFFICER (Mr. UDALL of New Mexico). The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

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

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

COMMERCE, JUSTICE, SCIENCE APPROPRIATIONS

Mr. VITTER. Mr. President, I stand to urge all of my colleagues, Democrats and Republicans, to support having a vote on Vitter amendment No. 2466 to the Commerce-Justice-Science appropriations bill.

Unfortunately, the majority leader and others have been working quite hard to block that vote. I believe this issue demands attention, demands focus, demands reasonable debate, and a vote.

What is this issue? This is the revised version of my amendment to that appropriations bill:

None of the funds provided in this Act or any other act for any fiscal year may be used for collection of census data that does not include a question regarding United States Citizenship.

Mr. President, I ask unanimous consent to have printed in the RECORD my amendment.

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

(Purpose: To provide that none of the funds provided to the Census may be used for collection of census data that does not include a question regarding status of United States Citizenship)

On page 110, line 7, strike "activities." and insert "activities: *Provided further*; That none of the funds provided in this Act or any other act for any fiscal year may be used for collection of census data that does not include a question regarding United States Citizenship."

Mr. VITTER. Mr. President, the point is very simple. A big decennial census is coming up next year. Under the current plans of the Census Bureau, we are going to count everybody in the

country—and that is fine—but we are not going to distinguish, we are not going to know the difference between citizens and noncitizens. I think that is not fine, I think that is crazy, and I think it will lead to some dangerous results.

First of all, the whole purpose of a census is to give us maximum information, maximum tools we can use in a whole host of policy debates and Federal programs. Certainly, it is useful to know both the overall number of persons in the country but also the subcategories of citizens and noncitizens. That is particularly relevant because the immigration debate is important, and we need to get our hands around that issue.

Secondly, and even more important, it is important because I believe when we use the census for congressional redistricting for determining how many U.S. House seats each State gets, we should count citizens, but we should not count in that context noncitizens, including illegal aliens.

I think it is crazy, nutty, and I think the average American certainly agrees that we would determine how many U.S. House Members every State gets to represent it in the Congress and count noncitizens, including illegal aliens. I do not think the Founding Fathers set up a democracy—in many ways one of the most important democratic institutions in history in the U.S. Congress—to represent noncitizens. Why are we not adding in the entire population of France or Belgium or Brazil? For obvious reasons, because this is a democracy to represent citizens of the United States.

Of course, we can only avoid that in terms of congressional reapportionment if we know the subcategories of the count, citizens versus noncitizens. I urge all of my colleagues to support having a vote on this Vitter amendment to the Commerce-Justice-Science appropriations bill and then, of course, when we get to a vote—and we will—hopefully, on this bill but sometime in the near future—I assure you, we will—to support in a bipartisan way this amendment.

Let me make two final points. First of all, I have made every reasonable attempt to get this vote. I had two other amendments on the list for votes on this bill that were important to me and I think are important substantively. I have told, through our representatives, the majority leader and his office that I will forgo votes on those two other amendments. We need a vote on this crucial amendment.

Secondly, I remind particular Senators from eight States that their States will lose representation in the U.S. House if we count noncitizens versus if we were to do congressional reapportionment only counting citizens.

I believe everybody should be focused on this issue. I believe everybody should support my commonsense position. But surely the Senators from

those eight States would want to vote for their States' self-interest. Those States are Indiana, Iowa, Maine, Michigan, Pennsylvania, Mississippi, North Carolina, and, of course, my State of Louisiana.

Again, I particularly appeal through the Chair to the Senators from those eight States—Indiana, Iowa, Maine, Michigan, Pennsylvania, Mississippi, North Carolina, and Louisiana. Obviously, for the very interests of your State, please support getting a vote on the Vitter amendment. Please support the Vitter amendment. Your State's representation in the U.S. House hangs in the balance. Of course, that means please do not vote for cloture on the CJS bill until we can have such a vote.

I yield the floor.

The PRESIDING OFFICER. The Senator from Oklahoma.

ENERGY AND WATER DEVELOPMENT

Mr. COBURN. Mr. President, we are about 10 minutes away from a vote on the energy and water conference report. I wanted to put forward one very cogent reason for voting against this bill.

This bill hides from the American people information to which they are entitled. There was clearly accepted by unanimous consent an amendment that said the reports in that bill will be made available to all Senators and all the citizens of this country—and rightly so—unless it had a national security implication for not exposing that information.

The best government is the one that is the most open. The best government is the one in which people have trust. By bringing this bill to the floor out of conference and dropping the transparency amendment, the transparency section where one can actually see what is going on in Washington, where one can actually see where their money is being spent, where one can actually see the information that a select group of Senators see but other Senators do not, as well as the American people—if, in fact, one can see that, that breeds accountability in Washington.

If my colleagues, in fact, vote for this conference report, what they are saying is they want to keep the American people in the dark; they do not want them to see what we are doing; they do not want them to see how we are doing it; they do not want them to see why we are doing it. They want the elite position of making a judgment without being held accountable.

I urge my colleagues to vote against this conference report.

I yield the floor and suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The bill clerk proceeded to call the roll.

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

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

CONCLUSION OF MORNING BUSINESS

The PRESIDING OFFICER. Morning business is closed.

ENERGY AND WATER DEVELOPMENT AND RELATED AGENCIES APPROPRIATIONS ACT, 2010—CONFERENCE REPORT

The PRESIDING OFFICER. Under the previous order, the Senate will resume consideration of the conference report to accompany H.R. 3183, which the clerk will report.

The bill clerk read as follows:

Conference report to accompany H.R. 3183, an act making appropriations for energy and water development and related agencies for the fiscal year ending September 30, 2010, and for other purposes.

The PRESIDING OFFICER. The Senator from North Dakota.

Mr. DORGAN. Mr. President, I ask unanimous consent that at 2:15 p.m. today, all postcloture time be yielded back and the Senate then proceed to vote on adoption of the conference report to accompany H.R. 3183, the Energy and Water Appropriations Act; further, that no points of order be in order.

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

Mr. LEVIN. Mr. President, I will vote to approve this conference agreement to provide over \$33 billion for a variety of energy and water infrastructure projects and programs. Michigan is surrounded by the Great Lakes, and the funding provided in this conference report to the Army Corps to maintain the navigational infrastructure and to clean up and protect the Great Lakes is especially important. Michigan also will benefit from the investments in clean energy technologies and energy efficiency programs provided in this bill that will help create a more sustainable economy while producing quality jobs.

The conference report includes important funding for a wide range of energy research and technology development at the Department of Energy, including advanced vehicle technologies, hydrogen and fuel cell technologies, wind and solar energy technologies, and biomass and biorefinery systems. This conference report also includes funding for critical areas of science including high energy and nuclear physics, biological and environmental research, and advanced scientific computing research. Research and technology development in these groundbreaking areas of energy and science will continue our nation's advancement toward greater use of technologies that will reduce our dependence on oil, reduce our carbon footprint and greenhouse gas emissions, and increase our reliance on our home-grown renewable resources. Federal Govern-

ment support of research and development in these technology areas will also help ensure that our companies remain competitive in the global marketplace and ensure that the U.S. remains on the competitive edge of technology development and scientific discovery.

I am particularly pleased that the conference report includes \$12 million in funding for research and development, conceptual design and engineering for the Facility for Rare Isotope Beams, FRIB, to be built at Michigan State University. Inclusion of this funding in the conference report is critical to moving forward with this facility. Under the Department's current plans, engineering work would continue in fiscal year 2011, with initial design work beginning in fiscal year 2011 and continuing into fiscal year 2012. Construction of the facility would begin in fiscal year 2013. MSU has solid and well-known expertise in the field of rare isotopes and nuclear physics, with the largest nuclear physics faculty in the nation and a nuclear physics graduate program ranked number two in the U.S., second only to MIT. MSU is currently the home of the National Superconducting Cyclotron Laboratory, NSCL, which is the most advanced rare isotope accelerator in the U.S. and is the largest nuclear science facility on a university campus. FRIB is the next generation rare isotope facility and the Department of Energy's decision in December 2008 to select MSU for FRIB is an indication of the university's preeminence in this field.

I am also pleased that the conference report includes funding for several important energy projects in Michigan that will advance the development of technologies including advanced batteries and energy storage systems, plug-in hybrid vehicles, solar and photovoltaic systems, wind energy, biomass, and energy efficiency. Michigan companies and universities are well-positioned to contribute to the development of these advanced technologies, offering both significant expertise in these technology areas and a highly trained workforce to carry out the manufacture and production of these technologies.

About 180 million tons of goods are transported to and from Great Lakes harbors and ports each year, providing fuel to heat and cool homes and businesses, limestone and cement to build roads and buildings, iron ore to produce steel, and grain to feed our Nation and for export overseas. Throughout the Great Lakes, there are significant dredging and other operation and maintenance needs so that freighters can safely deliver these vital commodities. There is a significant backlog in the work required to maintain the Great Lakes navigational system. The Army Corps estimates there is a backlog of 17 million cubic yards of material that needs to be dredged in the Great Lakes, which is estimated to cost to about \$200 million, to restore

the full functionality of the navigational system. The conference report includes an additional \$6 million above the administration's budget to address this dredging backlog at Michigan harbors and waterways, and attend to other operations and maintenance needs, including repair and renovation of breakwaters, improvements to locks, and disposal of dredged materials.

An important element of the Great Lakes navigational system is the Soo Locks, which connects Lake Superior with Lakes Huron and Michigan. Every year, over 80 million tons of commodities pass through the Soo Locks, the bulk of which move through the Poe Lock, the larger of the two operational Soo locks. To ensure shipping is not impeded at the Soo Locks, it is important that another Poe-sized lock be built. Construction on the new lock began this past July, and it is important that this project be completed so that vital industrial and agricultural shipments are not impeded. The conference report includes about \$1 million for this project, which is barely a dent in what is needed for this project; the Army Corps estimated that it could use about \$100 million in fiscal year 2010 for this \$500 million project. I will continue to urge the Administration to include funding for this important project in their budget, and I am glad the conference report also makes this strong recommendation. The conference report states that "the conferees are deeply concerned that despite congressional support for the project, the support of the states in the region, and the fact that the Army Corps of Engineers recognizes the Soo Locks as the 'single point of failure' that can cripple Great Lakes shipping, the administration has failed to include funding for a second large lock, either under the authority provided in the American Recovery and Reinvestment Act, ARRA, or in its budget request for fiscal year 2010." I hope this lack of funding will be rectified in next year's budget.

This bill includes important funding for several Great Lakes programs including the Great Lakes Fishery and Ecosystem Restoration Program, Remedial Action Planning Technical Assistance, and the Sediment Transport Models and Sediment Management Planning program. These programs will help restore and protect the Great Lakes.

I am also pleased that the bill includes over \$6 million for the Corps' work to prevent the introduction of Asian carp and other invasive species into the Great Lakes. Invasive species can dramatically change the fishery and ecosystem by outcompeting native species for food and habitat. Asian carp are particularly devastating because they consume so much food and reproduce quickly. This funding will allow the Corps to operate the barrier project and begin work on a study to consider options to improve the barrier projects' efficacy. The conference report also

provides authority for the Corps to take measures to prevent Asian carp from bypassing the electric dispersal barrier. This authority is needed because just recently, the Corps discovered that the Asian carp had moved upstream in the Des Plaines River, and if the Des Plaines River floods, which it does regularly, the floodwaters could carry Asian carp into the Chicago Sanitary and Ship Canal above the dispersal barrier. It is critical that the Corps do what it can to prevent the introduction of Asian carp into the Great Lakes.

The bill also provides funding for a variety of other water infrastructure and environmental restoration projects in Michigan. Funding is provided for two wastewater projects in Michigan—one in Genesee County and the other in the city of Negunee in Michigan's Upper Peninsula. Improving sewer systems is important not only for public health, but also to eliminate untreated discharge into surface waters. Two Michigan flood control projects will also benefit from passage of this bill. The aging Hamilton Dam in the city of Flint will benefit from \$240,000 that will enable the Army Corps to plan how to improve this dam that is in danger of failing. Flood control improvements at the Cass River in Spaulding Township are identified to receive priority funding from the Army Corps. Funding is also provided for three environmental restoration projects in Michigan. Funding of \$90,000 will be used by the Army Corps to continue its partnership with the city of Lansing in the Grand River waterfront restoration project, which includes a range of projects, such as shoreline and ecosystem restoration, as well as recreational elements. I am pleased that \$100,000 is included to implement the Lake St. Clair Management Plan. Lake St. Clair and the St. Clair River that are part of the connecting channel in the Great Lakes and have been plagued by invasive species, pollution, urban sprawl, and sewer overflows. The funding in the bill will allow the Corps to move forward to finally implement on-the-ground restoration projects which are very much needed.

This appropriations bill will help move our country towards greater energy security, advance technology to strengthen our manufacturing and international competitiveness, improve our shipping and boating infrastructure, and improve the environment, and I support its passage.

Mr. DORGAN. Mr. President, we will vote in about 4 minutes. I want to note that yesterday's cloture vote had 79 votes in favor of cloture. Clearly, there is strong support for this energy and water conference report. It provides an investment in water and energy projects across the country. It is fiscally responsible. It is slightly less than 1 percent above last year's expenditure.

What I wanted to say, however, is we that had to invoke cloture, which took

us two days. Even though we had a cloture vote yesterday clearly demonstrating very substantial support for the bill, we have now sat at parade rest for almost 30 hours because someone insisted on 30 hours postcloture despite the fact that we will have a strong vote for this conference report.

The reason for the insistence on 30 hours occurred was because the conference report did not include one amendment that was accepted in the Senate offered by one of my colleagues. I supported that amendment by the way. We were not able to get that through the conference with the House. It urged greater transparency on reports from the Energy Department. I regret that is not in the conference report, but the House would not accept it. Because of that, we have now been sitting around for the better part of a week, 30 hours postcloture.

My point is that we have to get appropriations bills moving. Apparently, it does not mean anything to some people. If their amendment did not get in the conference report, they don't mind holding up the Senate for a part of a week. That doesn't mean much to some people.

I just wish we would have a little more cooperation. The very same people who said we ought to get our work done by passing appropriations bill and avoiding omnibus bills are the same ones who hold up the Senate. If we could get a little bit of cooperation, we could get these appropriations bills completed.

This is a good bill. It makes very significant and important investments all around the country in water infrastructure and energy projects. The fact is, it is less than 1 percent above last year's spending level. No one is going to take a look at this bill and suggest it overspends. It does not.

One of my colleagues talked about earmarks in the bill. The fact is, we can take out all the earmarks, and there are some in here. It is the case that Congress has a role to decide both through the water development authorizing bill and also in the appropriations conference report before us where it wants to invest its money in major water projects across the country. If the Congress decided not to do that, every single penny would go downtown to the agency, and some GS-14 would decide where to do that. All this talk about earmarks is not going to save a penny. The fact is, we have substantially cut back on earmarks and have made them transparent.

My point mainly is that we are going to vote in a minute. We could have voted on this already, but we had to file cloture, then wait 30 hours. It is reflective of what is happening in this Chamber. Regrettably, there is very little cooperation.

Mr. President, I yield the floor.

The PRESIDING OFFICER. The question is on agreeing to the conference report to accompany H.R. 3183.

Mr. LEAHY. I ask for the yeas and nays.

The PRESIDING OFFICER. Is there a sufficient second?

There appears to be a sufficient second.

The clerk will call the roll.

The bill clerk called the roll.

Mr. DURBIN. I announce that the Senator from Massachusetts (Mr. KERRY) and the Senator from Louisiana (Ms. LANDRIEU) are necessarily absent.

Mr. KYL. The following Senator is necessarily absent: the Senator from Mississippi (Mr. COCHRAN).

The PRESIDING OFFICER. Are there any other Senators in the Chamber desiring to vote?

The result was announced—yeas 80, nays 17, as follows:

[Rollcall Vote No. 322 Leg.]

YEAS—80

Akaka	Feingold	Nelson (NE)
Alexander	Feinstein	Nelson (FL)
Barrasso	Franken	Pryor
Baucus	Gillibrand	Reed
Begich	Gregg	Reid
Bennet	Hagan	Risch
Bennett	Harkin	Roberts
Bingaman	Inouye	Rockefeller
Bond	Johnson	Sanders
Boxer	Kaufman	Schumer
Brown	Kirk	Shaheen
Brownback	Klobuchar	Shelby
Burr	Kohl	Snowe
Byrd	Kyl	Specter
Cantwell	Lautenberg	Stabenow
Cardin	LeMieux	Tester
Carper	Leahy	Thune
Casey	Levin	Udall (CO)
Collins	Lieberman	Udall (NM)
Conrad	Lincoln	Vitter
Corker	Lugar	Voinovich
Cornyn	McConnell	Warner
Crapo	Menendez	Webb
Dodd	Merkley	Whitehouse
Dorgan	Mikulski	Wicker
Durbin	Murkowski	Wyden
Enzi	Murray	

NAYS—17

Bayh	Ensign	Isakson
Bunning	Graham	Johanns
Burr	Grassley	McCain
Chambliss	Hatch	McCaskill
Coburn	Hutchison	Sessions
DeMint	Inhofe	

NOT VOTING—3

Cochran	Kerry	Landrieu
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The conference report was agreed to. The PRESIDING OFFICER. The Senator from Illinois is recognized.

Mr. BURRIS. Mr. President, I move to reconsider the vote and move to lay that motion on the table.

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

The motion to lay on the table was agreed to.

(At the request of Mr. REID, the following statement was ordered to be printed in the RECORD.)

VOTE EXPLANATION

• Mr. KERRY. Mr. President, I was necessarily absent for the vote on the conference report to accompany Energy and Water Development and Related Agencies Appropriations Act, 2010, H.R. 3183. If I were able to attend today's session, I would have voted yes on the conference report.●

Mr. HATCH. Mr. President, today the Senate voted 80 to 17 in favor of the Energy and Water appropriations bill, H.R. 3182. I praise Chairman BYRON L.

DORGAN and Senator ROBERT F. BENNETT, the Republican ranking member, and the other members of the Energy and Water subcommittee for putting together what I consider to be a good bill and certainly a big improvement over the energy budget sent to us by the President.

Knowing that the funding measure would pass, I chose to vote against this bill, which funds the Department of Energy, as a signal to the Obama administration and the DOE that American taxpayers want and need a serious pro-energy plan, not the anti-energy strategy being pushed on us by the United Nations Intergovernmental Panel on Climate Change, which this administration has adopted.

When the Secretary of Energy testifies before Congress that he believes it is his job to cut carbon-dioxide emissions by 80 percent in the next 40 years, then we know our Nation does not have an energy policy; rather, we have an anti-energy policy. Cutting our Nation's emissions by 80 percent would provide two certain outcomes: First, reducing CO₂ at that reckless pace would certainly devastate our economy and ruin our Nation's global competitiveness. Secondly, according to the U.N.'s own calculations for CO₂'s warming ability, it would result in no perceptible reduction in global temperatures. At best, it would reduce temperatures by about 0.1 degrees Centigrade after 40 years of economic torture.

Maybe the media have fallen for this dangerous distraction to a real energy policy, but the polls show that the taxpayers have not.

MORNING BUSINESS

Mr. BURRIS. 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. Without objection, it is so ordered.

Mr. BURRIS. Mr. President, I would like to speak in morning business.

The PRESIDING OFFICER. The Senator is recognized.

HEALTH CARE REFORM

Mr. BURRIS. Mr. President, earlier this week I came to the Senate floor to discuss some of the misinformation we have seen about the issue of health care reform. Just this morning, I joined my freshmen colleagues to knock down some of the persistent myths about reform and particularly about the need for a public option.

As we prepare to consider a health bill before the full Senate, I would like to discuss the way forward from here. I believe our path is very clear. The only way to achieve meaningful health care reform and bring costs down is through a public option that will bring real competition into the system. That is why I will not vote for any health care

bill that does not include the public option.

Insurance companies should have to compete for your business just like any other company. This principle has always been at the heart of America's economy, and it does not make sense for insurance companies to get a free pass. As competition shrinks, profits soar. A public option is the only way to restore choice to the marketplace. It is the key to freedom, accountability, and fair play. That is why I will not compromise on this point.

On Tuesday, our colleagues in the Finance Committee reached a new milestone on the long road to reform. They became the last of five committees in both the House and the Senate to take up this legislation. When they passed their version of the bill, it was the furthest any health reform measure has ever come. Now let us make it a reality.

I congratulate my distinguished colleagues on their significant achievement. I applaud their leadership on this difficult issue. But it was disappointing this legislation did not include a public option. As we move forward and merge the Finance Committee bill with the HELP Committee's version, I will work with my friends to make sure the combined measure does include a public option. In a very short time, every Member will have the opportunity to shape this important legislation. When this bill comes before the Chamber, we will have the chance to make good on the promise Teddy Roosevelt made almost 100 years ago when he first called for sweeping health care reform.

This pivotal debate is nearly at an end. The time for action is upon us. That means it is time to separate fact from fiction. It is time to discuss the facts and drown out the noise. The public option will restore choice and competition to an insurance market currently dominated by only a few companies. The public option will spur fresh accountability and a return to fair practices. Premiums will come down. Relative health outcomes will go up. For the first time in years, insurance corporations will need to compete for business. They will need to be accountable to customers and not only to shareholders. That is what reform with a public option will mean to the American health care system.

When opponents of reform talk about death panels, a government takeover, and socialism, they are trying to distract us from the issue at hand. When they claim the Finance Committee bill will make premiums go up instead of down, it is the same sleight of hand we have seen from the big corporations many times before.

They know they cannot win the argument on the merits so they are trying to change the subject. Instead of talking about American families and rising costs, real health outcomes, they need to rely on scare tactics to maintain their monopoly over the insurance

market. That is why it is time to draw a line in the sand. It is time to reject these distractions and stand on the side of the American people.

That is what this debate is about. It is about individuals who send us to Washington to fight for their rights and defend their interests. It is about families who sit around the kitchen table in Illinois and across America. They open their pocketbooks and write larger and larger checks every month. They are wondering when we will have the courage to act on our convictions.

We must not delay another moment. If we fail to act, health care coverage will continue to increase in price and decline in quality. Let us rise to the challenge. Let us seize this moment. There is no doubt the Senate is the greatest deliberative body on the face of the planet. Throughout our history, contentious arguments such as this one have played out on the floor of this Chamber and the old Senate Chamber down the hall. The world knows this Senate can debate. But let it now show them we can also act. Let it show them we can take action.

I yield the floor and suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mr. REID. I ask unanimous consent that the order for the quorum call be rescinded.

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

MEDICARE PHYSICIAN FAIRNESS ACT OF 2009—MOTION TO PROCEED

CLOTURE MOTION

Mr. REID. Mr. President, I move to proceed to Calendar No. 178, S. 1776 and, in the process, I send a cloture motion to the desk.

The PRESIDING OFFICER. The clerk will report.

The legislative clerk read as follows:

CLOTURE MOTION

We, the undersigned Senators, in accordance with the provisions of rule XXII of the Standing Rules of the Senate, hereby move to bring to a close debate on the motion to proceed to Calendar No. 178, S. 1776, the Medicare Physician Fairness Act of 2009.

Harry Reid, Debbie Stabenow, Roland W. Burris, Patty Murray, Mark Udall, Mark Begich, Frank R. Lautenberg, Amy Klobuchar, Jack Reed, Carl Levin, Jeff Bingaman, Sherrod Brown, Sheldon Whitehouse, Barbara Boxer, Kirsten E. Gillibrand, Charles E. Schumer, Jeanne Shaheen, Richard J. Durbin.

Mr. REID. I ask unanimous consent that the cloture vote occur at 5:30 p.m., Monday, October 19, and that the mandatory quorum be waived; further that at 4:30 p.m. on Monday, there be 60 minutes of debate equally divided and controlled between the leaders or their designees prior to the 5:30 p.m. vote.

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

Mr. REID. I now withdraw the motion to proceed.

The PRESIDING OFFICER. The motion is withdrawn.

Mr. REID. I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

Mr. SESSIONS. I ask unanimous consent that the order for the quorum call be rescinded.

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

COMMERCE, JUSTICE, SCIENCE APPROPRIATIONS

Mr. SESSIONS. Mr. President, I join in support of the Vitter amendment, which would preclude any funding in the CJS appropriations bill being used for the 2010 census, if the census does not include a citizenship question. Under current law, the census does not even ask the question about whether individuals in the United States are citizens or not. They ask people how many bathrooms and children they have, all kinds of things, but they don't ask a citizenship question. Congressional apportionment in the U.S. House of Representatives is based on that total population count, including people illegally in this country. I think representation in Congress should be based on the number of legal residents, and it should not be increased because persons here illegally, not eligible to vote, happen to be in that State. That is a matter I hear a lot about from my constituents. They ask how this is possible. They are shocked that is what might be happening. The truth is, it does happen.

So I think Senator VITTER is raising a good question, and I believe his amendment is valid. Our next census will determine the reapportionment of the House of Representatives and Electoral College votes each State has.

The 2010 census form lacks the simple question: Are you a citizen of the United States of America? How accurate can we in Congress expect to be about the composition of our population if we do not ask that question, especially when some estimate there may be as many as 12 million people illegally in the country? Indeed, I think that probably is an accurate figure, so it has an impact. Calculations using some of the interim census data estimates are pretty dramatic and point out the real impacts of this policy.

Using the American Community Survey of the Census Bureau, their estimates for State population, including noncitizen and citizen populations, is instructive. The discrepancy in numbers for reapportionment using those different figures is significant. For example, States that might otherwise expect to gain or expect not to lose population, lose congressional seats, would do so if these numbers are counted. For example, Indiana, Iowa, Michigan, North Carolina, Oregon, Pennsylvania, South Carolina, and Louisiana—all of

those would be expected to stay the same or gain. And if illegals are counted, they will either not gain or lose seats.

So I think that is a pretty important issue. It is not something with which my State is directly involved. But having dealt with the immigration issue over some period of time, and trying to be informed about it, I hear a lot of people raising this fundamental question. I think it would be simple to fix constitutionally. We would simply say: Ask how many people are here legally and use that to be the basis of the apportionment of congressional seats, and not using people who are not here legally. It does not threaten people. It does not mean they will be arrested or anything like that or to be subject to deportation. It simply means when the numbers are all in, we will know how many U.S. residents exist in the various States, and from that number we will be able to apportion our House of Representatives and the Electoral College for the next Presidential election.

I think that is the right thing to do. We need to get away from this other process and urge the support of the Vitter amendment.

I thank the Chair and yield the floor.

The PRESIDING OFFICER. The Senator from New Jersey.

HEALTH CARE REFORM

Mr. LAUTENBERG. Mr. President, I rise to make some comments about the health care bill we are all anxious to see and discuss.

Everyone knows a principal focus of our attention now in the Senate is on the health care reform bill, and we expect a major debate on the precise structure of that bill over the next few weeks. But I want to, in that connection, start my remarks with a quotation from a statement given by the Senator from South Carolina. He said, on June 17, 2009:

If we're able to stop Obama on this, it will be his Waterloo. It will break him.

That is the Republican dominant view on health care reform. The mission is not to do better for the American people but, rather, to destroy the Presidency of Barack Obama. It is an unpleasant scene to witness.

Almost all Americans want to see us fix our health care system. I say "almost" because there is a group of people here who love the status quo: health insurance companies and their lobbyists and CEOs.

Everyone knows health care costs have skyrocketed, and that means everybody pays more. But when working people are under assault to pay more, it could cause a catastrophic confrontation with funds, with money for food and education and other ordinary but essential expenses for living.

America's small businesses are struggling to provide health care for their employees, and more people are less able to afford health care coverage. And while enormous pressure is placed on middle-income families, the largest health insurers are seeing massive profit growth.

Wendell Potter, an executive at CIGNA and some other health insurance companies over the last 20 years, has put it this way. He testified before the Senate Commerce Committee earlier this year, and he said the health insurance companies—and I quote him—“confuse their customers and dump the sick—all so they can satisfy their Wall Street investors.”

That single-minded drive for profits is clear from the numbers. Here is a chart I have in the Chamber showing part of the outrage. This chart demonstrates the massive profit increases at some of our largest health insurance companies. Just look at them. The years for comparison are the year 2000 and 2008.

In 2000, the company called WellPoint earned \$226 million worth of profit. That \$226 million had grown to \$2.5 billion at the end of 2008—an increase of 1,000 percent.

Aetna, one of the biggest: In 2000, they made \$127 million worth of profit. Eight years later, the \$127 million grew to \$1.4 billion—an increase of 990 percent.

Humana: In 2000, they earned \$90 million; in 2008, \$647 million—a modest gain, only 619 percent.

United Health—one of the largest—earned, in 2000, \$736 million; in 2008, \$3 billion, an increase of 304 percent.

Mr. President, we all know who paid the price for those profits: working-class Americans. This condition tells you what we have to be on the lookout for as we develop our plan.

Just as the health insurance industry profits have risen, obviously, so has the CEO compensation. If we look at what has taken place over a 3-year period for the five largest health care companies, the CEO pay has grown steadily, while workers' pay has barely moved. The average health care CEO, over the last 3 years, in these five companies, earned \$14.8 million. That was his—in this case—all his compensation. And the average worker's salary was \$44,200. Look at that comparison: \$14.8 million, while the average working person earned \$44,000. There is an injustice there that I think is quite obvious.

So we look at that and say: Well, what is happening here? A single health insurance CEO earns approximately 335 times that of the average worker in this country. It is absolutely ridiculous. It is scandalous—scandalous—when we think about the struggle people go through to keep their families healthy and, at the same time, take care of the bare needs for existence.

In New Jersey, for example, the largest health care insurer is Horizon Blue Cross Blue Shield. Last year, the CEO of that nonprofit, Mr. William Marino, made \$5.4 million—a nonprofit company. Although it is a company without profit, it certainly was pretty darn profitable for Mr. Marino.

Let me be clear. While health insurers and CEOs have made out like bandits, the industry has been increasing

premiums relentlessly. According to a new report from the Kaiser Family Foundation, insurance premiums for American families more than doubled during the last 10 years. We see it: three times faster than wages over the last 10 years. That is what has happened with health care.

Premiums, which now average more than \$13,000 a year, are the highest cost on record. The chart shows it very clearly, that this expanding premium cost has gone way beyond the average family to be able to afford to pay the rate.

If today's CEOs cared as much about the public's health as their own financial wealth, our system would not look this way. We are stuffing the greedy and starving the needy. That is the situation we are in.

It is time to reshape health care in this country once and for all. It is time to make the insurance industry accountable so that health insurance works for the people in our country. It is time to lift the curtain of despair so those without insurance can get it, and those who are in dread fear of losing it can stop worrying. It is time to say that in the richest Nation in the world, decent health care belongs to everyone in our country.

The reality is, we spend 1½ times more per person on health care than any other country, and yet even as we pour more and more money into health care, Americans' health has not improved.

Just take infant mortality. The infant mortality rate in the United States is a telling marker of how well a society delivers health care. Infant death rates in our country have been going up for the last 40 years. Now the United States has a higher infant mortality rate than 40 other countries in the world, including Cuba, Sweden, Taiwan, and most of Europe. By any metric, we are not delivering health care in our country fairly, fully, or efficiently, and the time for change is upon us.

Many in this Chamber have been working for decades to reform our system so children, the working poor, and the sick get the care they deserve. No one worked harder than my former seatmate and dear friend, Senator Edward M. Kennedy. Today we are on the verge of a sweeping overhaul. We are proud of Senator Kennedy for all the years he labored so hard.

This Senate and the President and the House must do the right thing for the health of America's working families. Surely these families and their children are as critical with their contributions to America's well-being as those profiteering from their sweat and toil.

This debate is about our commitment to the millions of Americans who work hard every day, pay taxes, care for their kids, but risk the chance of losing everything because of a single illness. We declare here and now that we will not allow exaggerated profits to breach

the primary obligation we have to all of our people to protect them from assault, whether from terror, natural disaster, or from the scourge of disease. In the wealthiest country in the world, no one should be left out and left behind because government won't respond to their cries for help.

I close with a reminder to those in this Chamber that our obligation far exceeds the attention it has gotten over the years; far exceeds any stretch of decency that we can muster; that we do something about it, that we show part of the shame we all feel when we look at millions of people who have no health insurance in this country while we see the compensation and the growth of these companies. I am a corporate person. I come from having run a very large corporation, one of the largest and one of the best in the country called ADP. It has over 240,000 employees. A couple of other fellows and I started that company. I took a look at the fellow who is now running that company. The company made over \$1.5 billion last year and his salary was \$1 million. He does a good job.

Some people here, largely on the other side—almost exclusively on the other side, except for one courageous Senator who stood up and said she is not going to let this go by without trying to do something serious about it—want to take the role of doctors and they want to write a prescription to do nothing but obstruct and say no. They want to say no to those looking to government for help and no to those desperately in need of health care. All they say is no, no, no. I summarize the Republican view and their health care mission. Theirs is a missile gone astray. Kill the Obama presidency with this Waterloo, regardless of the number of casualties among the citizenry. Their victory will be won with the political destruction of the Obama mission.

I say “no” is not the answer. It is time for us to act. I hope our colleagues in this Senate will look in the mirror and see how they would feel if a child suddenly comes up with a condition that is long lasting and that is hard to deal with. I have a granddaughter with diabetes. I have a grandson with asthma. Fortunately, they have good health care. I am able to afford to pay it. But there are lots of people in this country who can't. I would like one of these people on the other side to stand up with them face to face and say, no, I don't think we ought to help you. I don't think we can afford to help you. I don't think my colleagues with whom I have an industry connection would like it if I helped you.

Too bad. Too bad, I say. I hope we gain some sense and some visibility in this debate over the next several weeks.

With that, I yield the floor and 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. UDALL of New Mexico. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

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

HONORING OUR FALLEN HEROES

Mr. UDALL of New Mexico. Mr. President, I rise today to mourn the untimely deaths and celebrate the lives of two New Mexico heroes. One died just last week from injuries he sustained while serving his country in Afghanistan. The other was killed this past June in a helicopter crash after rescuing a stranded hiker lost on the Santa Fe Baldy Mountain.

Both men served their countries with distinction and honor. Both were raised in families with a strong tradition of public service. Both said "Choose me" when they were needed the most. Both paid the ultimate sacrifice. They are Army SFC Kenneth Westbrook and New Mexico State police sergeant Andrew Tingwall. I would like to tell you about them today.

Sergeant Westbrook's career in the military began more than 20 years ago after he graduated from Shiprock High School in northwest New Mexico. He married his childhood sweetheart, Charlene. Along the way, they had three children—Zachary, Joshua, and Joseph.

He served in the Persian Gulf war and did numerous other stints overseas in places such as Korea and Germany. He was a proud member of the Navajo Nation. He loved to hunt and fish, build model military vehicles, and was an expert chef and grill master.

His brother says Kenneth was looking forward to retiring from the military and spending more time with his family when he got the call for one more tour of duty—this time to Afghanistan. As much as he cherished the idea of spending more time with his family, Kenneth knew what he had to do: Of course, I will go, he said. Kenneth believed in the work being done in Afghanistan, his brother said. And if the Army needed him to complete that work, there was no question he would be there.

Kenneth was gravely wounded on September 8 when his unit was attacked by insurgents in Afghanistan. He was quickly flown to Walter Reed Army Medical Center for treatment. That is where I met his wife Charlene and other members of his family. That is where Sergeant Westbrook died from his injuries last week.

Military families are a special group of people. Every day they face sacrifices and challenges the average person can't imagine. They do it with grace and strength and an unwavering belief in the country they call home. That is what I saw the day I visited Charlene and Sergeant Westbrook's three boys. I saw a strength made even more striking when you realize this tragedy wasn't their first.

Four years earlier, almost to the day, another Sergeant Westbrook died. His older brother—SGT Marshall Alan Westbrook—was killed in Iraq when an improvised explosive device detonated near his humvee in Baghdad.

The Westbrooks have given more than most families. Their tight-knit family has paid the ultimate sacrifice, and for the Westbrooks, it happened not once but twice. As Americans, we often take for granted our freedoms, but we should never forget those whose sacrifice makes those freedoms possible.

Sergeant Westbrook will be laid to rest on Friday in Farmington, but he will forever live in the memory of New Mexicans.

This story of New Mexican heroism doesn't end there. I would also like to talk about New Mexico State Police SGT Andrew Tingwall, who was killed last June in a helicopter accident after rescuing a stranded, lost hiker. Sergeant Tingwall is being honored on Friday with a posthumous induction into the New Mexican Military Institute Alumni Association Hall of Fame, which I helped nominate him for. His honor is for Eminence in a Chosen Field. Similar to Sergeant Westbrook, Andy Tingwall's chosen field was service—service to his community, service to his State, and service to his country.

Known as "Ting" to his friends, Sergeant Tingwall graduated from the New Mexico Military Institute in Roswell in 1991 and joined the U.S. Marine Corps shortly after. During his military career, he became a jump-qualified reconnaissance marine and served with Delta Company's Fourth Reconnaissance Battalion. He continued his distinguished career as a New Mexico reservist from 1993 to 1995, when he joined the New Mexico State Police.

Eventually, he became lead instructor for the Training and Recruiting Division of the New Mexico Law Enforcement Academy before joining the New Mexico State Police aircraft section, where he became a pilot. Sergeant Tingwall proved his merit there, serving as chief pilot of the unit—the youngest man to ever have that title.

Sergeant Tingwall was known by his colleagues, friends, and family for his heroism and love of the sky, saving many lives in his time with the State police. In 2008, he was celebrated as Officer of the Year by the New Mexico Sheriffs and Police Association and would have received a Medal of Valor in June, but for Sergeant Tingwall, that day would never come.

Sergeant Tingwall was in the middle of saving the life of a stranded hiker on June 9 when tragedy struck. He and his spotter, Officer Wesley Cox, had located the stranded hiker and Sergeant Tingwall was transporting her to safety when the helicopter struck a mountainside and crashed.

After the crash, as he had throughout his career, Sergeant Tingwall put the

safety of others before his own. Despite being severely injured, he managed to pull the hiker from the wreckage before they both died from their injuries. Sergeant Tingwall was just 36 years old.

Duty, honor, country—three words you hear often when talking about those who commit themselves to a life of public service. Sergeants Westbrook and Tingwall personified those words, both in the way they lived their lives and in the way those lives ultimately ended.

New Mexico is proud to honor these true American heroes. To their families, we say thank you and ask them to accept the thanks of a grateful State and a grateful nation.

I suggest the absence of a quorum.

The PRESIDING OFFICER (Mrs. MCCASKILL). The clerk will call the roll.

The bill clerk proceeded to call the roll.

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

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

The Senator from Illinois is recognized.

Mr. DURBIN. I thank the Chair.

(The remarks of Mr. DURBIN pertaining to the introduction of S. 1789 are located in today's RECORD under "Statements on Introduced Bills and Joint Resolutions.")

THE FEDERAL DEBT

Mr. DURBIN. Madam President, we have had an ongoing debate on the floor about health care reform, its cost, whether it is going to add to the deficit. We had an exchange yesterday or the day before with Senator MCCONNELL, the Republican leader. We talked a little bit about the debt America faces and how this debt came about.

Senator KYL, my Republican counterpart, Republican whip from Arizona and a friend of mine, came to the floor and carried on this dialog and debate. When you consider the Senate Chamber is supposed to be about debate, it is all good that he would do that. But I do want to take exception to a couple of things my friend Senator KYL said.

Let me say at the outset, between 1998 and 2000, under President Clinton, our Nation ran a fiscal surplus. It is hard for many people now, when they look at a multi-trillion-dollar deficit, to imagine just a few years back we did have a surplus. We actually reduced the Federal debt in those 2 years by \$236 billion, our economy was doing well, creating jobs and businesses. That is what President George W. Bush inherited when he came to office.

Between 2001 and 2009, when President George W. Bush was in office, the economy grew. Normally you would think this period of economic growth would lead to an improved fiscal picture since tax receipts for government usually grow with the economy. Instead, under President Bush our Nation

ran deficits during his term of nearly \$7 trillion. The cumulative Federal debt more than doubled under President George W. Bush, who inherited a surplus from President Clinton. It went up from \$5.8 trillion in 2001 to \$12.7 trillion in 2009.

At the end of the Bush administration, the economy faced the worst crisis since the Great Depression, the recession we are now encountering. That is what President Obama inherited when he was sworn in 9 months ago. Back in February, the Congressional Budget Office estimated that, assuming continuation of budget policies that were in effect in January of this year, the Federal budget deficit would average more than \$1 trillion each year over the next 10 years and would climb higher in later years. That estimate was developed based completely on the budget policies that the current President inherited from the previous President. So to argue that the Nation's fiscal woes should be all laid at the doorstep of President Obama overlooks the obvious. Given the soaring debts and woeful economy he inherited, it certainly is not defensible.

America will run a fiscal deficit this year and it will be a large deficit, there is no question about it. In an economy such as this, where there is so little private sector demand, we have tried to create through stimulus packages, re-investment, and recovery good jobs and economic activity that will revitalize our economy.

Why did President Bush have such record-breaking deficits during his tenure? I can tell you that he was the first President in the history of the United States to call for tax cuts in the midst of a war—in fact, in the midst of two wars. Giving tax cuts to the wealthiest people in the Nation during a war is counterintuitive. A war is an added expense to a nation, over and above the ordinary costs of government, and to cut revenue sources by giving tax cuts to those in higher income categories drove us deeper and deeper into deficit.

In addition, President Bush during his term passed the Medicare Prescription Drug Program. I think it was a good program, although there were changes I certainly would have made before I would vote for it. But the fact is that the President did not pay for it. It was added to the deficit which the current President has inherited. It is little wonder then that the debt grew dramatically during President George Bush's time in office.

Having said all of this, we have to do something serious about this debt. I think we have to focus on putting this economy back on its feet, getting people back to work, making sure that businesses have credit, making certain that the money spent by our government is spent well, without waste. Those are certainly monumental tasks for us to face. But to say that this health care reform is going to add to the deficit is to overlook the obvious. President Obama has told Members of

Congress: Don't send me a health care reform bill if it adds to the deficit. The Senate Finance Committee bill that passed this week did not add to the deficit. In fact, it reduced the deficit over a 10-year period of time. So we have taken President Obama's admonition seriously.

In a week or two, we will start the debate over the future of health care in this Nation with the understanding that whatever we do has to be paid for, that we cannot leave it as a debt to future generations. It is an awesome responsibility and challenge we face. It is one I think we are up to, that the American people would feel Congress had dropped the ball and had failed if we do not end up with health care reform. We have a lot of issues to work out among us. I hope Senator SNOWE on the Republican side will be joined by other Senators who can in good faith join in trying to solve some of these awesome problems we face, problems we have inherited. It is a major responsibility and one we accept with the leadership of the President to help us find that solution.

I yield the floor and I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The bill clerk proceeded to call the roll.

Mr. SESSIONS. I ask unanimous consent that the order for the quorum call be rescinded.

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

THE NATIONAL DEBT

Mr. SESSIONS. Madam President, the American people are rightly very concerned about the reckless spending being conducted in Washington spending that has resulted in huge national deficits. People sometimes think that Republicans and Democrats are just bickering, but the truth is that we have never had deficits such as these in the history of our country—perhaps only during the peak of World War II, when we were in a life-and-death struggle with millions of men and women in combat from one end of the globe to the other.

The fiscal year 2010 deficit is \$1.4 trillion. It is predicted to average \$1 trillion for the next decade, without relief in the outyears. People often ask me: When are we going to start paying it back? There is no plan to do so. There is not even any plan to reduce the size of the deficit. In years 8, 9, 10, we are talking about over \$900 billion in annual deficits. Interest today on our total debt is \$170 billion, will rise to \$800 billion in 1 year and that is just the interest on the money we must borrow in order to carry these deficits that are not being reduced in the outyears. It is unthinkable.

A lot of people think that the high deficit is due to costs from a health care reform bill. Health care reform will add to the deficit, but is not cur-

rently counted in the numbers I referenced because the Congressional Budget Office did its scoring before any health care bill was written. We don't have a final bill, so CBO couldn't score it accurately anyway.

The public debt will go from \$5 trillion to \$11.7 trillion in 5 years and triple to \$17 trillion in 10 years, tripling the national debt. The total debt from the founding of the American Republic will be tripled. That is a big deal.

My colleague, Senator DURBIN, and our Democratic colleagues have taken great pleasure in attacking President Bush. I was critical of President Bush's spending, but his average deficit was \$250 billion, which was too much and big. However, this year's deficit is going to be \$1.4 trillion. That is the deficit as of September 30, for this fiscal year. And we will carry an average deficit \$900 billion annually in the coming years. You can blame the origins of the deficit on President Bush if you want to, but President Obama's budget for the next 10 years, scored by the Congressional Budget Office, continues to score deficits at \$900 billion. Regardless, we are spending too much money. Republicans are guilty of it, and so are the Democrats. They promised to do better after they got elected this time, but I haven't seen any progress, frankly.

The media has reported recently that the valuation of the Finance Committee's health care bill by the Congressional Budget Office was quite positive. They said—you may have heard the phrase—that it was deficit neutral. How did that happen? How can you add millions of people to the rolls of insured, and subsidize insurance for low-income people, all without having a cost? We need to examine that.

The CBO says the Finance Committee bill would cost \$829 billion over 10 years, but they say it is not going to increase the deficit. It will increase the number of people covered but not increase the deficit.

The Washington Post wrote:

The Finance Committee's bill is the only legislation on the table that meets Obama's objectives [. . .] all for less than \$900 billion over 10 years, and without adding to the deficit.

So that has been the spin. That has been the statement from the media.

The President said in his September address to Congress that he would not sign a health care reform bill that adds one dime to the deficit. Senator BAUCUS, the Finance Committee chairman, said:

Our balanced approach in the Finance Committee to health reform has paid off once again.

He said the bill was "a smart investment on the federal balance sheet." Would that it were so, but that is not an accurate statement. The American people know you cannot expand coverage for millions of the uninsured without incurring cost. There is no

such thing as a free lunch. Money borrowed has to be repaid. If you make obligations to expand the federal government's role in our health care system, you must have the money to back it up.

So how can the CBO make such a report? It is not because they are dishonest. It is because they scored the bill the Washington way, and the bill was written by Members of this body and staff who understand the Washington way. They write the bill in such a way to hide its true cost. Republicans have done this in the past, but we are reaching new levels of it today.

Under the Baucus plan, true costs are hidden. The bill's requirements that all individuals have insurance does not fully phase in, for example, until 2014. However, new fees on insurers, medical device companies, drug manufacturers and cuts to hospitals and doctors take effect almost immediately. For example, hospitals will take cuts and see more patients beginning in 2010, but individuals are not required to have insurance coverage until 2014. If you are an insurance company, you will face increased taxes and new annual fees beginning in 2010, but again—individuals are not required to have insurance until 2014. Doctors' pay is kept stable in 2010, but under the Finance Committee legislation, doctors are expected to take a 25-percent pay cut beginning in 2011.

Why have we been engaging in these budget gimmicks? Both parties have been guilty of doing this. Why don't we just make the difficult decisions? We have succeeded in balancing the budget in the past. But under the Sustainable Growth Rate formula as it applies today, our physicians the people that take care of us—would take a 25-percent cut in 2011. So, Congress fixes the formula, so to speak. We now call it the doctors' fix. We arrange for a short-term solution that keeps doctors' pay from being cut, but do not address the larger problem. If Congress were to fix the physician pay formula for 10 years, we would have about \$300 billion more in costs to figure in to our budget as a deficit. The proposal that came out of the Finance Committee proposes to raise the doctors' fees for 1 year. It does not propose what is absolutely necessary: a 10-year fix for doctor pay. So, the Chairman acts as if an update to doctor pay will not happen in 2011 so that the bill does not have to reflect the true costs. And Congress will update doctor pay, as it has every year since 2002.

The bottom line is this: the true costs of the Finance Committee bill will not begin until the new provisions are all phased in in 2014.

The Senate Budget Committee estimates—and I am a member of the committee—show that the Finance Committee bill cost for 2014 to 2023 is actually \$1.8 trillion. So although CBO says that it costs \$829 billion from 2010 to 2019, if you look at numbers from 2014 to 2023, the cost is \$1.8 trillion—twice

as much—because the full benefits and expenses don't kick in until then that period.

Budget gimmicks used to offset the bill are misleading. This is not an honest way to represent the bill's costs, and it is designed for political reasons. It is designed to make the score look better than it is and to hide the true cost of enacting this legislation.

Let me use a chart.

The PRESIDING OFFICER. The Senator has used the existing time limit.

Mr. SESSIONS. I ask unanimous consent for 3 additional minutes.

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

Mr. SESSIONS. The Senate Finance Committee bill is paid for in a number of ways. Perhaps one of the most unjustified claims is that we are going to produce \$404 billion in cuts to Medicare and Medicaid to fund an entirely new program.

First, it is doubtful that Congress will actually vote to cut \$400 billion from Medicaid and Medicare. However, CBO must assume we are going to cut it because that it included in the Finance Committee bill. CBO also assumed in their budget that we were going to raise a lot of tax money by being more efficient in tax collections last year, but those new collections did not materialize either. The IRS said they wouldn't get them, and they were right. Our number one priority, if we were to somehow make Medicaid and Medicare more efficient and more honest and more effective and more productive and save \$300 billion, that money should stay in Medicare and Medicaid. Medicare is going broke. We know that to be true. Medicare experts and the trustees issued a dire warning that unless measures are taken to shore up the program, it will be insolvent by 2017. We have known that for a long time. These \$400 billion in cuts is very unlikely to happen. The rest of these basically are new taxes. I do not have time to go into them now.

But imagine this scenario: your family is running in a shortfall and you do not have enough money for your business and you have agreed that you would take on a Saturday job to make more income, would it be smart to buy a new car? You have a debt. You are trying to pay it down.

You take on more taxes, take on another job to bring in more income, but, in the midst of that, you start a new spending program? That is exactly what the Finance Committee bill proposes. Instead of getting Medicare on a sound footing, this bill raises taxes to create a new program. Supporters act like we should be thankful because it is deficit neutral, they say. That is not accurate. I know it, and every Senator in this body ought to know it if they have been around here very long.

I am sorry about where we are headed. This sort of scoring is the kind of flimflam financial management that has put us on the road to tripling the debt of the United States in 10 years. It

is an abomination. Our children will be paying interest on our debts for the rest of their lives. Indeed, the interest on our national debt today is \$170 billion. In 10 years, CBO says it will be \$800 billion a year. Yet we spend only \$100 billion a year on education, by contrast.

So I say, somehow we have to slow down, make some difficult choices, and recognize that we do not have the money to do everything we would like to do. We do not have the money, and Congress must be more serious and more committed to improving Medicare, saving the program, and not going hog wild with new programs that we do not have the money to fund.

I thank the Chair for allowing me to go over and I yield the floor.

The PRESIDING OFFICER. The Senator from North Dakota.

Mr. DORGAN. Madam President, I ask unanimous consent to speak in morning business for 20 minutes.

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

THE DEFICIT

Mr. DORGAN. Madam President, I know my colleague from South Dakota is waiting. I will try not to consume the entire 20 minutes. But let me first talk about deficit for a moment, since my colleague from Alabama described that.

I do not think there is anyone in here who takes a look at the fiscal policy we are on—and have been on for a long time—and feels very comfortable about it. It is not sustainable and we have to change it. But I do want to say this. It was not too long ago that this country went to war and, at the same time, cut taxes and did not pay for a penny of the war. In fact, even now we have people saying: Let's send 40,000 more troops to Afghanistan. I do not hear anybody suggesting we pay for that. What is that going to cost?

I will talk next week about my interest in what is happening in Afghanistan. I have been there. I have some real concerns about sending a lot of additional troops to Afghanistan and about our vital national interests. But let me say, whether it is fighting a war or deciding to send 40,000 more troops to another country, it costs money. Is everybody here willing to pay for it? Anybody willing to pay for it?

We have talked about this for years. We are in the middle of a war. We send men and women to the battlefield, and the fact is, not a penny of it has been paid for. In the previous administration, they insisted on tax cuts and pursuing a war strategy in Iraq and sending troops to Afghanistan and not paying for a penny of it. That also results in Federal budget deficits, and we have to resolve them.

The fact is, we cannot continue to describe a level of government the American people are unwilling or unable to pay for, and we have to get this fiscal policy under some control. Republicans

and Democrats together are going to have to reconcile this. We must do it.

WALL STREET

Mr. DORGAN. Madam President, I came to the floor to talk about something else today. On the way to the Capitol this morning, I was thinking of this: a quote by Will Rogers. I heard on the radio again today that we have a couple things going on. No. 1, we have a whole lot of folks who have lost their home in the last quarter, with a record number of home foreclosures in our country—and then, in the same newscast, \$140 billion in bonuses to be paid by the major firms on Wall Street. I am thinking maybe these are two different countries or at least two different economies. Here is what Will Rogers said many decades ago. He said:

The unemployed here ain't eating regular, but we'll get around to them as soon as everybody else gets fixed up OK.

The unemployed "ain't" eating regular, but we will get around to them when everybody else gets fixed up.

Well, last year we watched some big shots steer this economy into the ditch. It caused an unbelievable financial wreck. It has had an impact on everything in this country. The fact is, we need to reform the system that allowed that to happen. But—do you know what?—as to the story I heard this morning about \$140 billion of expected bonuses to be paid by the top 23 firms on Wall Street, the fact is, less than a year later, after the economic collapse in this country, we see these stories:

The U.S. has lent, spent or guaranteed \$11.6 trillion to bolster banks and fight the long-term recession in 70 years.

By the way, "banks" here mean the biggest financial institutions in the country.

The Wall Street Journal, August 31 of this year:

Wall Street is suiting up for a battle to protect one of its richest fiefdoms, the \$592 trillion over-the-counter derivatives market. . . . Five U.S. commercial banks, including JPMorgan Chase & Co., Goldman Sachs Group Inc. and Bank of America Corp., are on track to earn more than \$35 billion this year trading unregulated derivatives contracts.

This story is what we have been reading day after day.

Steven Pearlstein: "The Dust Hasn't Settled on Wall Street, but History's Already Repeating Itself."

The Wall Street herd is at it again. Even as the cleanup crew is carting away the debris left by the last financial crisis, the investment banks, hedge funds and exchanges are busy working on the next one.

I will go through these in a hurry because there is a narrative here that is pretty easy to see.

The New York Times: "A Year Later, Little Change on Wall St."

One year after the collapse of Lehman Brothers, the surprise is not how much has changed in the financial industry, but how little.

. . . banks still sell and trade unregulated derivatives, despite their role in last fall's chaos.

The Washington Post, September 15: "The Wall Street Casino, Back in Business."

Wall Street's actual role is more like that of a giant casino where the gamblers are rewarded for taking outrageous, unconscionable risks with other people's money. If the bets pay off, the gamblers win. If the long-shot bets turn out to have been foolish, we're the ones who lose.

The Washington Post, September 8: "A year after Lehman, Wall Street's Acting Like Wall Street Again."

[Wall Street] still operates on the principle of taking care of itself first, really big and [most] important customers second, everyone else last.

The Wall Street Journal, August 22: "Bankers Play Dress Up With Old Deals."

Irresponsible securitization helped bring the financial system to its knees. Yet, as banks start to heal, little seems to have changed. Wall Street has quickly fallen back on old habits.

The Washington Post, September 11: "Wall Street's Mania for Short-Term Results Hurts Economy."

It's been a year since the onset of a financial crisis that wiped out \$15 trillion of wealth from the balance sheet of American households, and more than two years since serious cracks in the financial system became apparent. Yet while the system has been stabilized and the worst of the crisis has passed, little has been done to keep another meltdown from happening.

The Los Angeles Times: "The Financial Meltdown: Crisis has not altered Wall Street."

Bellwether firms led by Goldman Sachs Group are churning out mouth-watering profits. Risk-taking and aggressive securities trading are mounting a comeback. And compensation—the lifeblood of Wall Street—is pushing back toward pre-crisis levels.

The Wall Street Journal, October 14: "Wall Street On Track To Award Record Pay." That was yesterday.

Major U.S. banks and securities firms are on pace to pay their employees about \$140 billion this year—a record high. . . .

Total compensation and benefits at . . . firms analyzed by the Journal are on track to increase 20% from last year's \$117 billion—and to top 2007's \$130 billion payout.

Total compensation and benefits at 23 major Wall Street firms—this, from the Wall Street Journal—you can see what has happened—2009—a record in the last 3 years. Nothing has changed.

CNN news:

. . . there really is . . . this disconnect still between what's happening on Wall Street . . . and what's happening with the every day Joe. We talked about record home foreclosures once again, as we said these problems with employment, worries about whether benefits, jobless benefits are going to continue.

On the flip side, . . . major banks and security firms are on pace to pay employees \$140 billion this year . . . a record high.

And so it is. It was said once that investment banks are to productive enterprise like mud wrestling is to the performing arts. Well, I don't know, I

guess that was tongue in cheek. We need investment banking in this country. It is essential for the creation of capital. It can, working properly, assist this country, and has assisted this country in lifting our economic opportunities.

But we have all too often, in recent years, seen the creation of exotic financial instruments that have almost nothing to do with creating wealth, except for those who trade them and those who created them. That is what steered this country into the ditch. CDOs, credit default swaps, unregulated derivatives, dark money—a lot of people got wealthy trading it. The fact is, it created an unbelievable bubble of risk that began to wind this economy down and finally steered this economy into a serious wreck last fall. The question is, What do we do about that? Well, when you hear on the same newscasts that we reached a record number of home foreclosures and people are still losing their jobs, and then, on the other hand, we see the very same interests that have been at the trough of the Federal Reserve Board for at least \$8 trillion, at risk by the taxpayer, in loans and commitments to some of the biggest financial enterprises in the country and then you see \$140 billion in compensation and bonuses from those firms? There is something disconnected here.

I want our financial system to work. I am not someone who comes to the floor of the Senate who says investment banks are worthless. That is not my point. We need investment banking. But we also need to understand we cannot take FDIC insured banks, those that are insured by the Federal Government, and decide it is OK if you trade on your own proprietary accounts on risky enterprises such as derivatives. That is all right. That is not all right. They may just as well put a keno pit or a craps table right in the middle of the bank lobby. Just call it what it is. It is simply flatout gambling with the taxpayers' money.

As we end this issue of financial reform, there are a lot of ideas around. What do you do to make sure this does not happen again? I wish to make this point: There is a doctrine called too big to fail. We have seen it in practice in the last year: interests that are too big, banks, investment banks especially, that are too big to fail, and so it is no-fault capitalism. Whatever risks they have taken, whatever losses they have had, the taxpayer picks that up to the tune of \$11 trillion in exposure from Federal programs.

Well—do you know what?—when the dust is settled, and whatever is done on financial reform, if we do not address this issue of too big to fail, shame on us. In fact, the very firms that are declared too big to fail are now getting bigger, supported by the Federal government, and that is flat wrong.

Let me quote Professor Joseph Stiglitz:

. . . our bail-outs run the risk of transferring large amounts of money . . . to those

banks that did the worst job in risk management. . . . In effect, the government is tilting the playing field—towards the losers.

Paul Volcker says:

I do not think it reasonable that public money—taxpayer money—be indirectly available to support risk-prone capital market activities simply because they are housed within a commercial banking organization.

The question at the end of the day is, Are we going to address these things, such as too big to fail and get rid of no-fault capitalism and see if we cannot push investment banking to that which it used to be? I hope so. But on today, a day in which we hear of record home foreclosures and \$140 billion in bonuses and compensation on Wall Street, I just say there is some huge disconnection in this economy of ours and it is something we ought to care about and something we ought to do something about.

This country works best when we lift the country, when we expand the middle class, when we have jobs available to people who want to work. There is no social program in this country as important as a good job that pays well. That is what makes everything else possible.

But this question of financial healing—when, first, the healing occurs to those who caused the problem, and the healing occurs in record compensation, \$140 billion, at a time when other people are struggling to pay their grocery bills, struggling to buy the medicine they need, struggling to make their house payment because they have lost their job, there is something missing in this country.

My hope is, when I see all these stories about Wall Street—the same old Wall Street, nothing has changed, going right back to the same old risk, right back to the same old risk because they know, they have learned in the last year, whatever they lose, the American people will pick up the tab—this Congress had better say to them: No more, no longer, never again. Too big to fail is a doctrine that cannot continue to live at the Federal Reserve Board or in this government. It is time those at the top at the biggest institutions who take the biggest risks, when they lose—it is time they lose, not the American people.

So we are headed toward financial reform. When that happens, I will be on the floor of the Senate talking about the too-big-to-fail doctrine and how we are going to end it, and quickly.

Mr. President, I yield the floor.

The PRESIDING OFFICER (Mr. WHITEHOUSE). The Senator from South Dakota is recognized.

Mr. THUNE. Mr. President, I ask unanimous consent to speak as in morning business for up to 20 minutes.

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

HEALTH CARE REFORM

Mr. THUNE. Mr. President, earlier this week the Senate Finance Committee, by a vote of 14 to 9, reported out its version of health care reform.

That makes now five committees that have acted on this issue, five committees of jurisdiction—three in the House of Representatives and two in the Senate—all of which have now at least put out their products. But I say that loosely because what emerged from the Senate Finance Committee was not, in fact, legislative language; it was a concept paper. It is yet to be reduced to legislative language. That will take some time, I suspect, because many of the concepts that were included in the concept paper are pretty complex.

So what is happening now on the issue of health care reform, at least in the Senate, is in the leader's office. The chairman of the Health, Education, Labor, and Pensions Committee is meeting with the chairman of the Finance Committee, and I suspect a number of the members of the White House to hammer out what will eventually be the bill I suspect will come to the floor of the Senate. I say that only because the process has been very much flawed from the beginning. It is not one that is inclusive in terms of allowing ideas from our side of the aisle to be incorporated. It has not been a bipartisan process, to say the least.

My guess is that at the end of the day, what comes out of the leader's office will be a very different bill than anything we have seen so far. But I think there are certain characteristics in that bill that have been in all of the bills. I think we know a few basic things about all of the bills so far that are consistent, those things that have not changed.

The first one is it will lead to higher premiums. The second one is it will lead to higher taxes. The third one is it will include cuts in Medicare. So those three basic characteristics are the same with regard to all of the bills, the three that have emerged from the committees in the House of Representatives and now the two that have emerged from Senate committees and are currently being married up in the leader's office.

I predict when that bill comes to the floor of the Senate, the American people will have the same thing to look forward to that they have now with all of these various bills: higher premiums, higher taxes, and cuts in Medicare. Why is that significant? It is significant for this reason: Health care reform, at least as stated in terms of its purpose, is to lower costs. For the past decade and beyond we have been talking about health care costs in this country and how we have to do something to rein in the escalating costs people deal with every single year for health care and double-digit increases in health care costs for many of those years.

So the whole purpose of health care reform, at least my understanding of it, and I think as stated by the President and others, is that we need to rein in and get control of health care costs in this country. That is why it is ironic that of the five bills so far that have

emerged from House and Senate committees, none bend the cost curve down. All increase premiums for people in this country, increase the costs for health care coverage.

In the Senate Finance Committee bill—the most recent version, which, as I said earlier, was reported out this week by a 14-to-9 vote—there wasn't a direct assessment or estimate of what that increase in premiums would be. There were simply generalized comments by the Congressional Budget Office that, yes, these increased taxes in the bill would be passed on generally dollar for dollar. In other words, the taxes that are imposed—a 40-percent excise tax on some of these insurance companies—would be passed on in the form of higher costs or premiums to health care consumers in this country without being more specific or quantifying in any more precise way what those increased costs would be. Nevertheless, they said basically the same thing we have seen in all of these various bills, and that is that health care costs—coverage, premiums—are going to go up. We are going to have higher premiums.

In the last week or so we have now seen two studies where independent analysts have looked at this and concluded the same thing. In fact, the PricewaterhouseCoopers study from a few days ago went so far as to say if you are an individual buying in the individual marketplace, you are going to see your health care premiums go up about \$2,600 if this bill becomes law. That would be in the year 2019 at the end of a 10-year window, which is what the people who analyze these things look at. So it is about a \$2,600-per-person increase in premium if you are buying on the individual market.

If you are a small employer who is employing 50 or fewer employees or an individual who is employed at one of those small businesses, you would see premiums increase \$2,100 if you are an individual. If you are a family, you would see premiums increase \$5,400 under the bill that was produced and emerged from the Senate Finance Committee. So whether you are an individual buying on the individual marketplace or whether you are getting your insurance through your employer, you will see higher premiums, higher health care costs according to this analysis. If you are a family, it is the same thing. It is just a varying difference in the amounts, but it is anywhere from \$2,100 up to \$5,400 of increased premium costs, according to the PricewaterhouseCoopers study.

This week there was a study released by Oliver Wyman which came to the conclusion that if you buy your insurance on the individual marketplace, you will see a \$1,500 increase for single coverage and \$3,300 for family coverage annually. That is exclusive of inflation. That doesn't include the normal inflationary costs that we deal with year in and year out for health care in this country. This study concluded the

same thing the PricewaterhouseCoopers study did; that is, whether you buy on the individual marketplace, whether you get it through your employer, if you are an individual or you are a family, you will see higher premium costs. As I said, in this particular study, it is \$1,500 for single coverage, \$3,300 for family coverage annually.

They also broke it down State by State, which is important because I think everybody wants to know how this is going to impact our constituents, including my constituents in South Dakota. In this particular case, if you are someone buying on the individual market and you are an individual buying a single policy, you will see your health care premiums go up 47 percent. If you are someone who has a family buying on the individual marketplace, buying a family policy, you are going to see your premiums go up 50 percent. If you are in the small group market, if you have the good fortune of being in a larger group, you will see, if you are an individual, your premiums go up 14 percent. If you are a family in a small group market, you will see your premiums go up 15 percent, exclusive of inflation. So those are two recent studies where independent analysts have looked at the bill produced by the Senate Finance Committee and concluded there would be significant increases in premiums and in what people would pay for health care in this country.

So it begs the question: How is this reforming health care? The stated purpose of health care reform is to lower costs, to drive down costs for individuals and families. As you can see from these studies, that certainly isn't the case. Of course, the Congressional Budget Office, as I said earlier, indicated in response to questioning about the Senate Finance Committee that although they hadn't drilled down and figured out exactly what those premium increases would be, that inevitably you would have higher premium costs simply because the taxes imposed under the legislation would be passed on to health care consumers, and everybody who is buying health care out there would see their premiums increase, generally speaking, dollar for dollar. That was the conclusion of the Congressional Budget Office.

So higher premiums, that is the first thing we know about all of the health care reform plans so far that have been put forward.

The second thing we know as well, with certainty, is that they all include higher taxes. The House versions of this legislation used payroll taxes. They have an employer mandate—what we refer to as a pay-or-play mandate. There are additional, I guess you would say, “add-on” taxes for people who are in higher income categories, so they finance it with different forms of taxes. The tax increases proposed by the Senate Finance Committee—as I said earlier, there is an individual mandate, so

if you don't have insurance, you will pay penalties. That will be a certain tax or fee on individuals in this country which will hit a lot of lower income individuals. But the insurance companies which would be hit with these tax increases, of course, would then pass those on to health care consumers. So, again, we see increases in taxes.

What the Congressional Budget Office did with respect to the issue of taxes is, it did go so far as to say where that tax burden would lie. Under the Congressional Budget Office estimate, 89 percent of the higher taxes in this bill produced by the Senate Finance Committee would fall on those wage earners, those taxpayers in this country earning less than \$200,000 a year. They went so far as to say that, I think it was 71 percent of those—and that was in the year 2019—71 percent of that tax burden would fall on those earning under \$200,000 a year when the bill initially kicks in.

So we are going to see significantly higher taxes on people making under \$200,000 a year, according to the Congressional Budget Office.

The Joint Committee on Taxation has also analyzed this issue, and they came to some conclusions earlier this week as well, one of which was that, similarly, we would see almost 90 percent of the tax burden under this bill falling on those households with incomes under \$200,000 a year. They went so far as to say that more than half of the tax burden would fall on those households with incomes under \$100,000 a year. So almost 90 percent of the tax burden falls on wage earners, taxpayers with incomes under \$200,000 a year, and over half of the tax burden falls on those wage earners, those taxpayers with incomes under \$100,000 a year. That is according to the Joint Committee on Taxation.

So what does that mean? Well, that means the President's promise that health care reform would not impose taxes on those earning less than \$250,000 is just a bunch of hot air. It just doesn't add up. We have the Joint Committee on Taxation and the Congressional Budget Office all saying that the disproportionate share of these taxes—the tax burden—about 90 percent is going to fall on \$250,000 and under and over half, over 50 percent of the tax burden, falling on income earners, wage earners, taxpayers in this country with under \$100,000 in income.

So the whole idea that somehow working families are going to be spared from the higher taxes under this bill just doesn't hold water. So what we are going to see in this bill is not only higher premiums that are going to affect people across this country who are expecting, because they have heard that health care reform is supposed to lower their health care costs—they are going to see higher premiums. Premiums are going to go up. They are also going to see their taxes go up, and go up significantly because if you look at the Joint Committee on Taxation—

and this is a letter that was written in response to questions that were raised by members of the Senate Finance Committee, and it says:

Subsidy phase-outs raise marginal tax rates because for every additional dollar you earn, you are eligible for a smaller subsidy, imposing potentially high effective tax rates on that additional dollar and reducing your incentive to earn that additional dollar.

According to the Joint Committee on Taxation, families earning 150 percent of the Federal poverty line—and that is \$32,200 of income in this country; that is, 150 percent of the Federal poverty line—will face an effective marginal tax rate of 59 percent, meaning that for every additional dollar these taxpayers earn, they are losing 59 cents of it in foregone subsidies in taxes: Effective marginal tax rate, 59 percent on a wage earner who is making—that is 150 percent of the Federal poverty level or \$32,200. So there are lots of higher taxes in this legislation and lots of higher premiums.

Of course, the final point I will mention, and the other point we know is consistent in all the bills, is significant cuts in Medicare. Under the Senate Finance Committee, there is almost a half trillion dollars' worth of cuts in Medicare in the form of Medicare Advantage, which is about \$133 billion that will be cut out of seniors who are receiving benefits under Medicare Advantage: hospitals, home health agencies, hospices, pharmaceuticals—everybody gets a haircut under this proposal, all of which I would argue is unlikely to happen. Here is why.

Anytime Congress has enacted changes in Medicare that were designed to achieve savings, they inevitably go back and reverse course. We have lots of history to support that assumption. But, nevertheless, let's assume for a minute these taxes did occur.

A \$500 billion, or $\frac{1}{2}$ trillion, cut in Medicare that impacts seniors and health care providers in this country will be one of the results of the reform legislation that is being proposed by the Democrats in the Senate. The Finance Committee's version of that is the most recent. So that is $\frac{1}{2}$ trillion in Medicare cuts, $\frac{1}{2}$ trillion in tax increases, and \$1.8 trillion in new spending when it is fully implemented.

There was sort of a smoke-and-mirrors approach used to shield the true cost of this by having the revenues kick in immediately. The tax increases kick in right away, but the actual costs under the plan don't kick up for about $\frac{1}{2}$ years. You have all these tax increases hitting people right away, and so the 10-year cost of this is understated significantly. CBO said \$829 billion over the first 10 years. I think the important number to look at is what is the cost of this when fully implemented over a 10-year period. It is \$1.8 trillion. That is \$1.8 trillion in new spending, which is financed with higher taxes, cuts in Medicare, and, ironically, no savings to health care consumers because every analysis done says it is

going to lead to higher premiums. I argue as well, in addition to higher premiums, there will be higher taxes and Medicare cuts.

You are also going to see a significant reduction in the quality of service in this country, as you have more and more government expansion in Washington, DC, more and more government involvement in the decisions that are made. The government will now put mandates on what types of policies meet their threshold, their standard. I think, inevitably, in every model around the world where you have that level of government intervention, it leads to a rationing of care, denials of care, and delays with respect to care.

I argue that the whole idea of this being characterized or labeled as reform is completely mislabeled. There is nothing that is reform about this. It raises premiums, raises taxes, and cuts Medicare. I think you are going to see, in addition to that, diminishment in the services that are available to people in this country through many of these programs.

What is the alternative? We believe that rather than throwing the entire health care system overboard in this country, we ought to be looking at what we can do on a step-by-step basis to improve it. Republicans have offered a number of alternatives. We can allow buying insurance across State lines. We believe interstate competition in buying insurance would put downward pressure on prices in this country. That is a good solution. We can have small business health plans, allowing small businesses to join groups. Group purchasing power will bring downward pressure on insurance prices. By the way, that is something a number of us voted for many times here in the Congress. It has always been defeated. Also, we can deal with the issue of medical malpractice reform, which, according to CBO, has significant savings—\$54 billion. That applies to the government side of health care. If you extend that to private health care—I think there are estimates that defensive medicine in this country costs \$100 billion to \$200 billion annually. So if you could address that issue that deals with litigation costs and defensive medicine, you would see savings grow over the estimates of the CBO.

Having said that, those are several things, just off the top right there, that we think are step-by-step improvements in our health care system in this country. That doesn't throw overboard everything that is good about American health care. It doesn't move us toward a government plan or a single-payer system like they have in Europe, Canada, or someplace like that. It preserves the competition we have in the marketplace today and a market-based delivery system for health care in this country.

We will continue to talk about those ideas, as well as many others, including providing tax credits that will give access to health care for those who

don't have it. There is a way to do that that is very simple.

By the way, the Baucus bill, the Finance Committee bill, still leaves 29 million people in this country without health insurance. In spite of \$1.8 trillion in spending, new taxes, higher premiums, and everything that goes with that, you are still not getting many of the people who don't have health insurance covered.

We think the bill that will be brought before the Senate—we don't know what it is at this point because it is being written behind closed doors—is the wrong approach, and the correct approach is a step-by-step process that addresses the shortcomings, the flaws, and attempts to fix those in a way that doesn't bust the bank or the budget, that doesn't raise taxes on consumers and raise premiums for health care consumers, and that doesn't cut Medicare for seniors across this country and for many of the providers that are out there.

Mr. President, I hope that as the American people listen to this debate, they will engage on this issue; that the bill—whatever comes out of the discussions going on in the leader's office, I hope there is an ample amount of time for the American people to analyze it and for Members of the Senate to digest it. This is literally one-sixth of the American economy. We are talking about reorganizing one-sixth of our entire economy. We should do it with great deliberation and great diligence and with a great amount of care and, I argue, not by throwing the current system overboard and wrecking it but by taking a step-by-step approach that improves the system we have today and provides access to those who don't have health insurance and does something to bend the cost curve down and drive health care costs down rather than raising them, like all the bills that have been produced by the Democratic majority in the Congress.

I yield the floor.

The PRESIDING OFFICER. The Senator from Vermont is recognized.

Mr. SANDERS. Mr. President, I wish to spend a few minutes talking on an issue that I think is of concern to tens of millions of senior citizens. Before that, I ask unanimous consent for Senator CHAMBLISS to follow me on the floor.

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

SOCIAL SECURITY

Mr. SANDERS. Mr. President, as you know, today the Social Security Administration announced there will be no COLA, or cost of living increase, next year for more than 50 million seniors. That is the first time in 35 years that situation has occurred, and it worries me very much.

About a month ago, I introduced legislation which the occupant of the chair is a cosponsor of, along with Senators LEAHY, DODD, STABENOW, BEGICH, and CASEY.

I ask unanimous consent to add Senator MIKULSKI and Senator TOM UDALL as cosponsors of S. 1685.

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

Mr. SANDERS. We are all saying that in the midst of this major economic downturn, the worst recession since the Great Depression, while we are keenly concerned about the 9.8 million Americans who are unemployed officially, the Americans who have given up looking for work, the millions of Americans who are working part time when they want to work full time—when you add that all together, that is something like 17 percent of our workforce, about 26 million Americans. We are concerned about that issue, and we have to do everything we can to make sure we get this economy going in a way that benefits not just Wall Street but ordinary Americans.

While we remain concerned about the need to start creating the millions of jobs the middle class in this country desperately need, we cannot turn our backs on the senior citizens of this country. What we are seeing today is that millions of seniors are facing extremely high prescription drug costs. They are facing very high health care costs. We have to address that issue.

The legislation I introduced—and it was introduced by Congressman DEFAZIO in the House—would provide a one-time \$250 payment for more than 50 million seniors and disabled veterans. We would pay for that cost of about \$14 billion by raising the Social Security tax on people who earn between \$250,000 and \$359,000, on a 1-year basis—about \$14 billion.

What I am delighted about is that yesterday President Obama announced his support for the concept of a \$250 one-time payment to our seniors on Social Security and to disabled veterans. He did not yet determine, in his judgment, the best way to fund that program. I think it is a real step forward that he is doing that. I am delighted that the majority leader, Senator REID, has also been very strong on saying we have to make sure our seniors get some help this year, as has Speaker PELOSI and the chairman of the Ways and Means Committee, Congressman RANGEL. I think we are making some real steps in the right direction.

Let me quote what the President said because I think he was right on:

Even as we seek to bring about recovery, we must act on behalf of those hardest hit by this recession. That is why I am announcing my support for an additional \$250 in emergency recovery assistance to seniors, veterans, and people with disabilities to help them make it through these difficult times. These payments will provide aid to more than 50 million people in the coming year, relief that will not only make a difference for them, but for our economy as a whole, complementing the tax cuts we've provided working families and small businesses through the Recovery Act.

I very much appreciate that support from the President.

The bottom line is that this legislation is now in our jurisdiction. My

hope and expectation is that we are going to move it as quickly as possible. With the President's support, we should be able to accomplish that in a short while.

In Vermont, I can tell you there are many seniors making the difficult choice about whether or not to heat their homes or pay for prescription drugs. Those are choices Americans should not have to make. Many seniors are also going to be seeing an increase in the cost of Medicare Part D.

If we do not deliver on this one-time \$250 payment, you are going to see millions of seniors with a reduced amount in their Social Security check. That is not acceptable.

I think we are making some progress on this issue. Again, I thank Senator REID for his strong support, Speaker PELOSI for her support, and most important, the President for his support. Let's get this done on behalf of seniors and disabled veterans. I think we will have done something that is very important.

With that, I yield the floor and 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. CHAMBLISS. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

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

RETIREMENT OF FURMAN BISHER

Mr. CHAMBLISS. Mr. President, I rise to honor a giant in the world of journalism, Furman Bisher.

Last Saturday, after nearly 60 years of elegant observation of the sports world for the Atlanta Journal-Constitution, my friend Furman Bisher pecked out his last and final column before retirement on the thinning keys of his trusty, old Royal typewriter. His choice of instrument to convey his thoughts in this age of instantaneous, inane chatter says a lot about why newspaper readers, after all these years, have continued to seek out his column on the AJC's sports page.

It all comes down to this: Furman's graceful prose, courtly voice, and sharp observations are unfailingly backed up by his old-fashioned shoe-leather reporting. He gloried in doing his homework, making that extra call, interviewing one more player or assistant coach or trainer in order to breathe even more life into the game or the race or the fight for his readers.

It is also why Furman has become a Georgian—and American—institution.

Simply put, Furman Bisher loved sports and he loved journalism. At age 90, he was still driving out on summer nights to cover minor league baseball games.

In his career, Furman scored many journalistic knockouts, including a 1949 interview with Shoeless Joe Jackson, the only one Jackson ever gave re-

garding his involvement in the 1919 Black Sox scandal.

He got stock tips from Ty Cobb and watched every Masters, including Jack Nicklaus's 1986 Masters victory, which he gloried in. He sat in the press box at countless Falcons games at Atlanta-Fulton County Stadium and the Georgia Dome and covered the Olympics, both winter and summer.

He wrote 11 books, including co-authoring two editions of a Hank Aaron autobiography. At the Masters Tournament in Augusta every April, Furman reigned among the azaleas and oaks as the dean of the sports press corps.

In a testament to his longevity in a tough business, Furman has covered every Kentucky Derby since 1950 and every Super Bowl but the first one.

Furman even branched out into TV. Although I did not grow up in Atlanta, I have heard from many people that preachers across the city would cut a sermon short so that their congregations could be home for Furman's kickoff on "Football Review."

Along the way, he earned the respect of his colleagues and the loyalty of his readers, garnering writing awards too numerous to mention. Red Smith is acknowledged as probably the dean of all journalists from a sports perspective, and Furman Bisher has often been referred to as the "Red Smith of the South." He served as president of the National Sportscasters and Sportswriters Association from 1974 to 1976, and of the Football Writers Association of America from 1959 to 1960. His features have appeared in *The Saturday Evening Post*, *Golf Digest*, and *Sports Illustrated*, to name but a few.

In 1961, *Time* magazine named him one of the five best columnists in the Nation. I would argue that even today, that honor still fits.

No less than the great Jack Nicklaus said of Furman's retirement:

He might be turning in his last column for the newspaper, but Furman will never stop writing or giving his opinion. I guess you could say that when it comes to the last writings of Furman Bisher, I will believe it when I don't see it.

Furman would close every column with a single valediction—the word "selah," a Hebrew word that ends many Psalms and that exhorts the reader to reflect.

It is appropriate then to reflect on Furman's long, fruitful career, one that began in Atlanta as the Korean war was starting, when Joe Louis was still boxing, when the Minneapolis Lakers were the NBA champs, before Willie Mays had joined the Major Leagues, and before *Sports Illustrated* even existed.

Ever since, with wit and style, Furman Bisher has chronicled the triumphs and the travails of the sports world and its often all too human heroes.

Furman is leaving the AJC at almost 91 years old, and he is still going strong. While we may not be seeing his

column on a regular basis, I am quite sure we have not heard the last of Furman Bisher. As Furman would say, selah. I am thankful for Furman Bisher.

I yield the floor, and 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. CASEY. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

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

AFGHANISTAN AND PAKISTAN

Mr. CASEY. Mr. President, I know the hour is late and many are ready to end the week. I wish to say a few words tonight about the challenge we have with regard to Afghanistan and Pakistan and our strategy going forward.

I spent some time in the last couple of weeks talking about the obligation we have in the Senate to have a full debate on these issues and not simply to point down Pennsylvania Avenue and say the White House has to do this or that or the President has to do this or that.

It is important, I believe, that the President and his team have taken the kind of time they have to get the strategy right with regard to Afghanistan and Pakistan. But I believe the Congress has a role to play. If we simply fall into partisan corners with regard to our strategy in Afghanistan and dust off and reintroduce talking points from the war in Iraq, we will not get it right; we will get it wrong.

I believe we have to listen to a lot of different points of view. The President has undertaken that kind of review, and we have to do that as well.

Part of that is doing what we have already begun to do, which is to have a series of hearings.

In the Foreign Relations Committee, we have had a number of hearings. I know the Presiding Officer, as a member of the Intelligence Committee and his work as a Senator, has engaged in this review as well. We are trying to get different points of view in front of us. I know Chairman KERRY and the Foreign Relations Committee have had too many hearings to count, and not just in the last couple of weeks but over many months.

Chairman LEVIN and the Armed Services Committee have outlined a strategy, or at least an approach to part of a strategy, to focus on building up the Afghan National Army and the police on an accelerated basis so we can begin to move the responsibility more to the Afghan people and the Afghan governing institutions as opposed to having the United States and other coalition partners bear this responsibility solely. Chairman LEVIN has spent a good deal of time trying to contribute to this debate.

We have heard both Democrats and Republicans contributing to this discussion. As much as we have heard

about General McChrystal's report and his recommendations—and we have heard a good bit about that, and we should, and we have heard an awful lot about his recommendation with regard to troop levels, almost exclusively, General McChrystal's recommendations about troops.

If you read his report—the report that is now public—he talks at length in that report about every topic under that heading and does refer to troops, but he also talks about at least three areas. One, he talks about security. Obviously, as the commander, he should address that issue, and he does. But he also talks about governance and development. Those three areas are critically important. We can get the troop level right and get the whole strategy wrong. Even if we focus on security, which obviously involves troop levels and military determinations we have to make, we have to get it right with regard to development and also with regard to governance.

I note for the record an article from—I do not have it in front of me, but I will refer to it. The New York Times on October 2 had a story about General McChrystal's approach to the strategy, but he was quoted in that story talking about debate and deliberation.

I have been listening to some people who talked about what he is recommending. One would think all he did was put together a report, send it to Washington, and the report said “add troops” and that is all he had to say. General McChrystal—I am paraphrasing—did refer to both debate and deliberation to get the strategy right. He also said we do not have the luxury of moving too fast. I think that is instructive of what he has been recommending.

I want to talk tonight briefly about one of those three areas, not security or development, but governance, and in particular talk for a moment about elections and other aspects of governance as well as the judiciary.

I know the Senator from Rhode Island, the Presiding Officer, is a member of the Senate Judiciary Committee and a former prosecutor and understands how important the judiciary is to a functioning democracy. We have a ways to go and the Afghan people have a ways to go between here and there, meaning here where they are today and where they must get to with regard to their judiciary.

In terms of the election, we heard a lot about the problems, and some of it bears repeating. As documented by the National Democratic Institute, the International Republican Institute, Democracy International, and a host of other international observers, the elections in Afghanistan saw widespread fraud amid an atmosphere of escalated violence. We saw many of these problems coming before the elections, and despite having years to prepare, there is still not a reliable voters list, which opened the possibility of wholesale

fraud on election day. The “single non-transferable vote system” for the provincial government elections has led to candidates gaining seats with only a few actual votes. On election day, many citizens were too scared to vote, citing Taliban threats to bomb polling stations or literally cut fingers off of voters. Afghanistan itself can and should take several concrete steps or measures to address these issues prior to the next election, including fixing the voters list, considering moving away from the single nontransferable voter system, and enhancing the security environment for voters in the preelection period and on election day.

I would add to this that when I was in Afghanistan and Pakistan back in August with Senator BROWN and Congressman ZACK SPACE, we had several briefings and one of them was on the election. One point that was made we shouldn't lose sight of. This election, for all the fraud that we know is on the record now, for all the problems, the security environment was generally good. The fact that despite those threats by the Taliban an election took place in a time of war and under an adverse, difficult security environment shouldn't be glossed over. It was a significant challenge. So we had a lot of fraud, but in terms of security there is some good news on the security front.

Organized representation of any citizen's interests in Afghanistan also remains underdeveloped. The electoral system disincentivizes the development of vibrant party structures. This is problematic, because without political parties—it is hard for us to understand this is still a problem—without political parties that can help to organize and represent the policy concerns of the people, there is little hope that the Parliament's legislation can truly reflect the will of the Afghan people.

Governing institutions in Afghanistan have atrophied over decades of civil war and Taliban rule and have begun to develop other problems as well, but institutional reform is vitally necessary. We know that the idea of a strong central government in the history of Afghanistan is somewhat of a foreign concept. In recent years, the international community has placed an emphasis on the development of governing institutions in Kabul, capable of projecting its presence and influence across the country, but it has been a difficult challenge. Not enough attention has been paid to the development of proper financing of local governing institutions. Provincial government is underfunded, and that opens the door to local level corruption.

Local and international development nongovernmental organizations often take the lead in local development projects, which can serve to minimize the role of the provincial government at a time when we need their role to be strengthened in terms of what people see. So just at a time when you need strong evidence of local government, sometimes the NGOs are doing a lot of the work.

While the international community has not paid enough attention to the development of local governing structures, the Taliban, unfortunately, understands the importance of connecting with the people at the local level. Over the past few years, the Taliban has established shadow governments across the south which mete out their form of Sharia justice. They have ombudsmen who travel from district to district to gauge the work of the Taliban shadow government and their officials. And of course we know that Mullah Omar, the former head of the Taliban-led government, now runs the so-called Quetta Shura—QST as it is known by its acronym—and they have produced a 30-page manual, believe it or not, on how best to win the favor of the local population.

So the Taliban is not just thinking in military terms. They have already not just thought about but have begun to implement a governing strategy, and our government—our strategy—and also the Afghan people, as well as our coalition partners—have to think this through as well and get it right. It is important we get this right—the governing part of our challenge—as much as we get the military part of this right.

The Afghan Government should make every effort to devolve power and resources to the local level to bring good governance as close to the people as possible. The provincial reconstruction teams can help and play a supporting role, but this essential connection between the Afghan citizen and government must be an Afghan-led enterprise.

Let me conclude with this thought about the judiciary. The Taliban are threatened by a strong judiciary, as evidenced by its deadly attack on the Ministry of Justice in Kabul earlier this year. High levels of endemic corruption, insufficiently trained staff, and a complicated system of western, customary, and Sharia law hinders the Afghan Government's ability to provide justice for its people. This is perhaps the biggest threat to the Afghan Government's viability, the Taliban's ability to provide quick, albeit brutal, justice, which sharply contrasts with the corrupt government officials who are unwilling or unable to take action. So in the absence of a strong effort by the government to provide the kind of judiciary that we would hope they could provide, the Taliban has filled the void. Thus a majority of legal disputes are settled outside of the state's formal justice system. With little trust in the government, the population can easily turn to the Taliban for a swift, brutal form of justice.

As we ramp up our efforts to train the Afghan National Police force, we must at the same time consider parallel reforms that must take place within the formal justice sector. We must support Afghan efforts toward institutional reform in the Ministry of Justice so that the local population

will not rely only upon the informal justice sector, or worse, turn in fact to the Taliban for justice.

There has been noteworthy progress in some democratic institution building within the country. First, by way of example, the Ministries of Defense and Interior are often recognized for their positive efforts. And while considerable work remains to be done, each has made significant strides in recent years. I can say from somewhat of a firsthand observation that both Defense Minister Wardal and Interior Minister Akmar, two ministers we met with on our trip in August and sat down with, indicated to me they have a strong sense of where they have to go to develop the Afghan army and police force, the security for the country. But they still have to demonstrate that over time. No matter who ultimately wins the Presidential election, I hope that the Afghan Government will retain these important ministers, who have the institutional knowledge of success and of clear plans for continued development.

Second, the health sector, in particular, has seen impressive gains since the fall of the Taliban government. Today, in Afghanistan, 82 percent of the population lives in districts with access to a government-provided health care package, up from 9 percent in 2003. That is a bit of good news we don't often hear about, but I am sure there is progress yet to be made there as well in terms of health care.

Third, the education sector has seen improvements as well. In 2001, less than 1 million children—probably about 10 percent of the school-aged population—were enrolled in elementary or secondary education, and almost none of them were girls at that time. Today, more than 6 million children are enrolled, 2 million of whom are girls. So there has been measurable and significant progress in Afghanistan despite the recent deteriorating security environment.

Building on these fragile gains will rest in large part on the viability of the Afghan democratic institutions. The United States can help in this effort through the continued provision of development assistance and other forms of diplomatic and political support for Afghanistan's institutions. While the security situation is increasingly grave, between 79 and 91 percent of the population remains opposed to the Taliban and their brand of violent politics and their brand of justice. I hope we can consolidate on the gains made in Afghanistan and seriously begin to address the severe shortcomings that remain in the democratic development of the country.

In conclusion, I would say that despite all the bad news about the security environment, which is news we need to hear, we need to put it in the context of the two other challenges beyond security—governance and development. I have pointed out some real problems with the governance, espe-

cially as it relates to the judiciary, but we have had some progress on health and on education. We need to accelerate and develop that and incentivize it and get it right, but we have seen some good news.

So I think as we debate this strategy going forward, those of us in the Senate who have a role to play here and who feel the obligation to get this right have to focus on more than just security and troops and the military. We have to make sure that we get strategies in place to enhance and increase the governance priority as well as development. We will talk more at another time about development.

I thank the Chair and yield the floor.

HONORING OUR ARMED FORCES

SERGEANT JOSHUA KIRK

Mrs. SHAHEEN. Mr. President, it is with deep sympathy and a heavy heart that I express my condolences to the family of SGT Joshua Kirk who was killed on October 3 in Afghanistan. Joshua was serving his second tour of duty as part of Operation Enduring Freedom. The American people will forever be grateful for his ultimate sacrifice.

Sergeant Kirk enlisted in the Army in the spring of 2005, joining the 4th Infantry Division based out of Fort Carson in Colorado Springs, CO. He was originally from Thomaston, ME and attended Southern Maine Community College, where he met his wife Megan of Exeter, NH, and earned a degree in construction technology.

Joshua believed deeply in his mission and in the cause of freedom for which he and seven of his fellow soldiers sacrificed their lives together. Words will not assuage the anguish each of these soldier's family will feel, nor the sense of loss at Fort Carson when these brave men failed to return home, but we hope that one day these families will take solace in what President Lincoln described as "the solemn pride that must be yours to have laid so costly a sacrifice upon the altar of freedom."

Our Nation can never fully repay the sacrifice Sergeant Kirk and his family have made. Through his service, he helped preserve the safety and security of the American people. It now falls to all of us to take up this responsibility and ensure that the cause Sergeant Kirk gave his life for is won for his wife and young daughter.

I ask my colleagues to join me and all Americans in honoring the life of SGT Joshua Kirk.

STAFF SERGEANT KURT R. CURTISS

Mr. HATCH. Mr. President, I rise today to pay tribute to U.S. Army SSG Kurt R. Curtiss of Utah who made the ultimate sacrifice for his country on August 26, 2009. The staff sergeant died from injuries sustained from enemy small arms fire in Paktika Province, Afghanistan. Staff Sergeant Curtiss was leading his unit into a hospital trying to rescue patients trapped inside when the attack occurred.

Staff Sergeant Curtiss was assigned to Headquarters and Headquarters Company, 1st Battalion, 501st Parachute Infantry Regiment, 25th Infantry Division, Fort Richardson, AK, in support of Operation Enduring Freedom.

On the day after the September 11 attacks, Kurt Curtiss enlisted in the Army. He wanted to protect his country and make the world a better place. This call to service led to two tours in Iraq and a final tour in Afghanistan. The sense of patriotism exhibited by his actions provides a striking example to us all.

Early in his youth, Staff Sergeant Curtiss learned of selflessness and acceptance as he grew up in a home where his mother cared for over 60 foster children. He will be remembered for his love, devotion, compassion, and humor. Curtiss loved life. He was a caring man who always placed others before himself, a characteristic exemplified by his final moments.

Staff Sergeant Curtiss left behind a wife and two young children who I hope can find solace in the immense gratitude that our Nation owes for his selfless service to his countrymen. We are forever in his and his family's debt.

Therefore I know that I am joined by all of my colleagues in the Senate in mourning the loss of SSG Kurt R. Curtiss, our protector and hero.

REMEMBERING SENATOR EDWARD M. KENNEDY

Mr. KIRK. Mr. President, yesterday evening, President Obama delivered another eloquent tribute to Senator Edward M. Kennedy. I am sure my colleagues will be pleased and touched to see it, and I ask unanimous consent that excerpts from the tribute may be printed at this point in the RECORD. I also ask unanimous consent that a series of tributes to Senator Kennedy from "The Hill" newspaper on August 29, 2009 may be printed in the RECORD.

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

EXCERPTS FROM REMARKS BY THE PRESIDENT AT AN EVENT CELEBRATING THE EDWARD M. KENNEDY INSTITUTE FOR THE UNITED STATES SENATE (Ritz Carlton Hotel, Washington, DC, Oct. 14, 2009)

The PRESIDENT: Thank you so much. Thank you, Patrick, for that generous introduction, and for ensuring that the Kennedy family spirit of public service lives on as strong as ever. . . .

And to Vicki and all the members of the Kennedy family—to Ted and Kara, obviously Patrick—there are few who are not inspired by the grace and love that all of you have shown throughout a difficult time.

Our friend Ted left us less than two months ago. In the days that followed, we gathered in Boston to celebrate his life—with a joyous Irish wake of sorts at the John F. Kennedy Library, and with heavy hearts on Mission Hill. We watched as mourners lined the streets of Massachusetts and Washington in the rain to say a final thank you; and as decades' worth of his colleagues and staff lined the steps of the Capitol to say a final goodbye. We smiled as the Caucus Room in the

Russell Building, a room where so much American history was made, was renamed for the three Kennedy brothers who served there.

And over those days, there was some small measure of comfort in the fact that millions of Americans were reminded of Ted Kennedy's legacy, and a new generation came to know it. His legacy as a man, who loved his family and loved his country. His legacy as a senator, who crafted hundreds of pieces of legislation and helped pass thousands more, all with an incalculable impact on the lives of millions.

His legacy as a mentor, who not only taught so many young senators, including myself, but inspired so many young people and young staffers, some who entered public service because of Teddy, others who—because of him—just plain refused to leave. . . .

When Teddy first arrived in the United States Senate, he immersed himself in the issues of the day and the concerns of folks back home. But he also threw himself into the history of the chamber. He studied its philosophical underpinnings; he studied its giants and their careers; the times that influenced its members, and how its members influenced the times. He became fluent in procedure and protocol, no matter how obscure, until he could master the Senate as easily as he mastered the oceans.

No one made the Senate come alive like he did. He loved its history and its place in our American story. Rarely was he more animated than when he'd lead you through the living museums that were his office and his hideaway office in the Capitol. They held memories that stood still, even as he refused to. And he could—and he would—tell you everything there was to know about each artifact, each object that you were seeing.

Any of us who've had the privilege to serve in that institution know that it's impossible not to share Teddy's feeling for the history that swirls around us. It's a place where you instinctively pull yourself a little straighter and commit yourself to acting a little nobler.

I still remember the first time I pulled open the drawer of my desk and saw the names like Taft and Baker; Simon and Wellstone—and Robert F. Kennedy. I thought of the great battles they'd waged and how they still echoed through the Senate chambers. And one can't enter the chamber without thinking of the momentous debates that have occurred within its walls—questions of war and peace; of tangled bargain between North and South; federal and state; of the origins of slavery and prejudice; of the unfinished battles for civil rights and equality and opportunity.

It was where Americans of great eloquence deliberated and discussed the great issues of the age; where Webster and Clay and Calhoun fought and forged compromise; where LBJ stalked the aisles, imposing his will and collecting votes; and where Ted Kennedy raged at injustice like a force of nature, even after a staffer would hand him a note saying, "Sir, you're shouting."

At its worst, it could be a place where progress was stymied. There was a time, of course, when there were no desks for women, or African Americans, or Latino Americans, or Asian Americans. There was a time when a Senator might have referred to another as a—I like this—"noisome, squat and nameless animal," just to name one instance of the occasional lack of decorum. And we should all view it as a positive sign that there hasn't been a caning on the Senate floor in more than 150 years. That's good.

But at its best, it was what Ted Kennedy loved; a place of community and camaraderie where Senators inspired their col-

leagues to seek out those better angels and work collectively to perfect our union, bit by bit. And in my time in the Senate, I never met a colleague, not even one with whom I most deeply disagreed, who didn't have a deep sincerity in his or her beliefs, an abiding love for this country, and a genuine desire to leave it stronger and better.

Still, I know that many of us, from both parties, shared Ted's sentiment that something vital about the Senate has been lost. Where it once was a more personal and more collegial place, it's become more polarized and more confrontational. And gone, sometimes, is that deeper understanding of one another; that ideas that there are great battles to be won and great battles to be waged—but not against the person on the other side of the aisle, rather to be waged on behalf of the country.

What Ted wanted to save, above anything else, is that sense of community and collegiality and mutual responsibility—to our constituents, to the institution, and to one another. "As senators," he wrote, "we need to be vigilant that we don't lose track of the whole essence of what the Senate is; of what our involvement in it signifies; of our relationship with people; and of what all of that should lead to, which is the unfettered and vital exchange of ideas."

That's why whenever heartbreak struck a colleague—he was always the first to call. That's why whenever a stalemate needed to be broken—he was the first to visit another senator's office. That's why whenever debate got fierce he never got personal—because that was the fastest way to ensure nothing got done. Once, after he and Strom Thurmond went at each other for a few rounds—as you'd imagine Ted and Strom might do—Ted put his arm around him and said, "C'mon, Strom. Let's go upstairs and I'll give you a few judges."

The thing is, even though he never technically ran the Senate, it often felt like Teddy did. It was his arena. That's why, if you came to the Senate hoping to be a great senator someday, he was who you went to see first. I know that's who I went to see first. Because rather than lord over it, Teddy sought to mentor others to better navigate it. Rather than to go it alone, he sought cooperation, he never hesitated to cede credit. Rather than abandon course when political winds got rough, he always followed his north star—the cause of a society that is more fair, more decent, and more just. And through all of it, his seriousness of purpose was rivaled only by his humility, his warmth, his good cheer, his sense of humor.

That is who Ted Kennedy was. That's what he did. And that's why he's so missed. . . .

For it is now—especially now—that we need to get people interested in our public problems, and reignite their faith in our public institutions, bring Americans together to forge consensus and understand not just the United States Senate's role in our government—but their role in it at well.

Today, the Senate is engaged in another important battle on one of the great causes of our time, and the cause of Ted Kennedy's life—the battle to make health care not a privilege for some, but a right for all. He has been so sorely missed in this debate; especially now that we're closer than we've ever been to passing real health reform. But even though we took a critical step forward this week, we've got more work to do. And I hope and believe that we will continue to engage each other with the spirit of civility and seriousness that has brought us this far—a spirit that I think Teddy would have liked to see.

More than a half century ago, a Senate committee was set up to choose the five greatest senators of all time. No, it wasn't

an exercise in the Senate's own vanity—it was because there were five empty spaces designated for portraits in the Senate Reception Room.

"There are no standard tests to apply to a Senator," the chairman of that committee wrote. "No Dun & Bradstreet rating, no scouting reports. His talents may vary with his time; his contribution may be limited by his politics. To judge his own true greatness, particularly in comparison with his fellow senators long after they are all dead, is nearly an impossible task."

When John F. Kennedy wrote those words, I doubt that he imagined his 25-year-old brother would one day stand as indisputably one of the finest senators of this or any age. But here's the thing: Teddy—Teddy didn't earn that distinction just because he served in the United States Senate for nearly one out of every five days of its existence. He earned it because each of those days was full, and passionate, and productive, and advanced the life of this nation in a way that few Americans ever have. And he did it all by bridging the partisan divide again and again in an era that someday may be recalled as one where bipartisanship was too rare an achievement.

There will never be another like Ted Kennedy. But there will be other great senators who follow in his footsteps. That's not an insult to his legacy—it is, rather, the legacy he sought to leave, both with this institute and with his example.

"Being a senator changes a person," he wrote in his memoirs. "Something fundamental and profound happens to you when you arrive there, and it stays with you all the time that you are privileged to serve. I have seen the changes in people who have come into the Senate. It may take a year, or two years, or three years, but it always happens: it fills you with a heightened sense of purpose."

In all our debates, through all our tests, over all the years that are left to come—may we all be blessed with a sense of purpose like Edward M. Kennedy's. Thank you, Vicki, thanks to all of you. Thanks for making this such a success. God bless you, God bless America.

TED KENNEDY: A LIFE OF SERVICE

(By Speaker Nancy Pelosi (D-Calif.))

With the passing of Sen. Edward M. Kennedy (D-Mass.), this nation lost a great patriot, a force for justice and equality and a passionate voice for a brighter future.

Sen. Kennedy was the beloved patriarch of a beautiful family. At this moment of mourning, our thoughts and prayers are with his loving, caring and devoted wife, Vicki; and with his children, Kara, Teddy Jr. and our colleague Patrick. Surely it was a highlight for both father and son to see the Kennedy-Kennedy Mental Health Parity bill become law last year—ending discriminatory treatment toward mental health coverage—and a true tribute to the Kennedy family's unyielding commitment to the common good.

Above all else, Sen. Kennedy was a champion—of the poor and the oppressed, of the forgotten and the voiceless, of young and old. Over a lifetime of leadership, Sen. Kennedy's statesmanship, passionate arguments and political prowess produced a wealth of accomplishment that expanded opportunity for every American and extended the blessings of prosperity to millions of his fellow citizens.

He had a grand vision for America and an unparalleled ability to effect change and inspire others to devote themselves to that change. And no one did more to educate our children, care for our seniors and ensure equality for all Americans.

The reach of Sen. Kennedy's achievements extends far beyond any one state, issue or group. And the light of his example shone bright across lines of party or philosophy. Because of his work, countless students can afford to reach for a college diploma.

Because he returned to the Senate floor for one day last July, once-fierce opponents of Medicare understood their responsibility not to politics, but to the people they serve—and today, America's seniors have a stronger and more enduring safety net to keep them healthy.

Because he believed in the need for bold action to rescue our economy, from his hospital bed he played a pivotal role in ensuring the passage of the American Recovery and Reinvestment Act, putting people back to work and setting our nation on the road to recovery. And because of his stirring words of optimism, vitality and courage at the Democratic convention exactly one year before he passed away, he laid a foundation for the election of a president who shared his ideals and intellect—and personified his vision of an America where race was no longer a barrier or qualification.

Sen. Kennedy's deep faith remained a palpable force in his life. It inspired his belief in social justice. It demanded action on behalf of the least among us. It sustained him, and offered a refuge from the spotlight of elected office. When his daughter, Kara, was diagnosed with lung cancer, Sen. Kennedy turned to his faith for solace, going to Mass each morning in the same house of worship where his funeral service will be conducted—a basilica that became a source of hope and optimism for him in recent years.

Throughout his career, Ted Kennedy spoke of a new hope; of holding fast to our ideals and fulfilling the promise of our country. He carried on the legacy of an extraordinary family—a family defined by service and a family that inspired an entire generation, including myself, to take action and to serve a cause greater than our individual interests. And with the Edward M. Kennedy Serve America Act now the law of the land, another generation of teachers and volunteers, students and community organizers will put those values into action.

Perhaps more than any other issue, Sen. Kennedy never stopped fighting for what he called "the cause of my life"—ensuring quality, affordable healthcare for every American. He believed it was a moral imperative. He viewed it "as a fundamental right, not a privilege." It is a tribute to him—but really to the Americans for whom he fought every day—that this dream will become reality this year.

ONE OF A KIND

(By Rep. Dale E. Kildee (D-Mich.), Chairman of the Subcommittee on Early Childhood, Elementary and Secondary Education)

I have a lot of acquaintances in Congress and many friends, but one who stood out above the rest and to whom I always felt close was Ted Kennedy. It was a privilege to know him as a friend, and it was an honor to work with one of the most dedicated and knowledgeable senators I ever met. His passing is truly a great loss for our country. I am hopeful, however, that in mourning his death, we will be inspired to continue to fight for the causes to which he dedicated himself so tirelessly and work together to pass the comprehensive healthcare reform that he called "the cause of my life."

My relationship with the Kennedys started back in 1960 when I was a volunteer on John F. Kennedy's campaign for president and had the privilege of meeting his mother Rose, who was nothing but gracious and kind. When Rose came to my hometown of Flint,

Mich., to campaign for her son, it was my responsibility to get her to Mass at St. Michael's. It wasn't even Sunday, but Rose went to Mass every day. I met John later that year when he was campaigning for the presidency and again in October of 1962 when he came to campaign for the midterm congressional elections. Shortly thereafter he went back to Washington claiming he had a "bad cold," even though he appeared to be the picture of health. We learned later that we weren't completely misled, but that it was a different kind of cold flaring up—the Cuban Missile Crisis, one of the most heated moments of the Cold War.

Ted was the last member of the Kennedy family whom I actually met, but my relationship with him lasted the longest. Like his brothers, Ted was born into a life of privilege, but instead of choosing a comfortable life of leisure, he chose to work hard in the U.S. Senate, fighting to improve the lives of American families. Ted successfully fought to raise the minimum wage, protect Americans with disabilities, expand health insurance for low-income children and improve educational opportunities for all students, regardless of family income. His legislative accomplishments were so wide in scope that his work has changed the life of nearly every American for the better.

Ted and I shared a passion to improve education and we worked together often, particularly during the Head Start Reauthorization of 2007, which he and I authored. During many of the other conferences we worked on together, when differences arose that were slowing down the passage of legislation, Ted was a skilled and fair negotiator who would keep the conversation going until late into the night to make sure things were resolved. From Ted, I learned that compromise is often necessary to achieve the greater good. But above all, he taught me that we must never stop fighting for what we believe in.

While Ted achieved greatness in his political life, he was no stranger to personal tragedy and suffering. The country mourned with him as first John and then Bobby were taken from us in acts of violence, leaving Ted as the only remaining Kennedy brother. A 1964 plane crash broke his back and left him with terrible pain that plagued him for the rest of his life, but he never let his condition get in the way of his goals for the country. His discomfort was evident on the trips he often took with me to Flint, where he always enjoyed visiting Buick UAW Local 599. It was difficult for him to stand for long, but he would patiently pose for pictures and sign autographs for the workers there, who greeted him as a hero. He would stay until his back became too painful and then he would turn to me and say, "Dale, you have to get me out of here, now," and we would make a quick exit so he could rest in my campaign van, which he referred to as the "Kildee Express." Even while in pain, he always had a smile on his face and was an inspiration to those around him.

I have never known another senator like Ted Kennedy, and we may never see another like him again. He carried on the torch of his family's political legacy, masterfully reaching across the aisle to shepherd important and often difficult pieces of legislation through Congress. As we mourn the passing of our friend Ted, let us celebrate his numerous achievements and remember him for the great humanitarian and leader that he was. Let us honor his memory by never giving up the fight for social justice, never resting until every child has an equal chance to learn, and never backing down until every American has access to quality affordable healthcare. He often called universal healthcare "the cause of my life" and it is a tragedy that he will not be around to vote

for the legislation for which he fought so tirelessly. So let's continue the fight in his honor and pass healthcare reform so that all Americans, regardless of income, age or pre-existing condition, will have access to quality, affordable healthcare. Let's realize this dream for Ted and for America.

A DEDICATED SERVANT AND A DEAR FRIEND (By Secretary Dirk Kempthorne, former Secretary of the Interior)

As a very junior senator from Idaho, I selected an office on the third floor of the Russell Building, which happened to be next door to Sen. Ted Kennedy's office. The first day that we were allowed to officially occupy the space, in came Sen. Kennedy, walking through each of the offices and introducing himself to all of my staff and welcoming each of them to the Russell. Later that day, a beautiful bouquet of flowers showed up for my wife, Patricia, with a note saying, "Welcome to the neighborhood—Ted." With that, Patricia and I began a wonderful and enduring relationship with Ted and Vicki Kennedy.

Our offices shared a common balcony, and I had a friend from the Kennedy offices who used that route to come see me every day . . . Blarney, his Jack Russell Terrier. I began keeping a box of Milk Bones for Blarney's morning visits—and he gladly accepted these treats. In his classical Boston accent, Ted would pretend frustration with Blarney's habit of taking the treats back down the balcony and eating them in his office while leaving all the crumbs on his floor!

When I decided to come home to Idaho and run for governor, Sen. Kennedy said he completely understood my decision. There was no second-guessing why I would want to return to a beautiful state like Idaho and be closer to the people there. He wished me well and said that he would miss me. Little did we both know that in 2006 President George W. Bush would nominate me to become the 49th Secretary of the Interior. One of the very first calls I received after the announcement was from Ted Kennedy, who said he was so glad I was coming back and he asked what he could do to help with my confirmation. That was the kind of man he was and the kind of friend he was. It didn't matter that I was a conservative Republican or he was a liberal Democrat. We were friends, and he wanted to help. And he did.

Several months later, I got another call from Ted Kennedy telling me he had been invited to speak at the Ronald Reagan Library. Nancy Reagan was going to host an intimate dinner for him in her residence at the library and she said he could invite a few friends. He was calling to see if I would go. After extending the invitation, he started laughing and said, "What a pal I am, right? Inviting you to dinner 2,500 miles from here!" We both laughed, and I said I wouldn't miss it for anything.

The night of the speech, I was seated in the front row along with Nancy Reagan and California Gov. Arnold Schwarzenegger. Sen. Kennedy commented on how three of his favorite Republicans were there for him. I don't think many people realize how much Ronald Reagan and Ted Kennedy liked each other, but it was very apparent that night at the dinner that Nancy gave for her friend, Ted, and his great wife Vicki, and a few of their friends.

After Sen. Kennedy was diagnosed with his illness and it was made public, I wrote him a two-page letter recapping some of the positive and enjoyable things we had done together. I received an immediate call from Vicki saying how it had brightened his day. That was followed by a handwritten note from Ted, and that was followed by a phone

call from him. It was a good visit on the phone, but, as usual, he also had some business he wanted to discuss. He always worked so diligently for his constituents. I last spoke to him in January of this year. It was that same jovial voice of a friend with no hint of the personal health battle he was fighting.

It is universally noted how hard he worked as a senator. He also worked hard at affirming and maintaining friendships. Wouldn't this be a better place if we all worked a little harder at affirming and maintaining friendships? Perhaps this, too, was one of Ted Kennedy's lasting legacies.

I will miss my friend.

IN MEMORY OF TED KENNEDY

(By Nancy Reagan)

Sometimes the best friendships are made under unlikely circumstances. Such was the case with the Kennedys and the Reagans.

Of course there were differences in our political beliefs, and some believed that those differences would make it impossible for us to get along. Most people are very surprised to learn that our families are actually quite close.

Ted and I have corresponded regularly for years. He always wrote lovely letters of support, encouragement and appreciation. He phoned often—I'll never forget that he managed to track me down in the middle of the Pacific Ocean to wish me a happy birthday one year. I enjoyed working together with him over the past few years on behalf of a cause that was important to both of us, stem cell research.

As a Republican president and a Democratic senator, Ronnie and Ted certainly had their battles. There were conflicts to overcome, disagreements to settle and compromises to be made, but in doing so, the mutual respect that came from struggling to work together led to a deeper understanding and friendship. Both were men of strong convictions, but they understood an important principle: Politicians can disagree without being disagreeable.

When Ronnie and I were presented with the Congressional Gold Medal in 2002, Ted gave a beautiful tribute to Ronnie. As I reread that speech today, I was struck by how some of the wonderful things he said about Ronnie also describe Ted: "He was a fierce competitor who wanted to win—not just for himself, but for his beliefs. He sought to defeat his opponents, not destroy them. He taught us that while the battle would inevitably resume the next morning, at the end of each day we could put aside the divisions and the debates. We could sit down together side by side . . . And above all, whatever our differences, we were bound together by our love of our country and its ideals." That was Ronnie, all right—and that was Ted, too.

Ted and Ronnie were the kind of old-fashioned politicians who could see beyond their own partisan convictions and work together for the good of the country. I wish there were more of that spirit in Washington today. I am encouraged to see how many politicians "from across the aisle" spoke of their admiration for Ted after his passing, so maybe it isn't really lost. Maybe we can all be inspired by Ted and Ronnie to renew that spirit of bipartisan cooperation.

Ted Kennedy was a kind man, a great ally and dear friend. I will miss him.

KENNEDY AND THE GOP: A MARRIAGE OF MUTUAL RESPECT

(By J. Taylor Rushing)

Despite his affinity for liberal policy-making, Republicans on Capitol Hill greatly admired Sen. Edward Kennedy (D-Mass.).

"He's a legislator's legislator," Sen. Jon Kyl (R-Ariz.) told *The Hill* last May, imme-

diately after Kennedy's diagnosis of brain cancer. "At the end of the day, he wants to legislate, he understands how, and he understands compromise. And it's worth talking about because it shows how people with drastically different points of view can come together."

In April, *The Hill* conducted a survey of all sitting senators to ask which member of the opposing party they most enjoyed working with. The most common answer among Republicans was Kennedy, being specifically mentioned by Kyl, Orrin Hatch of Utah, Kit Bond of Missouri, Richard Burr of North Carolina, Sam Brownback of Kansas, Mike Enzi of Wyoming, Johnny Isakson of Georgia and Jeff Sessions of Alabama.

"I'd love to co-sponsor every piece of legislation with Ted Kennedy," Burr said at the time. "When Ted says he's going to do something, he's committed to it."

Kennedy's 47 years in the Senate began as his brother, Democrat John F. Kennedy, was president and were marked by a legislative record of liberalism long and prominent enough to earn him his "Liberal Lion" moniker. Republican Party leaders even used him as a fundraising tool for years in races across the country.

In the Senate itself, though, the Massachusetts senator was mostly known by Republicans for his bipartisanship—for diligent, patient and consistent reaching across the aisle to find common ground on the country's most pressing concerns. Eventually, some of the chamber's most conservative Republicans, from Alan Simpson of Wyoming to Hatch to Kyl, came to discover that while Kennedy may have had the heart of a liberal, he possessed the mind of a pragmatist.

Republican leaders such as Conference Chairman Lamar Alexander of Tennessee recalled that Kennedy was known for reaching out since his earliest days in Congress. Alexander came to Congress in 1967 as an aide to then-Sen. Howard Baker of Tennessee and worked with Kennedy near the end of his first term.

"I've known and worked with him for 40 years. He's results-oriented. He takes his positions, but he sits down and gets results," Alexander said last May.

In recent years, examples of Kennedy's bipartisan efforts included teaming up with Kansas Republican Nancy Kassebaum on healthcare in 1996, with President George W. Bush on education reform in 2001, and on unsuccessful attempts with Sen. John McCain (R-Ariz.) and other Republicans to pass immigration reform in the 110th and 111th Congresses.

KENNEDY BROUGHT INTENSITY, PASSION TO THE SENATE

(By Jim Manley)

Coming from a wealthy, famous family, Sen. Kennedy could have taken shortcuts. But he never did that—he brought a passion and intensity to his work the likes of which I will never forget.

His staff accepted the long hours and dedication he demanded from us because he stood with us working twice as hard.

Former Senate Majority Leader George Mitchell (D-Maine) once accurately remarked that Sen. Kennedy was better-prepared than any other senator. His *No Child Left Behind* briefing book was legendary—a huge binder full of studies and analyses. It seemed every page was dog-eared, heavily underlined and carefully tabbed.

One Friday, there was a lull in a debate over a minimum-wage increase. On pure impulse, he went to the Senate floor and delivered one of the most impassioned speeches I had ever heard from him. At one point, he voice echoed through the chamber so loud

that I had to leave the floor because my ears were ringing.

As Sen. Kennedy said of his brother Robert, the same can be said of him. He "need not be idealized, or enlarged in death beyond what he was in life, to be remembered simply as a good and decent man, who saw wrong and tried to right it, saw suffering and tried to heal it, saw war and tried to stop it."

BAYH REMEMBERS 1964 PLANE CRASH

(By J. Taylor Rushing)

If not for former Sen. Birch Bayh of Indiana, Sen. Edward Kennedy very well may have died on the night of June 19, 1964.

Both nearly died in a plane crash the night the Senate passed the 1964 Civil Rights Act. Delayed by the vote, the two men were flying through a thunderstorm to get to the Massachusetts state Democratic convention.

"We were bounced around so much we couldn't see the moon in any steady way," said Bayh, who served in the Senate from 1963 to 1981 and is now a partner in the D.C. law firm Venable LLP. "Then I looked out and saw this black line coming. I thought it was another storm, but it was the tops of trees."

Pilot Ed Zimy pulled out of the trees but quickly lost control again, crashing into an apple orchard just short of the Springfield airport. Bayh said he thought the plane had been hit by lightning, and was convinced he was dead. When he woke up, Bayh said, his wife Marvella was screaming, the pilot and Kennedy aide Ed Moss were both mortally wounded and Kennedy was barely responsive.

Bayh said he resisted initial thoughts of leaving Kennedy in the wreckage, but was later amazed at how he carried the hefty senator.

"We've all heard adrenaline stories about how a mother can lift a car off a trapped infant. Well, Kennedy was no small guy, and I was able to lug him out of there like a sack of corn under my arm," Bayh said.

Kennedy spent five months in the hospital, re-emerging barely in time to win reelection in November 1964.

"A lot of the older senators were wondering if they were going to have to kiss his ring. I mean, he could have been a pariah," Bayh said. "But he had no airs, and just did a remarkable job of ingratiating himself not only to his new colleagues but the older members."

"He was a Kennedy, and you could say he was born with a silver spoon in his mouth, but he was determined to spend his life helping the little people. That tells you what he was made of."

BOEHNER FOUND KENNEDY A GENEROUS PARTNER IN FAITH

(By Christina Wilkie)

Rep. John Boehner (R-Ohio) needed a favor.

In 2003, Boehner wanted to support Washington's Catholic schools, which were suffering severe budget shortfalls. He needed an A-list Democrat willing to lend his name to the effort.

What he got instead was access to one of the most powerful Democratic fundraising machines in politics.

The GOP congressman was setting up a gala dinner complete with celebrities, politicians and media personalities. He went for the most powerful Catholic in Congress, Sen. Edward Kennedy (D-Mass.), to be his partner at the event and balance the politics.

Presented with Boehner's request to co-chair the inaugural gala dinner, Kennedy "didn't blink" before signing on; and true to his reputation for generosity, Kennedy's response went well beyond that.

Kennedy threw himself into the project, offering Boehner the use of his entire fundraising staff to assist with the event. He

wrote letters and made personal appeals on behalf of the struggling schools. And perhaps most importantly, Kennedy pulled in real talent: NBC's Tim Russert to emcee the inaugural evening and comedian Bill Cosby to keep the guests laughing.

Boehner and Kennedy were both lifelong Catholics and graduates of Catholic schools. They had recently worked together on the House and Senate versions, respectively, of the 2002 education law known as the No Child Left Behind Act.

As colleagues, they enjoyed a comfortable rapport, which, according to a staff member, was strengthened by the fact that "Boehner and Kennedy always knew what the other had to do to get legislation passed."

This dinner was no exception. It marked the start of a five-year collaboration between two men who served radically different constituencies, but who found common ground in their shared commitment to education, service and their faith.

Both lawmakers also believed they had an obligation to give back to the citizens of Washington, their "adopted city." To help illustrate this point, each year at a pre-gala breakfast Kennedy would share the example of his brother, former President John F. Kennedy, who instructed his entire Cabinet to visit Washington's public schools and read books to the students.

Dubbed the Boehner-Kennedy Dinner, the annual event takes place each September, and since its inception has raised more than \$5 million for the District's Catholic schools.

Much of the credit for this success belongs to Kennedy. As one Boehner staff member told *The Hill*, "This event may have been John Boehner's idea, but it was Sen. Kennedy who really got it off the ground."

During the last year of his life, Kennedy's illness forced him to scale back his commitments. As a result, former Washington Mayor Anthony Williams assumed the co-chairman's role alongside Boehner in 2008.

This year's Boehner-Williams Dinner will be held on Sept. 23 at the Washington Hilton. Discussions are under way about how best to honor Kennedy at the event.

TRIBUTES TO EDWARD M. KENNEDY

We've lost the irreplaceable center of our family and joyous light in our lives, but the inspiration of his faith, optimism, and perseverance will live on in our hearts forever. He loved this country and devoted his life to serving it. He always believed that our best days were still ahead, but it's hard to imagine any of them without him.—The Kennedy family

Michelle and I were heartbroken to learn this morning of the death of our dear friend, Sen. Ted Kennedy.

For five decades, virtually every major piece of legislation to advance the civil rights, health and economic well being of the American people bore his name and resulted from his efforts.

I valued his wise counsel in the Senate, where, regardless of the swirl of events, he always had time for a new colleague. I cherished his confidence and momentous support in my race for the Presidency. And even as he waged a valiant struggle with a mortal illness, I've profited as President from his encouragement and wisdom.

An important chapter in our history has come to an end. Our country has lost a great leader, who picked up the torch of his fallen brothers and became the greatest United States Sen. of our time.

And the Kennedy family has lost their patriarch, a tower of strength and support through good times and bad.

Our hearts and prayers go out to them today—to his wonderful wife, Vicki, his chil-

dren Ted Jr., Patrick and Kara, his grandchildren and his extended family.—President Barack Obama

It was the thrill of my lifetime to work with Ted Kennedy. He was a friend, the model of public service and an American icon.

As we mourn his loss, we rededicate ourselves to the causes for which he so dutifully dedicated his life. Sen. Kennedy's legacy stands with the greatest, the most devoted, the most patriotic men and women to ever serve in these halls.

Because of Ted Kennedy, more young children could afford to become healthy. More young adults could afford to become students. More of our oldest citizens and our poorest citizens could get the care they need to live longer, fuller lives. More minorities, women and immigrants could realize the rights our founding documents promised them. And more Americans could be proud of their country.

Ted Kennedy's America was one in which all could pursue justice, enjoy equality and know freedom. Ted Kennedy's life was driven by his love of a family that loved him, and his belief in a country that believed in him. Ted Kennedy's dream was the one for which the founding fathers fought and his brothers sought to realize.

The liberal lion's mighty roar may now fall silent, but his dream shall never die.—Senate Majority Leader Harry Reid (D-Nev.)

Today, with the passing of Sen. Edward M. Kennedy, the American people have lost a great patriot, and the Kennedy family has lost a beloved patriarch. Over a lifetime of leadership, Sen. Kennedy's statesmanship and political prowess produced a wealth of accomplishment that has improved opportunity for every American.

Sen. Kennedy had a grand vision for America, and an unparalleled ability to effect change. Rooted in his deep patriotism, his abiding faith, and his deep concern for the least among us, no one has done more than Sen. Kennedy to educate our children, care for our seniors, and ensure equality for all Americans.—House Speaker Nancy Pelosi (D)

It is with great sadness that Elaine and I note the passing of Sen. Ted Kennedy, one of the giants of American political life, a longtime Senate colleague, and a friend.

No one could have known the man without admiring the passion and vigor he poured into a truly momentous life.—Senate Minority Leader Mitch McConnell (R-Ky.)

Ted Kennedy was my friend. While there were few political issues on which he and I agreed, our relationship was never disagreeable, and was always marked by good humor, hard work, and a desire to find common ground. Ted Kennedy was also a friend to inner-city children and teachers. For the better part of the last decade, Ted and I worked together to support struggling Catholic grade schools in inner-city Washington. By helping these schools keep their doors open and helping them retain their committed teachers and faculty, this joint effort made a positive difference in the lives of thousands of inner-city children, who otherwise would have been denied the opportunity for a quality education. It wouldn't have been possible without Sen. Kennedy and his genuine desire to give something back to help inner-city students in the city in which he'd served for many years. I'm proud to have worked with Sen. Kennedy on this project, and I will dearly miss his friendship and his partnership in this cause.—House Minority Leader John Boehner (R-Ohio)

Teddy spent a lifetime working for a fair and more just America. And for 36 years, I

had the privilege of going to work every day and literally, not figuratively sitting next to him, and being witness to history.

In 1972 I was a 29 year old kid with three weeks left to go in a campaign, him showing up at the Delaware Armory in the middle of what we called Little Italy—who had never voted nationally by a Democrat—I won by 3,100 votes and got 85 percent of the vote in that district, or something to that effect. I literally would not be standing here were it not for Teddy Kennedy—not figuratively, this is not hyperbole—literally.

He was there—he stood with me when my wife and daughter were killed in an accident. He was on the phone with me literally every day in the hospital, my two children were attempting, and, God willing, thankfully survived very serious injuries. I'd turn around and there would be some specialist from Massachusetts, a doc I never even asked for, literally sitting in the room with me.

He's left a great void in our public life and a hole in the hearts of millions of Americans and hundreds of us who were affected by his personal touch throughout our lives.—Vice President Joe Biden, in remarks at an event Wednesday at the Department of Energy

Laura and I are saddened by the death of Senator Ted Kennedy. Ted Kennedy spent more than half his life in the United States Senate. He was a man of passion who advocated fiercely for his convictions. I was pleased to work with Senator Kennedy on legislation to raise standards in public schools, reform immigration and ensure dignity and fair treatment for Americans suffering from mental illness.

In a life filled with trials, Ted Kennedy never gave in to self-pity or despair. He maintained his optimistic spirit, his sense of humor, and his faith in his fellow citizens. He loved his family and his country—and he served them until the end. He will be deeply missed.—Former President George W. Bush

Sen. Ted Kennedy was one of the most influential leaders of our time, and one of the greatest senators in American history. His big heart, sharp mind, and boundless energy were gifts he gave to make our democracy a more perfect union.

As president, I was thankful for his fierce advocacy for universal health care and his leadership in providing health coverage to millions of children. His tireless efforts have brought us to the threshold of real health care reform. I was also grateful for his efforts, often in partnership with Republicans as well as Democrats, to advance civil rights, promote religious freedom, make college more affordable, and give young Americans the opportunity to serve at home in Americorp. I am glad the bill President Obama signed to expand Americorp and other youth service opportunities is named the Edward M. Kennedy Serve America Act. Through it, his commitment to public service will live on in millions of young people across our nation.

Hillary and I will always be grateful for the many gestures of kindness and generosity he extended to us, for the concern he showed for all the children and grandchildren of the Kennedy clan, and for his devotion to all those in need whose lives were better because he stood up for them.—Former President Bill Clinton

Barbara and I were deeply saddened to learn Ted Kennedy lost his valiant battle with cancer. While we didn't see eye-to-eye on many political issues through the years, I always respected his steadfast public service—so much so, in fact, that I invited him to my library in 2003 to receive the Bush Award for Excellence in Public Service. Ted

Kennedy was a seminal figure in the United States Senate—a leader who answered the call to duty for some 47 years, and whose death closes a remarkable chapter in that body's history.—Former President George H.W. Bush

Rosalynn and I extend our condolences to the Kennedy family. Sen. Kennedy was a passionate voice for the citizens of Massachusetts and an unwavering advocate for the millions of less fortunate in our country. The courage and dignity he exhibited in his fight with cancer was surpassed only by his lifelong commitment and service to his country.—Former President Jimmy Carter

I am very saddened to learn of the passing of Sen. Ted Kennedy last night. Ted Kennedy will be remembered with great affection and enduring respect here in Ireland. Ted Kennedy was a great friend of Ireland.

In good days and bad, Ted Kennedy worked valiantly for the cause of peace on this island. He played a particularly important role in the formative days of the Northern Ireland Peace Process. He maintained a strong and genuine interest in its progress. He used his political influence wisely. He was the voice of moderation and common sense. He was unequivocal in his rejection of violence at all times and from all quarters. He believed that only politics would provide a sustainable and enduring way forward. His belief that the United States could play a strong role in solving our problems has been vindicated by the success of the Peace Process.

Today, America has lost a great and respected statesman and Ireland has lost a long-standing and true friend.

Ar dheis Dé go raibh a anam.—Brian Cowen, prime minister of Ireland

Sen. Edward Kennedy will be mourned not just in America but in every continent. He is admired around the world as the Senator of Senators. He led the world in championing children's education and health care, and believed that every single child should have the chance to realize their potential to the full. Even facing illness and death he never stopped fighting for the causes which were his life's work.

I am proud to have counted him as a friend and proud that the United Kingdom recognised his service earlier this year with the award of an honorary knighthood.—Gordon Brown, prime minister of the United Kingdom

I'm not sure America has ever had a greater senator, but I know for certain that no one has had a greater friend than I and so many others did in Ted Kennedy.

I will always remember Teddy as the ultimate example for all of us who seek to serve, a hero for those Americans in the shadow of life who so desperately needed one.

He worked tirelessly to lift Americans out of poverty, advance the cause of civil rights, and provide opportunity to all. He fought to the very end for the cause of his life—ensuring that all Americans have the health care they need.

The commitment to build a stronger and fairer America, a more perfect union, was deeply ingrained in the fiber of who he was, and what he believed in, and why he served.

That's why he stands among the most respected senators in history. But it was his sympathetic ear, his razor wit, and his booming, raucous laugh that made him among the most beloved.

Whatever tragedy befell Teddy's family, he would always be there for them. Whatever tragedy befell the family of one of his friends, he would always be there for us.—

Sen. Chris Dodd (D-Conn.), a close friend who in Kennedy's absence took over the Senate Health, Education, Labor, and Pensions (HELP) Committee

I had hoped and prayed that this day would never come. My heart and soul weep at the loss of my best friend in the Senate, my beloved friend, Ted Kennedy.

Sen. Kennedy and I both witnessed too many wars in our lives, and believed too strongly in the Constitution of the United States to allow us to go blindly into war. That is why we stood side by side in the Senate against the war in Iraq.

Neither years of age nor years of political combat, nor his illness, diminished the idealism and energy of this talented, imaginative, and intelligent man. And that is the kind of Sen. Ted Kennedy was. Throughout his career, Sen. Kennedy believed in a simple premise: that our society's greatness lies in its ability and willingness to provide for its less fortunate members. Whether striving to increase the minimum wage, ensuring that all children have medical insurance, or securing better access to higher education, Sen. Kennedy always showed that he cares deeply for those whose needs exceed their political clout. Unbowed by personal setbacks or by the terrible sorrows that have fallen upon his family, his spirit continued to soar, and he continued to work as hard as ever to make his dreams a reality.

In his honor and as a tribute to his commitment to his ideals, let us stop the shouting and name calling and have a civilized debate on health care reform which I hope, when legislation has been signed into law, will bear his name for his commitment to insuring the health of every American.

God bless his wife Vicki, his family, and the institution that he served so ably, which will never be the same without his voice of eloquence and reason. And God bless you Ted. I love you and will miss you terribly. In my autobiography I wrote that during a visit to West Virginia in 1968 to help dedicate the "Robert F. Kennedy Youth Center" in Morgantown, "Sen. Kennedy's voice quivered with emotion as he talked of his late brothers and their love for West Virginia. 'These hills, these people, and this state have had a very special meaning for my family. Our lives have been tightly intertwined with yours.'

I am sure the people of the great state of West Virginia join me in expressing our heartfelt condolences to the Kennedy family at this moment of deep sorrow—Sen. Robert Byrd (D-W.Va.)

Many have come before, and many will come after, but Ted Kennedy's name will always be remembered as someone who lived and breathed the United States Senate and the work completed within its chamber. When I first came to the United States Senate I was filled with conservative fire in my belly and an itch to take on any and everyone who stood in my way, including Ted Kennedy. As I began working within the confines of my office I soon found out that while we almost always disagreed on most issues, once in a while we could actually get together and find the common ground, which is essential in passing legislation.—Sen. Orrin Hatch (R-Utah), one of Kennedy's closest Republican friends in the Senate

He had a gregarious personality. He had a keen sense of how to position himself with people. He had an old Irish wit and was a great storyteller. But all of those things probably pale in—in comparison to the fact that once he was on an issue, he was relentless. And he—once he gave his word, then there was never any—any variance from

that, to the point where he would cast votes on amendments that really were against his own position in order to keep a carefully crafted compromise intact. And when others from his own party and our party didn't do that, I've seen him chastise them rather severely.

History judges all of us. And after a period of time, I think history will make a judgment about Ted Kennedy. All of us had our failings and weaknesses. But the fact is that Ted Kennedy was an institution within the institution of the Senate. And all of my colleagues, no matter how they felt about his causes or his positions, I think, would agree with that.—Sen. John McCain (R-Ariz.), who often referred to Kennedy as a "good friend", talked about what made the liberal senator likable to his GOP adversaries, about their time working together on immigration legislation and about his spirit in the end, in an interview with CNN's "Larry King Live" on Thursday

We have known for some time that this day was coming, but nothing makes it easier. We have lost a great light in our lives and our politics, and it will never be the same again. Ted Kennedy was such an extraordinary force, yes for the issues he cared about, but more importantly for the humanity and caring in our politics that is at the center of faith and true public service. No words can ever do justice to this irrepressible, larger than life presence who was simply the best—the best senator, the best advocate you could ever hope for, the best colleague, and the best person to stand by your side in the toughest of times. He faced the last challenge of his life with the same grace, courage, and determination with which he fought for the causes and principles he held so dear. He taught us how to fight, how to laugh, how to treat each other, and how to turn idealism into action, and in these last fourteen months he taught us much more about how to live life, sailing into the wind one last time. For almost 25 years, I was privileged to serve as his colleague and share his friendship for which I will always be grateful.—Sen. John Kerry (D-Mass.)

Ted Kennedy was a mentor, a guiding light, and a close friend—we all loved the man. In the Senate, Ted Kennedy was our sun—the center of our universe. To be pulled by his strong gravitational field, to bask in his warmth was a privilege, an honor, and, for many of us, even a life changing experience. His death leaves our world dark but, as he said in his own words, "the work goes on, the cause endures, the hope still lives, and the dream shall never die." Ted, we will not let your flag fall.—Sen. Charles Schumer (D-N.Y.)

Ted Kennedy was at once the most partisan and the most constructive United States senator. He could preach the party line as well as bridge differences better than any Democrat. I will especially miss his cheery disposition and his devotion to United States history of which he was such a consequential part.—Senate Republican Conference Chairman Lamar Alexander (R-Tenn.)

With the passing of Sen. Kennedy the United States Senate has lost one of its most effective and respected voices.

Sen. Kennedy's colleagues—Republicans and Democrats—greatly enjoyed working with him and respected his views.

A handshake from Sen. Kennedy was all that was ever needed. His word was his bond.

When the history of the United States Senate is written, his name will be toward the top of the list of senators who made a tremendous impact on the institution.

Sen. Kennedy was never afraid to work across the aisle to get things done. We can all learn from the example he set and work together to build a stronger nation.—Sen. Lindsey Graham (R-S.C.)

Today, America mourns the death of Sen. Ted Kennedy. He was one of the most dynamic and influential legislators in our Nation's history, and his legacy will live on in the work of the colleagues he inspired, and in the lives of the millions of Americans for whom his passion for social justice made a difference. My thoughts and prayers are with his family and friends; even though this day was anticipated, I am sure that little can soften the blow. Throughout his final illness, Sen. Kennedy was privileged to have the best doctors and the best treatment. But he never forgot, in this as in all cases, those who were not similarly privileged: those waiting hours in emergency rooms this morning for a doctor's care; those who went to sleep last night unsure that they were covered, uncertain that their families could cope with the financial burden of an illness. For their sake, health care reform was the cause of Ted Kennedy's life. For their sake, and his, it must be the cause of ours.—House Majority Leader Steny Hoyer (D-Md.)

I have known Ted Kennedy for more than 47 years. In that time, it has been my greatest pleasure to work with him in the Congress to try to tackle many human problems, but I am especially gratified by his contributions to the cause of civil rights and voting rights.

At some of the most tragic and difficult moments in this nation's history, Ted Kennedy gathered his strength and led us toward a more hopeful future. As a nation and as a people, he encouraged us to build upon the inspirational leadership of his two brothers and use it to leave a legacy of social transformation that has left its mark on history.—Rep. John Lewis (D-Ga.)

Sen. Kennedy devoted his entire life to public policy. At any point he could have accepted a life of leisure. Instead he carried on his family's commitment to public service.

The Senate will be a smaller and sadder place without his enthusiasm, his energy, and his persistent courage.—Former House Speaker Newt Gingrich (R-Ga.)

The loss of Sen. Ted Kennedy is a sad event for America, and especially for Massachusetts. The last son of Rose Fitzgerald and Joseph Kennedy was granted a much longer life than his brothers, and he filled those years with endeavor and achievement that would have made them proud. In 1994, I joined the long list of those who ran against Ted and came up short. But he was the kind of man you could like even if he was your adversary. I came to admire Ted enormously for his charm and sense of humor—qualities all the more impressive in a man who had known so much loss and sorrow. I will always remember his great personal kindness, and the fighting spirit he brought to every cause he served and every challenge he faced. I was proud to know Ted Kennedy as a friend, and today my family and I mourn the passing of this big-hearted, unforgettable man.—Former Massachusetts Gov. Mitt Romney (R), who ran against Kennedy in 1994

I would like to extend our sympathies to the Kennedy family as we hear word about the passing of Sen. Ted Kennedy. He believed in our country and fought passionately for his convictions.—Former Alaska Gov. Sarah Palin (R)

Maria and I are immensely saddened by the passing of Uncle Teddy. He was known to the

world as the Lion of the Senate, a champion of social justice, and a political icon.

Most importantly, he was the rock of our family: a loving husband, father, brother and uncle. He was a man of great faith and character.—California Gov. Arnold Schwarzenegger (R) and wife Maria Shriver, a niece of Kennedy

HISPANIC HERITAGE MONTH

Mr. UDALL of Colorado. Mr. President, just a month ago, I joined fellow Coloradans, my colleagues in the U.S. Congress, and others across the country to celebrate and acknowledge the many accomplishments and contributions of the Hispanic community in the United States and Colorado. I am particularly proud to highlight the long history of Hispanics in Colorado, as they established some of Colorado's oldest communities, irrigation systems, and earliest businesses. I am equally proud that this community continues to be a vibrant part of the fabric of our great State.

Throughout this month, my colleagues and I have been hard at work to move forward on many policy concerns that are vitally important to Colorado's Hispanic community. From the confirmation of America's first Latina Supreme Court Justice, Sonia Sotomayor, to progress on health insurance reform, and continued support for efforts to create and save jobs, I have been working with the best interests of Colorado in mind. Still, there is much to be accomplished.

We must come together to find opportunities to improve the quality of life of all Coloradans. In doing so, it is important to keep in mind that certain populations, such as Latinos, are disproportionately affected by many of the challenges we face as a State and country. At a national level, Latinos face an unemployment rate that is 3 percent higher than the national rate. In Colorado, Latinos face a poverty rate that is 12 percent higher than the State's overall poverty rate. Latinos also face other challenges—40 percent of Hispanics in Colorado are uninsured, approximately 24 percent higher than the State average, according to a Colorado Department of Public Health and Environment report. Though these issues are not a concern for Latinos in Colorado alone, they undoubtedly raise heightened concerns for the Hispanic community, given these statistics.

These are just a few reasons I have continued to support and develop policies that provide both quality jobs and help reduce the costs of hard-working Coloradans. Most notably, we have made significant progress toward reforming our health insurance system so that it better meets the health needs of all Americans. Making our health system more efficient, fiscally manageable, and accessible is vitally important to making health insurance more affordable for Hispanic and non-Hispanic families alike.

As a member of the Senate Energy and Natural Resources Committee, I

have also been working to develop new ways to help low-income and working families afford to make their homes more energy efficient. By improving access to energy-saving technology and making homes more energy efficient, families can reduce their energy costs, while helping to make our environment and communities better places to live. This is just one part of a new energy economy that can bring more jobs to our State.

We have had much to celebrate during this year's Hispanic Heritage Month, but we also have much to do, and I understand there are many more goals that we have yet to achieve. So while we have enjoyed the celebration of Hispanic heritage and the contributions Latinos make in our communities over the last month, I will continue my efforts to improve the quality of life for Coloradans of all backgrounds in every month of the year.

20TH ANNIVERSARY OF POINTS OF LIGHT

Mr. HATCH. Mr. President, I stand today to recognize and honor an extraordinary organization that began its important work 20 years ago, born from the words of a new President who was dedicated to engaging the American spirit of giving and service. The words of that President resonate even now: "I have spoken of a thousand points of light . . . a new engagement in the lives of others, a new activism, hands-on and involved that gets the job done." This 1989 speech given by President George H.W. Bush outlined the vision for the Points of Light Foundation, now merged with HandsOn Network as the Points of Light Institute, the largest volunteer network in the country.

This independent, nonpartisan organization has worked to encourage, recognize, and empower the spirit of volunteer service that is encoded in our Nation's cultural DNA and is, as President Bush stated, central to living a meaningful life.

Throughout our Nation's history, Americans have demonstrated their willingness to give back and to serve in their communities, even in the hardest of times. Last year alone, over 60 million Americans performed volunteer service in this country. I am proud that my home State of Utah had the highest volunteerism rate, with over 45 percent of adults volunteering in the State in 2008. All told, these volunteers contributed almost 162 million hours of service in a single year.

Earlier this year, I had the privilege of joining with my good friend, the late Senator Ted Kennedy in sponsoring the Edward M. Kennedy Serve America Act, a new law that expands volunteer opportunities for Americans of all ages. I know that the Points of Light Institute will be at the forefront in realizing the full potential of this important legislation, creating healthy communities by inspiring and equipping

willing Americans to do more of the heavy lifting in their communities as we all work to improve our Nation.

Mr. President, I once again commend the Points of Light Institute on this landmark anniversary.

ADDITIONAL STATEMENTS

TRIBUTE TO LAURA RHEA

• Mrs. LINCOLN. Mr. President, it is with great pleasure that today I honor and recognize more than 25 years of service by Laura Rhea to our great State of Arkansas. Laura has served the Arkansas Rice Depot with steadfast leadership as President and CEO, ensuring the organization remained a faith-based ministry and developing innovative solutions to ending hunger.

Hunger and poverty are not just global issues; they are so pervasive that we all have some experience with them in our local communities. Worldwide, three billion people, nearly half the world's population, live on merely \$2 per day. In our Nation alone, almost 36.2 million Americans struggle day in and day out to find adequate nutritious food. More than 12.4 million children live in households that are food insecure. According to the Arkansas Hunger Relief Alliance, approximately 80 percent of supplemental nutrition assistance goes to households with children, many of them in working families, including military families.

In Arkansas, Laura Rhea has been making a difference to reduce those figures. Under her leadership, Arkansas Rice Depot has grown from a small hunger program that distributed only rice, to a comprehensive hunger agency that distributes almost 7 million pounds of food and supplies in Arkansas each year.

Laura grew up in North Little Rock. As a child she dreamed of becoming a missionary, but never dreamed that her mission field would be feeding hungry Arkansans. She is a certified volunteer manager and was recognized as a certified fund raising executive in 1995.

Laura developed Food for Kids, a backpack program serving over 600 schools in Arkansas, sending home backpacks of food to over 25,000 students who face food insecurity. This program has been recognized by the Wall Street Journal, CNN, and has been replicated in over 40 States.

Laura also developed Simple Pleasures, a gourmet gift shop that sells the Rice Depot line of soup and chili mixes. Proceeds from the gift shop are used to purchase food for Rice Depot's hunger relief efforts.

Faith is an important part of Laura's life. In 2003, Laura suffered a heat-stroke unloading a truck. Although she would continue to serve her life's mission from a wheelchair, she is not limited by her disability. She often quotes Psalms 37:11 to sum up her life, "Delight yourself in the Lord and he will give you the desires of your heart."

And last but certainly not least, Laura's family—her husband Don, daughter Allison, and four grandchildren are not only inspirations for her but also stalwart supporters. In fact, her daughter Allison shares her mother's mission and has served the Rice Depot for the past 12 years. In addition, Laura's granddaughter worked there over the summer, bringing three generations of her family to the effort to wipe out hunger.

As you can see, Laura Rhea is a generous, compassionate, and dedicated individual. So as Rice Depot celebrates its 27th year of progress in finding sensible solutions to hunger in Arkansas, I salute The Rice Depot, its staff, the many volunteers, and especially Laura Rhea for their commitment to feeding those who hunger in Arkansas.●

TRIBUTE TO PARKER WESTBROOK

• Mrs. LINCOLN. Mr. President, it is with Arkansas pride that today I honor one of the great sons of the Natural State, Parker Westbrook of Nashville, AR. On October 20, 2009, the Howard County Democratic Central Committee is sponsoring a dinner to honor his lifelong public service to Arkansas and his country.

The day after Christmas in 1948, Westbrook set out with newly elected Congressman Boyd Tackett of Nashville for Washington, DC. Over the course of the next 26 years, Parker served his home State in our Nation's Capital for four members of the Arkansas congressional delegation, most notably as a special assistant to U.S. Senator J. William Fulbright. In 1975, he returned to Arkansas and served as a special assistant to Governor David Pryor.

Although public service in government was a calling for much of Mr. Westbrook's life, his true passion was historic preservation. Westbrook was born in 1926 and was the third generation of the Westbrook-Parker families to live in the home of his maternal grandfather, which is listed on the National Register of Historic Places. The house and farmstead provided Parker with an early appreciation for historic preservation, and after leaving Washington in 1974, he set out on a course to help preserve Arkansas's cultural legacy.

While working for Governor Pryor, Westbrook was elected to the Pioneer Washington Foundation, Inc. Board, a private nonprofit group committed to preserving Historic Washington. Washington, AR, is home to the oldest continuous post office in Arkansas, established on February 23, 1820 shortly after Arkansas became a territory. In 1979, Westbrook became a full-time volunteer and restoration adviser. In 1980, he became the executive director and was elected president of the foundation in 1990. He continued in that role until May of this year.

In 1975, Westbrook was elected to the Historic Arkansas Museum Board of

Directors and has served that organization continuously for 34 years. For many years, he was chairman and now holds the title of chairman emeritus.

Westbrook was also appointed to the Arkansas State Review Board of the Historic Preservation Program in 1975. He was reappointed three times by Governor Bill Clinton and again by Governor Jim Guy Tucker and served as chairman for 4½ years.

In addition, Westbrook has served on a number of other Arkansas historic entities including the Historic Preservation Alliance of Arkansas, Department of Arkansas Heritage Advisory Board, the President William J. Clinton Birthplace Foundation, Corinth Cemetery Association in Howard County, Friends of the Carousel, and Main Street Arkansas Advisory Board.

He has been awarded the Arkansas Historical Association's Endowed History Award and was recognized in 1986 as Arkansas's Distinguished Citizen for his volunteer work.

In 1995, President Clinton recognized Westbrook's longstanding service to historic preservation and appointed him to the President's Council for Historic Preservation where he served until 2003.

In addition, Interior Secretary Bruce Babbitt twice appointed Parker to the National Park System Advisory Board where he served as chairman of the Committee on National Historic Landmarks.

As you can see, Parker Westbrook has a long and distinguished career serving his community, Arkansas, and our Nation.

As the Howard County Democratic Central Committee recognizes Mr. Westbrook's service, I extend my sincere thanks and appreciation on behalf of all Arkansans for his devotion and commitment to public service throughout his life.●

275TH ANNIVERSARY OF FIRST CONGREGATIONAL CHURCH, UNITED CHURCH OF CHRIST

• Ms. SNOWE. Mr. President, I wish to pay tribute to the First Congregational Church, United Church of Christ of South Portland, ME, on the momentous occasion of its 275th anniversary. What a tremendous milestone and enduring testament to the church's centuries of spiritual leadership and goodwill.

Established in 1733, the church held its inaugural worship service in 1734 and has, through its steady growth and exemplary commitment to others, expanded its ministries, championed education for all, and engendered an abiding sense of fellowship for literally hundreds of years. Although the physical buildings of worship may have changed over time, the church's fundamental mission—to foster its congregation's spiritual life while offering outreach to others through words and actions—has not wavered.

Although this church's history and time-honored presence within the

South Portland area are truly remarkable, the First Congregational Church, United Church of Christ concentrates its energies and attention on its current and future role within the greater community—to serve members of its congregation and people whose lives are enriched by the interaction of the ministry, the congregants, and the faith that binds them to a benevolence of purpose that is an inspiration to all.

Through such practical programs as the Discovery Center preschool, the Community Crisis Ministries Program, the Mission and Outreach Team—which offer soup kitchen and food pantry assistance—and the Social Witness Ministries that address current socio-cultural and environmental challenges, this church truly extends its reach beyond its walls in the selfless quest to contribute to others.

As 2009 represents a monumental moment of celebration in the life of the First Congregational Church, United Church of Christ, I wish to offer my heartfelt congratulations and profound gratitude to all who have sustained the dynamic work of this church in centuries past and who will do so for many more years to come.●

MESSAGES FROM THE PRESIDENT

Messages from the President of the United States were communicated to the Senate by Mrs. Neiman, 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 10:46 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. 1327. An act to authorize State and local governments to direct divestiture from, and prevent investment in, companies with investments of \$20,000,000 or more in Iran's energy sector, and for other purposes.

H.R. 1700. An act to authorize the Administrator of General Services to convey a parcel of real property in the District of Columbia to provide for the establishment of a National Women's History Museum.

H.R. 2651. An act to amend title 46, United States Code, to direct the Secretary of Transportation to establish a maritime career training loan program, and for other purposes.

H.R. 3371. An act to amend title 49, United States Code, to improve airline safety and pilot training, and for other purposes.

The message also announced that the House has agreed to the following con-

current resolution, in which it requests the concurrence of the Senate:

H. Con. Res. 138. Concurrent resolution recognizing the 40th anniversary of the George Bush Intercontinental Airport in Houston, Texas.

At 1:27 p.m., a message from the House of Representatives, delivered by Ms. Niland, one of its reading clerks, announced that the House agrees to the report of the committee of conference on the disagreeing votes of the two Houses on the amendment of the Senate to the bill (H.R. 2892) making appropriations for the Department of Homeland Security for the fiscal year ending September 30, 2010, and for other purposes.

ENROLLED BILLS SIGNED

The President pro tempore (Mr. BYRD) announced that on today, October 15, 2009, he had signed the following enrolled bills, previously signed by the Speaker of the House:

S. 1717. A bill to authorize major medical facility leases for the Department of Veterans Affairs for fiscal year 2010, and for other purposes.

H.R. 1016. An act to amend title 38, United States Code, to provide advance appropriations authority for certain accounts of the Department of Veterans Affairs, and for other purposes.

H.R. 2997. An act making appropriations for Agriculture, Rural Development, Food and Drug Administration, and Related Agencies programs for the fiscal year ending September 30, 2010, and for other purposes.

At 3:50 p.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 bill, in which it requests the concurrence of the Senate:

H.R. 2423. An act to designate the Federal building and United States courthouse located at 1300 Victoria Street in Laredo, Texas, as the "George P. Kazen Federal Building and United States Courthouse."

The message also announced that pursuant to 20 U.S.C. 955(b), and the order of the House of January 6, 2009, the Speaker appoints the following Members of the House of Representatives to the National Council on the Arts: Ms. McCOLLUM of Minnesota and Mr. CARNAHAN of Missouri.

The message further announced that pursuant to 10 U.S.C. 4355(a), and the order of the House of January 6, 2009, the Speaker appoints the following Members of the House of Representatives to the Board of Visitors to the United States Military Academy: Mr. LEWIS of California and Mr. SHIMKUS of Illinois.

MEASURES REFERRED

The following bills were read the first and the second times by unanimous consent, and referred as indicated:

H.R. 22. An act to amend title 5, United States Code, to reduce the amount that the United States Postal Service is required to pay into the Postal Service Retiree Health Benefits Fund by the end of fiscal year 2009; to the Committee on Homeland Security and Governmental Affairs.

H.R. 1327. An act to authorize State and local governments to direct divestiture from, and prevent investment in, companies with investments of \$20,000,000 or more in Iran's energy sector, and for other purposes; to the Committee on Banking, Housing, and Urban Affairs.

H.R. 1700. An act to authorize the Administrator of General Services to convey a parcel of real property in the District of Columbia to provide for the establishment of a National Women's History Museum; to the Committee on Environment and Public Works.

H.R. 2423. An act to designate the Federal building and United States courthouse located at 1300 Victoria Street in Laredo, Texas, as the "George P. Kazen Federal Building and United States Courthouse"; and to designate the jury room in that Federal building and United States courthouse as the "Marcel C. Notzon II Jury Room"; to the Committee on Environment and Public Works.

H.R. 2651. An act to amend title 46, United States Code, to direct the Secretary of Transportation to establish a maritime career training loan program, and for other purposes; to the Committee on Commerce, Science, and Transportation.

H.R. 3371. An act to amend title 49, United States Code, to improve airline safety and pilot training, and for other purposes; to the Committee on Commerce, Science, and Transportation.

The following concurrent resolution was read, and referred as indicated:

H. Con. Res. 138. Concurrent resolution recognizing the 40th anniversary of the George Bush Intercontinental Airport in Houston, Texas; to the Committee on Commerce, Science, and Transportation.

MEASURES DISCHARGED

The following joint resolution was discharged from the Committee on Foreign Relations pursuant to 42 U.S.C. 2159, and placed on the calendar:

S.J. Res. 18. Joint resolution relating to the approval of the proposed agreement for nuclear cooperation between the United States and the United Arab Emirates.

ENROLLED BILL PRESENTED

The Secretary of the Senate reported that on today, October 15, 2009, she had presented to the President of the United States the following enrolled bill:

S. 1717. An act to authorize major medical facility leases for the Department of Veterans Affairs for fiscal year 2010, and for other purposes.

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-3371. A communication from the Director of Defense Procurement and Acquisition Policy, Department of Defense, transmitting, pursuant to law, the report of a rule entitled "Defense Acquisition Regulation Supplement; Department of Defense Inspector General Address" ((RIN0750-AG34)(DFARS Case 2009-D001)) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Armed Services.

EC-3372. A communication from the Director of Defense Procurement and Acquisition Policy, Department of Defense, transmitting, pursuant to law, the report of a rule entitled "Defense Acquisition Regulation Supplement; Restriction on Research and Development—Deletion of Obsolete Text" ((RIN0750-AG33)(DFARS Case 2009-D005)) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Armed Services.

EC-3373. A communication from the Acting Deputy General Counsel of the National Credit Union Administration, transmitting, pursuant to law, the report of a rule entitled "Exception to the Maturity Limit on Second Mortgages" (RIN3133-AD64) received in the Office of the President of the Senate on October 14, 2009; to the Committee on Banking, Housing, and Urban Affairs.

EC-3374. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Requirement for Amateur Rocket Activities; CORRECTION" (RIN2120-AI88) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3375. A communication from the Paralegal, Federal Transportation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Bus Testing: Phase-In of Brake Performance and Emissions Testing, and Program Updates" (RIN2132-AA95) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3376. A communication from the Assistant Chief Counsel, Pipeline and Hazardous Materials Safety Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Hazardous Materials: Minor Editorial Corrections and Clarifications" (RIN2137-AE50) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3377. A communication from the Assistant Chief Counsel, Pipeline and Hazardous Materials Safety Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Hazardous Materials: Revision of Requirements for Emergency Response Telephone Numbers" (RIN2137-AE21) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3378. A communication from the Regulations Officer, Federal Highway Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Express Lane Demonstration Program" (RIN2125-AF07) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3379. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Congestion Management Rule for John F. Kennedy International Airport and Newark Liberty International Airport; RESCISSION" (RIN2120-AJ48) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3380. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Congestion Management Rule for LaGuardia Airport; RESCISSION" (RIN2120-AJ49) received in the Office of the President of the Senate on October 13, 2009; to the Com-

mittee on Commerce, Science, and Transportation.

EC-3381. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Establishment of Restricted Area R-2502A; Fort Irwin, CA; Docket No. 09-AWP-3" (RIN2120-AA66) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3382. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Standard Instrument Approach Procedures (105); Amdt. No. 3338" (RIN2120-AA65) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3383. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Standard Instrument Approach Procedures (7); Amdt. No. 3339" (RIN2120-AA65) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3384. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Standard Instrument Approach Procedures (8); Amdt. No. 3341" (RIN2120-AA65) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3385. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Standard Instrument Approach Procedures (122); Amdt. No. 3340" (RIN2120-AA65) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3386. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Part 95 Instrument Flight Rules (20); Amdt. No. 483" (RIN2120-AA63) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3387. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Airworthiness Directives; Boeing Model 727 Airplanes" ((RIN2120-AA64)(Docket No. FAA-2008-1117)) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3388. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Airworthiness Directives; DORNIER LUFTAHR T GmbH Models Dornier 228-100, Dornier 228-101, Dornier 228-200, Dornier 228-201, and Dornier 228-202 Airplanes" ((RIN2120-AA64)(Docket No. FAA-2009-0574)) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3389. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule

entitled "Airworthiness Directives; Glaser-Dirks Flugzeugbau GmbH Model DG-100 Gliders" ((RIN2120-AA64)(Docket No. FAA-2009-0881)) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3390. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Airworthiness Directives; Airbus Model A318, A319, A320 and A321 Series Airplanes" ((RIN2120-AA64)(Docket No. FAA-2007-0390)) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3391. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Airworthiness Directives; Airbus Model A310-203 and -222 Airplanes and Model A300 B4-620 Airplanes" ((RIN2120-AA64)(Docket No. FAA-2009-0431)) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3392. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Establishment of Class E Airspace; Ronan, MT" ((RIN2120-AA66)(Docket No. FAA-2009-0552)) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3393. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Establishment of Class D Airspace and Amendment of Class E Airspace; North Bend, OR" ((RIN2120-AA66)(Docket No. FAA-2008-0006)) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3394. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Modification of Class D and E Airspace, Removal of Class E Airspace; Aguadilla, PR" ((RIN2120-AA66)(Docket No. FAA-2009-0053)) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3395. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Establishment of Class D Airspace, Modification of Class E Airspace; Bunnell, Florida" ((RIN2120-AA66)(9-24/9-25/0327/ASO-014)) received in the Office of the President of the Senate on October 1, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3396. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Modification of Class E Airspace; Franklin, North Carolina" ((RIN2120-AA66)(9-24/9-25/0986/ASO-15)) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3397. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Amendment of Class E Airspace; Platteville, Wisconsin" ((RIN2120-AA66)(10-9/

10-9/0512/AGL-9)) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3398. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Modification of Class E Airspace; Pueblo, Colorado" ((RIN2120-AA66)(10-9/10-9/0349/ANM-6)) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3399. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Establishment of Class E Airspace; Little River, California" ((RIN2120-AA66)(10-9/10-9/0617/AWP-5)) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3400. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Airworthiness Directives; Glaser-Dirks Flugzeugbau GmbH Model DG-100 Gliders" ((RIN2120-AA64)(10-5/10-5/0897/CE-048)) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3401. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Airworthiness Directives; Boeing Model 747-100, -100B, -100B SUD, -200B, -200C, -200F, -300, -400, -400D, -400F, and 747SR Series Airplanes" ((RIN2120-AA64)(10-5/10-1/0293/NM-221)) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3402. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Airworthiness Directives; Boeing Model 727-281 Airplanes Equipped with Auxiliary Fuel Tanks Installed in Accordance with Supplemental Type Certificate SA3449NM" ((RIN2120-AA64)(9-21/9-21/1325/NM-157)) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3403. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Airworthiness Directives; Teledyne Continental Motors O-470, IO-470, TSIO-470, IO-520, TSIO-520, IO-550, and IOF-550" ((RIN2120-AA64)(9-21/9-21/0367/NE-10)) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3404. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Airworthiness Directives; Boeing Model 767-200, -300, and -300F Series Airplanes" ((RIN2120-AA64)(10-1/10-1/1363/NM-104)) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3405. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Airworthiness Directives; Boeing Model 727 Airplanes" ((RIN2120-AA64)(10-1/

10-1/0646/NM-359)) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3406. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Airworthiness Directives; Boeing Model 737-300, -400, and -500 Series Airplanes Equipped with a Digital Transient Suppression Device (DTSD) Installed in Accordance with Supplemental Type Certificate (STC) ST00127BO" ((RIN2120-AA64)(10-1/10-1/05221/NM-187)) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3407. A communication from the Program Analyst, Federal Aviation Administration, Department of Transportation, transmitting, pursuant to law, the report of a rule entitled "Airworthiness Directives; Boeing Model 767-200 and -300 Series Airplanes" ((RIN2120-AA64)(9-24/9-29/0682/NM-237)) received in the Office of the President of the Senate on October 13, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3408. A communication from the Attorney Advisor, U.S. Coast Guard, Department of Homeland Security, transmitting, pursuant to law, the report of a rule entitled "Direct Final Rule; Safety and Security Zones; Pilgrim Nuclear Power Plant, Plymouth, Massachusetts" ((RIN1625-AA00)(Docket No. USG-2009-0311)) received in the Office of the President of the Senate on October 14, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3409. A communication from the Attorney Advisor, U.S. Coast Guard, Department of Homeland Security, transmitting, pursuant to law, the report of a rule entitled "Vessel and Facility Response Plans for Oil: 2003 Removal Equipment Requirements and Alternative Technology Revisions" ((RIN1625-AA26)(Docket No. USG-2001-8661)) received in the Office of the President of the Senate on October 14, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3410. A communication from the Acting Chairman, National Transportation Safety Board, transmitting, pursuant to law, a report relative to the activities performed by the agency that are not inherently governmental functions; to the Committee on Commerce, Science, and Transportation.

EC-3411. A communication from the Chief of Staff, Media Bureau, Federal Communications Commission, transmitting, pursuant to law, the report of a rule entitled "Television Broadcasting Services; New Orleans, Louisiana" (MB Docket No. 09-147) received in the Office of the President of the Senate on October 8, 2009; to the Committee on Commerce, Science, and Transportation.

EC-3412. A communication from the Assistant Secretary, Bureau of Legislative Affairs, Department of State, transmitting, pursuant to the Arms Export Control Act, the certification of a proposed amendment to a manufacturing license agreement for the export of defense articles, including, technical data, and defense services to Japan relative to the AN/ASA-70 Tactical Data Display Group in the amount of \$100,000,000 or more; to the Committee on Foreign Relations.

EC-3413. A communication from the Assistant Secretary, Bureau of Legislative Affairs, Department of State, transmitting, pursuant to the Arms Export Control Act, the certification of a proposed manufacturing license agreement for the export of defense articles, including, technical data related to firearms to the United Kingdom relative to Lewis Machine and Tool Co. (LMT) .309 caliber (7.62mm) Semi Automatic Rifles in the amount of \$1,000,000 or more; to the Committee on Foreign Relations.

EC-3414. A communication from the Chairman of the Board, Pension Benefit Guaranty Corporation, transmitting, pursuant to law, the Semi-Annual Report of the Inspector General for the period from October 1, 2008 through March 31, 2009; to the Committee on Homeland Security and Governmental Affairs.

EC-3415. A communication from the Chief Privacy Officer, Department of Homeland Security, transmitting, pursuant to law, a report entitled "Privacy Office Fourth Quarter Fiscal Year 2009 Report to Congress"; to the Committee on Homeland Security and Governmental Affairs.

REPORTS OF COMMITTEES

The following reports of committees were submitted:

By Mr. LEAHY, from the Committee on the Judiciary, with an amendment in the nature of a substitute:

S. 369. A bill to prohibit brand name drug companies from compensating generic drug companies to delay the entry of a generic drug into the market.

By Mr. LEAHY, from the Committee on the Judiciary, with amendments:

S. 379. A bill to provide fair compensation to artists for use of their sound recordings.

By Mr. HARKIN, from the Committee on Health, Education, Labor, and Pensions, without amendment:

S. 1793. An original bill to amend title XXVI of the Public Health Service Act to revise and extend the program for providing life-saving care for those with HIV/AIDS.

EXECUTIVE REPORTS OF COMMITTEES

The following executive reports of nominations were submitted:

By Mr. LEAHY for the Committee on the Judiciary.

Jacqueline H. Nguyen, of California, to be United States District Judge for the Central District of California.

Edward Milton Chen, of California, to be United States District Judge for the Northern District of California.

Dolly M. Gee, of California, to be United States District Judge for the Central District of California.

Richard Seeborg, of California, to be United States District Judge for the Northern District of California.

(Nominations without an asterisk were reported with the recommendation that they be confirmed.)

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. FRANKEN:

S. 1788. A bill to direct the Secretary of Labor to issue an occupational safety and health standard to reduce injuries to patients, direct-care registered nurses, and all other health care workers by establishing a safe patient handling and injury prevention standard, and for other purposes; to the Committee on Health, Education, Labor, and Pensions.

By Mr. DURBIN (for himself, Mr. LEAHY, Mr. SPECTER, Mr. FEINGOLD, Mr. CARDIN, Mr. WHITEHOUSE, Mr. KAUFMAN, Mr. FRANKEN, Mr. DODD, Mr. KERRY, and Mr. LEVIN):

S. 1789. A bill to restore fairness to Federal cocaine sentencing; to the Committee on the Judiciary.

By Mr. DORGAN (for himself, Mr. REID, Ms. MURKOWSKI, Mr. UDALL of New Mexico, Mr. WHITEHOUSE, Mr. JOHNSON, Mr. TESTER, Mr. AKAKA, Mr. CONRAD, Mr. BEGICH, Mr. FRANKEN, Mr. BURRIS, Mr. INOUE, Ms. STABENOW, Mr. UDALL of Colorado, and Ms. KLOBUCHAR):

S. 1790. A bill to amend the Indian Health Care Improvement Act to revise and extend that Act, and for other purposes; to the Committee on Indian Affairs.

By Mr. BROWN:

S. 1791. A bill to establish the Honorable Stephanie Tubbs Jones Fire Suppression Demonstration Incentive Program within the Department of Education to promote installation of fire sprinkler systems, or other fire suppression or prevention technologies, in qualified student housing and dormitories, and for other purposes; to the Committee on Health, Education, Labor, and Pensions.

By Mr. ROCKEFELLER (for himself and Mr. GRASSLEY):

S. 1792. A bill to amend the Internal Revenue Code of 1986 to modify the requirements for windows, doors, and skylights to be eligible for the credit for nonbusiness energy property; to the Committee on Finance.

By Mr. HARKIN:

S. 1793. An original bill to amend title XXVI of the Public Health Service Act to revise and extend the program for providing life-saving care for those with HIV/AIDS; from the Committee on Health, Education, Labor, and Pensions; placed on the calendar.

By Mr. BROWNBACK (for himself and Mr. ROBERTS):

S. 1794. A bill to authorize and request the President to award the Medal of Honor posthumously to Captain Emil Kapaun of the United States Army for acts of valor during the Korean War; to the Committee on Armed Services.

By Ms. MURKOWSKI (for herself and Mr. BEGICH):

S. 1795. A bill to amend title 49, United States Code, to permit certain revenues of private providers of public transportation by vanpool received from providing public transportation to be used for the purpose of acquiring rolling stock, and to permit certain expenditures of private vanpool contractors to be credited toward the local matching share of the costs of public transportation projects; to the Committee on Commerce, Science, and Transportation.

ADDITIONAL COSPONSORS

S. 46

At the request of Mr. ENSIGN, the names of the Senator from Georgia (Mr. CHAMBLISS) and the Senator from Utah (Mr. BENNETT) were added as cosponsors of S. 46, a bill to amend title XVIII of the Social Security Act to repeal the Medicare outpatient rehabilitation therapy caps.

S. 451

At the request of Ms. COLLINS, the name of the Senator from Alabama (Mr. SESSIONS) was added as a cosponsor of S. 451, a bill to require the Secretary of the Treasury to mint coins in commemoration of the centennial of the establishment of the Girl Scouts of the United States of America.

S. 461

At the request of Mrs. LINCOLN, the name of the Senator from Alabama

(Mr. SESSIONS) was added as a cosponsor of S. 461, a bill to amend the Internal Revenue Code of 1986 to extend and modify the railroad track maintenance credit.

S. 546

At the request of Mr. REID, the name of the Senator from Montana (Mr. BAUCUS) was added as a cosponsor of S. 546, a bill to amend title 10, United States Code, to permit certain retired members of the uniformed services who have a service-connected disability to receive both disability compensation from the Department of Veterans Affairs for their disability and either retired pay by reason of their years of military service or Combat-Related Special Compensation.

S. 619

At the request of Ms. SNOWE, the name of the Senator from Connecticut (Mr. LIEBERMAN) was added as a cosponsor of S. 619, a bill to amend the Federal Food, Drug, and Cosmetic Act to preserve the effectiveness of medically important antibiotics used in the treatment of human and animal diseases.

S. 658

At the request of Mr. TESTER, the name of the Senator from Oregon (Mr. WYDEN) was added as a cosponsor of S. 658, a bill to amend title 38, United States Code, to improve health care for veterans who live in rural areas, and for other purposes.

S. 663

At the request of Mr. NELSON of Nebraska, the names of the Senator from Montana (Mr. BAUCUS) and the Senator from New York (Mrs. GILLIBRAND) were added as cosponsors of S. 663, a bill to amend title 38, United States Code, to direct the Secretary of Veterans Affairs to establish the Merchant Mariner Equity Compensation Fund to provide benefits to certain individuals who served in the United States merchant marine (including the Army Transport Service and the Naval Transport Service) during World War II.

S. 727

At the request of Ms. LANDRIEU, the name of the Senator from Rhode Island (Mr. REED) was added as a cosponsor of S. 727, a bill to amend title 18, United States Code, to prohibit certain conduct relating to the use of horses for human consumption.

S. 729

At the request of Mr. DURBIN, the name of the Senator from Delaware (Mr. KAUFMAN) was added as a cosponsor of S. 729, a bill to amend the Illegal Immigration Reform and Immigrant Responsibility Act of 1996 to permit States to determine State residency for higher education purposes and to authorize the cancellation of removal and adjustment of status of certain alien students who are long-term United States residents and who entered the United States as children, and for other purposes.

S. 823

At the request of Ms. SNOWE, the name of the Senator from California

(Mrs. BOXER) was added as a cosponsor of S. 823, a bill to amend the Internal Revenue Code of 1986 to allow a 5-year carryback of operating losses, and for other purposes.

S. 831

At the request of Mr. KERRY, the name of the Senator from Virginia (Mr. WARNER) was added as a cosponsor of S. 831, a bill to amend title 10, United States Code, to include service after September 11, 2001, as service qualifying for the determination of a reduced eligibility age for receipt of non-regular service retired pay.

S. 870

At the request of Mrs. LINCOLN, the name of the Senator from Georgia (Mr. CHAMBLISS) was added as a cosponsor of S. 870, a bill to amend the Internal Revenue Code of 1986 to expand the credit for renewable electricity production to include electricity produced from biomass for on-site use and to modify the credit period for certain facilities producing electricity from open-loop biomass.

S. 956

At the request of Mr. TESTER, the name of the Senator from North Carolina (Mrs. HAGAN) was added as a cosponsor of S. 956, a bill to amend title XVIII of the Social Security Act to exempt unsanctioned State-licensed retail pharmacies from the surety bond requirement under the Medicare Program for suppliers of durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS).

S. 1056

At the request of Mr. VOINOVICH, the names of the Senator from New Hampshire (Mrs. SHAHEEN) and the Senator from Idaho (Mr. RISCH) were added as cosponsors of S. 1056, a bill to establish a commission to develop legislation designed to reform tax policy and entitlement benefit programs and ensure a sound fiscal future for the United States, and for other purposes.

S. 1076

At the request of Mr. MENENDEZ, the name of the Senator from Massachusetts (Mr. KERRY) was added as a cosponsor of S. 1076, a bill to improve the accuracy of fur product labeling, and for other purposes.

S. 1136

At the request of Ms. STABENOW, the name of the Senator from New York (Mrs. GILLIBRAND) was added as a cosponsor of S. 1136, a bill to establish a chronic care improvement demonstration program for Medicaid beneficiaries with severe mental illnesses.

S. 1147

At the request of Mr. KOHL, the name of the Senator from California (Mrs. FEINSTEIN) was added as a cosponsor of S. 1147, a bill to prevent tobacco smuggling, to ensure the collection of all tobacco taxes, and for other purposes.

S. 1171

At the request of Mr. PRYOR, the name of the Senator from Ohio (Mr. VOINOVICH) was added as a cosponsor of

S. 1171, a bill to amend title XVIII of the Social Security Act to restore State authority to waive the 35-mile rule for designating critical access hospitals under the Medicare Program.

S. 1177

At the request of Mr. KOHL, the name of the Senator from Maine (Ms. COLLINS) was added as a cosponsor of S. 1177, a bill to improve consumer protections for purchasers of long-term care insurance, and for other purposes.

S. 1304

At the request of Mr. GRASSLEY, the name of the Senator from Massachusetts (Mr. KIRK) was added as a cosponsor of S. 1304, a bill to restore the economic rights of automobile dealers, and for other purposes.

S. 1340

At the request of Mr. LEAHY, the name of the Senator from New York (Mr. SCHUMER) was added as a cosponsor of S. 1340, a bill to establish a minimum funding level for programs under the Victims of Crime Act of 1984 for fiscal years 2010 to 2014 that ensures a reasonable growth in victim programs without jeopardizing the long-term sustainability of the Crime Victims Fund.

S. 1360

At the request of Mr. BINGAMAN, the name of the Senator from New Jersey (Mr. LAUTENBERG) was added as a cosponsor of S. 1360, a bill to amend the Internal Revenue Code of 1986 to exclude from gross income amounts received on account of claims based on certain unlawful discrimination and to allow income averaging for backpay and frontpay awards received on account of such claims, and for other purposes.

S. 1421

At the request of Mr. LEVIN, the name of the Senator from Pennsylvania (Mr. CASEY) was added as a cosponsor of S. 1421, a bill to amend section 42 of title 18, United States Code, to prohibit the importation and shipment of certain species of carp.

S. 1584

At the request of Mr. MERKLEY, the name of the Senator from Louisiana (Ms. LANDRIEU) was added as a cosponsor of S. 1584, a bill to prohibit employment discrimination on the basis of sexual orientation or gender identity.

S. 1608

At the request of Ms. STABENOW, the name of the Senator from Arkansas (Mrs. LINCOLN) was added as a cosponsor of S. 1608, a bill to prepare young people in disadvantaged situations for a competitive future.

S. 1685

At the request of Mr. SANDERS, the names of the Senator from Maryland (Ms. MIKULSKI) and the Senator from New Mexico (Mr. UDALL) were added as cosponsors of S. 1685, a bill to provide an emergency benefit of \$250 to seniors, veterans, and persons with disabilities in 2010 to compensate for the lack of a cost-of-living adjustment for such year, and for other purposes.

S. 1700

At the request of Mr. LUGAR, the name of the Senator from Indiana (Mr. BAYH) was added as a cosponsor of S. 1700, a bill to require certain issuers to disclose payments to foreign governments for the commercial development of oil, natural gas, and minerals, to express the sense of Congress that the President should disclose any payment relating to the commercial development of oil, natural gas, and minerals on Federal land, and for other purposes.

S. 1723

At the request of Mr. CORKER, the name of the Senator from Utah (Mr. BENNETT) 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. 1776

At the request of Ms. STABENOW, the names of the Senator from New Mexico (Mr. UDALL), the Senator from Pennsylvania (Mr. CASEY), the Senator from Alaska (Mr. BEGICH), and the Senator from Vermont (Mr. LEAHY) were added as cosponsors of S. 1776, a bill to amend title XVIII of the Social Security Act to provide for the update under the Medicare physician fee schedule for years beginning with 2010 and to sunset the application of the sustainable growth rate formula, and for other purposes.

S. 1783

At the request of Mr. FRANKEN, the name of the Senator from Minnesota (Ms. KLOBUCHAR) 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. RES. 307

At the request of Mr. BUNNING, the name of the Senator from Georgia (Mr. ISAKSON) was added as a cosponsor of S. Res. 307, a resolution to require that all legislative matters be available and fully scored by CBO 72 hours before consideration by any subcommittee or committee of the Senate or on the floor of the Senate.

S. RES. 312

At the request of Mr. DURBIN, the name of the Senator from New Jersey (Mr. MENENDEZ) was added as a cosponsor of S. Res. 312, a resolution expressing the sense of the Senate on empowering and strengthening the United States Agency for International Development (USAID).

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. FRANKEN:

S. 1788. A bill to direct the Secretary of Labor to issue an occupational safety and health standard to reduce injuries to patients, direct-care registered

nurses, and all other health care workers by establishing a safe patient handling and injury prevention standard, and for other purposes; to the Committee on Health, Education, Labor, and Pensions.

Mr. FRANKEN. Mr. President, today I am introducing a bill to help keep our country's invaluable nurses and health care workers safe from debilitating injuries suffered on the job. This legislation will require workplace standards that eliminate the manual lifting of patients—the primary cause of musculoskeletal disorders in the health care profession. And I want to first thank my colleague in the House, Representative CONYERS of Michigan's 14th District, for his leadership on this issue and for the impressive work he put into crafting this bill.

When we think of dangerous working conditions, mines or construction sites might come to mind. But in fact, work performed in hospitals and nursing homes contributes to thousands of cases of musculoskeletal disorders in nurses and health care workers each year. These injuries require time away from work, and unfortunately, many workers suffering from chronic back injury are forced to leave the profession permanently. Nurses and health care workers deserve better—they shouldn't have to sacrifice their safety and their livelihood to help others, especially when many of these injuries could be prevented.

The manual lifting of patients is the primary cause of musculoskeletal injuries, and can be eliminated with the use of lifting equipment. Many health care facilities already have this equipment available, and studies have shown that it reduces injuries to workers, increases safety for patients, and is a cost-effective investment over several years.

This legislation would require the Department of Labor to propose standards for safe patient handling to prevent musculoskeletal disorders for health care workers, and eliminate manual lifting of patients through the use of lift equipment. It would also require health care facilities to develop safe patient handling plans and provide training on safe patient handling techniques.

Under the bill, health care workers would have the right to refuse assignments that are not in compliance with safe patient handling standards and be protected from employer retaliation against workers who refuse these assignments or report violations.

To help health care facilities to make this transition, the bill creates a new grant program for needy health care facilities that require financial assistance to purchase safe patient handling equipment.

I urge my colleagues to support the Nurse and Health Care Worker Protection Act. All of us benefit from the services these professionals provide, and by passing this legislation, we can help ensure they are able to safely continue in their important careers.

Mr. President, I ask unanimous consent that the text of this 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. 1788

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE; FINDINGS; TABLE OF CONTENTS.

(a) **SHORT TITLE.**—This Act may be cited as the “Nurse and Health Care Worker Protection Act of 2009”.

(b) **FINDINGS.**—Congress finds the following:

(1) In 2007, direct-care registered nurses ranked seventh among all occupations for the number of cases of musculoskeletal disorders resulting in days away from work—8,580 total cases. Nursing aides, orderlies, and attendants sustained 24,340 musculoskeletal disorders in 2007, the second highest of any occupation. The leading cause of these injuries in health care are the result of patient lifting, transferring, and repositioning injuries.

(2) The physical demands of the nursing profession lead many nurses to leave the profession. Fifty-two percent of nurses complain of chronic back pain and 38 percent suffer from pain severe enough to require leave from work. Many nurses and other health care workers suffering back injury do not return to work.

(3) Patients are not at optimum levels of safety while being lifted, transferred, or repositioned manually. Mechanical lift programs can substantially reduce skin tears suffered by patients and the frequency of patients being dropped, thus allowing patients a safer means to progress through their care.

(4) The development of assistive patient handling equipment and devices has essentially rendered the act of strict manual patient handling unnecessary as a function of nursing care.

(5) A growing number of health care facilities have incorporated patient handling technology and have reported positive results. Injuries among nursing staff have dramatically declined since implementing patient handling equipment and devices. As a result, the number of lost work days due to injury and staff turnover has declined. Studies have also shown that assistive patient handling technology successfully reduces workers’ compensation costs for musculoskeletal disorders.

(6) Establishing a safe patient handling and injury prevention standard for direct-care registered nurses and other health care workers is a critical component in protecting nurses and other health care workers, addressing the nursing shortage, and increasing patient safety.

(c) **TABLE OF CONTENTS.**—The table of contents of this Act is as follows:

Sec. 1.	Short title; findings; table of contents.
Sec. 2.	Safe patient handling and injury prevention standard.
Sec. 3.	Protection of direct-care registered nurses and health care workers.
Sec. 4.	Application of safe patient handling and injury prevention standard to health care facilities not covered by OSHA.
Sec. 5.	Financial assistance to needy health care facilities in the purchase of safe patient handling and injury prevention equipment.
Sec. 6.	Definitions.

SEC. 2. SAFE PATIENT HANDLING AND INJURY PREVENTION STANDARD.

(a) **RULEMAKING.**—Not later than 1 year after the date of the enactment of this Act, the Secretary of Labor, shall, pursuant to section 6 of the Occupational Safety and Health Act of 1970 (29 U.S.C. 655), propose a standard on safe patient handling and injury prevention (in this section such standard referred to as the “safe patient handling and injury prevention standard”) under such section to prevent musculoskeletal disorders for direct-care registered nurses and all other health care workers handling patients in health care facilities. A final safe patient handling and injury prevention standard shall be promulgated not later than 2 years after the date of the enactment of this Act.

(b) **REQUIREMENTS.**—The safe patient handling and injury prevention standard shall require the use of engineering controls to perform lifting, transferring, and repositioning of patients and the elimination of manual lifting of patients by direct-care registered nurses and all other health care workers, through the use of mechanical devices to the greatest degree feasible except where the use of safe patient handling practices can be demonstrated to compromise patient care. The standard shall apply to all health care employers and shall require at least the following:

(1) Each health care employer to develop and implement a safe patient handling and injury prevention plan within 6 months of the date of promulgation of the final standard, which plan shall include hazard identification, risk assessments, and control measures in relation to patient care duties and patient handling.

(2) Each health care employer to purchase, use, maintain, and have accessible an adequate number of safe lift mechanical devices not later than 2 years after the date of issuance of a final regulation establishing such standard.

(3) Each health care employer to obtain input from direct-care registered nurses, health care workers, and employee representatives of direct-care registered nurses and health care workers in developing and implementing the safe patient handling and injury prevention plan, including the purchase of equipment.

(4) Each health care employer to establish and maintain a data system that tracks and analyzes trends in injuries relating to the application of the safe patient handling and injury prevention standard and to make such data and analyses available to employees and employee representatives.

(5) Each health care employer to establish a system to document in each instance when safe patient handling equipment was not utilized due to legitimate concerns about patient care and to generate a written report in each such instance. The report shall list the following:

(A) The work task being performed.
(B) The reason why safe patient handling equipment was not used.

(C) The nature of the risk posed to the worker from manual lifting.

(D) The steps taken by management to reduce the likelihood of manual lifting and transferring when performing similar work tasks in the future.

Such reports shall be made available to OSHA compliance officers, workers, and their representatives upon request within one business day.

(6) Each health care employer to train nurses and other health care workers on safe patient handling and injury prevention policies, equipment, and devices at least on an annual basis. Such training shall include providing information on hazard identification, assessment, and control of musculo-

skeletal hazards in patient care areas and shall be conducted by an individual with knowledge in the subject matter, and delivered, at least in part, in an interactive classroom-based and hands-on format.

(7) Each health care employer to post a uniform notice in a form specified by the Secretary that—

(A) explains the safe patient handling and injury prevention standard;

(B) includes information regarding safe patient handling and injury prevention policies and training; and

(C) explains procedures to report patient handling-related injuries.

(8) Each health care employer to conduct an annual written evaluation of the implementation of the safe patient handling and injury prevention plan, including handling procedures, selection of equipment and engineering controls, assessment of injuries, and new safe patient handling and injury prevention technology and devices that have been developed. The evaluation shall be conducted with the involvement of nurses, other health care workers, and their representatives and shall be documented in writing. Health care employers shall take corrective action as recommended in the written evaluation.

(c) **INSPECTIONS.**—The Secretary of Labor shall conduct unscheduled inspections under section 8 of the Occupational Safety and Health Act of 1970 (29 U.S.C. 657) to ensure implementation of and compliance with the safe patient handling and injury prevention standard.

SEC. 3. PROTECTION OF DIRECT-CARE REGISTERED NURSES AND HEALTH CARE WORKERS.

(a) **REFUSAL OF ASSIGNMENT.**—The Secretary shall ensure that a direct-care registered nurse or other health care worker may refuse to accept an assignment from a health care employer if—

(1) the assignment would subject the worker to conditions that would violate the safe patient handling and injury prevention standard; or

(2) the nurse or worker has not received training described in section 2(a)(5) that meets such standard.

(b) **RETALIATION FOR REFUSAL OF LIFTING ASSIGNMENT BARRED.**—

(1) **NO DISCHARGE, DISCRIMINATION, OR RETALIATION.**—No health care employer shall discharge, discriminate, or retaliate in any manner with respect to any aspect of employment, including discharge, promotion, compensation, or terms, conditions, or privileges of employment, against a direct-care registered nurse or other health care worker based on the nurse’s or worker’s refusal of a lifting assignment under subsection (a).

(2) **NO FILING OF COMPLAINT.**—No health care employer shall file a complaint or a report against a direct-care registered nurse or other health care worker with the appropriate State professional disciplinary agency because of the nurse’s or worker’s refusal of a lifting assignment under subsection (a).

(c) **WHISTLEBLOWER PROTECTION.**—

(1) **RETALIATION BARRED.**—A health care employer shall not discriminate or retaliate in any manner with respect to any aspect of employment, including hiring, discharge, promotion, compensation, or terms, conditions, or privileges of employment against any nurse or health care worker who in good faith, individually or in conjunction with another person or persons—

(A) reports a violation or a suspected violation of this Act or the safe patient handling and injury prevention standard to the Secretary of Labor, a public regulatory agency, a private accreditation body, or the management personnel of the health care employer;

(B) initiates, cooperates, or otherwise participates in an investigation or proceeding

brought by the Secretary, a public regulatory agency, or a private accreditation body concerning matters covered by this Act; or

(C) informs or discusses with other individuals or with representatives of health care employees a violation or suspected violation of this Act.

(2) **GOOD FAITH DEFINED.**—For purposes of this subsection, an individual shall be deemed to be acting in good faith if the individual reasonably believes—

(A) the information reported or disclosed is true; and

(B) a violation of this Act or the safe patient handling and injury prevention standard has occurred or may occur.

(d) **COMPLAINT TO SECRETARY.**—

(1) **FILING.**—A direct-care registered nurse, health care worker, or other individual may file a complaint with the Secretary of Labor against a health care employer that violates this section within 180 days of the date of the violation.

(2) **RESPONSE TO COMPLAINT.**—For any complaint so filed, the Secretary shall—

(A) receive and investigate the complaint;

(B) determine whether a violation of this Act as alleged in the complaint has occurred; and

(C) if such a violation has occurred, issue an order that sets forth the violation and the required remedy or remedies.

(3) **REMEDIES.**—The Secretary shall have the authority to order all appropriate remedies for such violations.

(e) **CAUSE OF ACTION.**—Any direct-care registered nurse or other health care worker who has been discharged, discriminated, or retaliated against in violation of this section may bring a cause of action in a United States district court. A direct-care registered nurse or other health care worker who prevails on the cause of action shall be entitled to the following:

(1) Reinstatement, reimbursement of lost wages, compensation, and benefits.

(2) Attorneys' fees.

(3) Court costs.

(4) Other damages.

(f) **NOTICE.**—A health care employer shall include in the notice required under section 2(b)(7) an explanation of the rights of direct-care registered nurses and health care workers under this section and a statement that a direct-care registered nurse or health care worker may file a complaint with the Secretary against a health care employer that violates the safe patient handling and injury prevention standard, including instructions for how to file such a complaint.

(g) **ADDITION TO CURRENT PROTECTIONS.**—The worker protections provided for under this section are in addition to protections provided in section 11(c) of the Occupational Safety and Health Act of 1970 (29 U.S.C. 660(c)).

SEC. 4. APPLICATION OF SAFE PATIENT HANDLING AND INJURY PREVENTION STANDARD TO HEALTH CARE FACILITIES NOT COVERED BY OSHA.

(a) **IN GENERAL.**—Section 1866 of the Social Security Act (42 U.S.C. 1395cc) is amended—

(1) in subsection (a)(1)(V), by inserting “and safe patient handling and injury prevention standard (as initially promulgated under section 2 of the Nurse and Health Care Worker Protection Act of 2009)” before the period at the end; and

(2) in subsection (b)(4)—

(A) in subparagraph (A), inserting “and the safe patient handling and injury prevention standard” after “Bloodborne Pathogens standard”; and

(B) in subparagraph (B), inserting “or the safe patient handling and injury prevention standard” after “Bloodborne Pathogens standard”.

(b) **EFFECTIVE DATE.**—The amendments made by subsection (a) shall apply to health care facilities 1 year after date of issuance of the final safe patient handling and injury prevention standard required under section 2.

SEC. 5. FINANCIAL ASSISTANCE TO NEEDY HEALTH CARE FACILITIES IN THE PURCHASE OF SAFE PATIENT HANDLING AND INJURY PREVENTION EQUIPMENT.

(a) **IN GENERAL.**—The Secretary of Health and Human Services shall establish a grant program that provides financial assistance to cover some or all of the costs of purchasing safe patient handling and injury prevention equipment for health care facilities, such as hospitals, nursing facilities, home health care, and outpatient facilities, that—

(1) require the use of such equipment in order to comply with the safe patient handling and injury prevention standard; but

(2) demonstrate the financial need for assistance for purchasing the equipment required under such standard.

(b) **APPLICATION.**—No financial assistance shall be provided under this section except pursuant to an application made to the Secretary of Health and Human Services in such form and manner as the Secretary shall specify.

(c) **AUTHORIZATION OF APPROPRIATIONS.**—There are authorized to be appropriated for financial assistance under this section \$200,000,000, of which \$50,000,000 will be available specifically for home health agencies or entities. Funds appropriated under this subsection shall remain available until expended.

SEC. 6. DEFINITIONS.

For purposes of this Act:

(1) **DIRECT-CARE REGISTERED NURSE.**—The term “direct-care registered nurse” means an individual who has been granted a license by at least one State to practice as a registered nurse and who provides bedside care or outpatient services for one or more patients or residents.

(2) **HEALTH CARE WORKER.**—The term “health care worker” means an individual who has been assigned to lift, reposition, or move patients or residents in a health care facility.

(3) **EMPLOYMENT.**—The term “employment” includes the provision of services under a contract or other arrangement.

(4) **HEALTH CARE EMPLOYER.**—The term “health care employer” means an outpatient health care facility, hospital, nursing home, home health care agency, hospice, federally qualified health center, nurse managed health center, rural health clinic, or any similar health care facility that employs direct-care registered nurses or other health care workers.

By Mr. DURBIN (for himself, Mr. LEAHY, Mr. SPECTER, Mr. FEINGOLD, Mr. CARDIN, Mr. WHITEHOUSE, Mr. KAUFMAN, Mr. FRANKEN, Mr. DODD, Mr. KERRY, and Mr. LEVIN):

S. 1789. A bill to restore fairness to Federal cocaine sentencing; to the Committee on the Judiciary.

Mr. DURBIN. Mr. President, I rise to speak about the Fair Sentencing Act of 2009, which I am introducing today.

This narrowly tailored bill would eliminate the sentencing disparity that exists in the United States between crack cocaine and powder cocaine. At the same time, it would increase penalties for the worst offenders for crimes involving these substances. It accom-

plishes two very important goals: One goal is to restore fairness to drug sentencing and, second, to focus our limited Federal resources on the most effective way to end violent drug trafficking.

I have cast thousands of votes as a Member of the House of Representatives and the Senate. Most of those votes are kind of lost in the shadows of history. Some were historic, relative to going to war and impeachment issues, and you never forget those.

But there was one vote I cast more than 20 years ago which I regret. It was a vote that was cast by many of us in the House of Representatives, when we were first informed about the appearance of a new narcotic on the streets. It was called crack cocaine. It was so cheap it was going to be plentiful, and it was so insidious—or at least we were told that 20 years ago—we were advised to take notice and do something dramatic and we did.

More than 20 years ago, I joined many Members of Congress from both political parties in voting for the Anti-Drug Abuse Act of 1986. It established the Federal cocaine sentencing framework that is still in place today.

Under this law, it takes 100 times more powder cocaine than crack cocaine to trigger the same 5-to-10-year mandatory minimum sentence. This is known as the 100-to-1 crack/powder sentencing disparity. But that phrase doesn't tell the story. Here is the story. Simply possessing 5 grams of crack, which is the equivalent of holding five packets of sugar or Equal or one of the sugar substitutes, simply possessing that small amount of crack cocaine under the current sentencing framework carries the same sentence as selling—not possessing but selling—500 grams of powder cocaine—the equivalent of 500 packets of sugar. Why? Well, because we believed we were dealing with a different class of narcotics; something that was much more dangerous and should be treated much more harshly.

Make no mistake, cocaine—whether in crack or powder form—has a devastating impact on families and on our society and we need to have tough legislation when it comes to narcotics. But in addition to being tough, our drug laws have to be fair.

Right now, our cocaine laws are based on a distinction between crack and powder cocaine which cannot be justified. Our laws don't focus on the most dangerous offenders. Incarcerating for 5 to 10 years people who are possessing five sugar packets' worth of crack cocaine for the same period of time as those who are selling 500 sugar-size packets of powder cocaine is indefensible.

The Fair Sentencing Act, which I am introducing today, would completely eliminate this crack/powder disparity. It establishes the same sentences for crack and powder—a 1-to-1 sentencing ratio.

Those of us who supported the law establishing this disparity had good intentions. We followed the lead and advice of people in law enforcement. We wanted to address this crack epidemic that was spreading fear and ravaging communities. But we have learned a great deal in the last 20 years. We now know the assumptions that led us to create this disparity were wrong.

Vice President JOE BIDEN, one of the authors of the legislation creating this disparity in sentencing, has said: "Each of the myths upon which we based the disparity has since been dispelled or altered."

Earlier this year, I held a hearing in the Senate Judiciary Committee on this disparity in sentencing and we learned the following: Crack is not more addictive than powder cocaine, and crack cocaine offenses do not involve significantly more violence than powder cocaine offenses. Those were the two things that led us to this gross disparity in sentencing between powder cocaine and crack cocaine. We were told it is different; it is more addictive. It is not. We were also told it was going to create conduct which was much more violent than those who were selling powder cocaine and their activities. It did not.

We have also learned that more than 2.3 million people are imprisoned in America today. That is the most prisoners and the highest per capita rate of prisoners of any country in the world, and it is largely due to the incarceration of nonviolent drug offenders in America. African Americans are incarcerated at nearly six times the rate of White Americans. These are issues of fundamental human rights and justice our country must face.

It is important to note that the crack/powder disparity disproportionately affects African Americans. While African Americans constitute less than 30 percent of crack users, they make up 82 percent of those convicted of Federal crack offenses.

At a hearing I held, we heard compelling testimony from Judge Reggie B. Walton, who was Associate Director of the Office of Drug Control Policy under President George H.W. Bush and was appointed by President George W. Bush to the Federal bench. Judge Walton is an African American, and he testified about "the agony of having to enforce a law that one believes is fundamentally unfair and disproportionately impacts individuals who look like me."

We also heard about the negative impact the crack/powder disparity has on the criminal justice system. Judge Walton further testified about "jurors who would tell me that they refused to convict, that even though they thought the evidence was overwhelming, they were not prepared to put another young black man in prison knowing the sentencing disparity that existed between crack and powder cocaine."

Asa Hutchinson, who was head of the Drug Enforcement Administration under President George W. Bush, testi-

fied: "Under the current disparity, the credibility of our entire drug enforcement system is weakened."

The crack disparity also diverts resources away from the prosecution of large-scale drug traffickers. In fact, more than 60 percent of defendants convicted of Federal crack crimes are street-level dealers or mules.

During these difficult economic times, it is also important to note that the crack/powder disparity has placed an enormous burden on taxpayers and the prison system. Based on the Bureau of Prison's estimates of the annual costs of incarceration and the U.S. Sentencing Commission's projections of the number of prison beds reduced per year, we know that eliminating this disparity could save more than \$510 million in prison beds over 15 years.

There is widespread and growing agreement that the Federal cocaine and sentencing policy in the United States today is unjustified and unjust.

At the hearing I held on the crack/powder disparity, Lanny Breuer, the Assistant Attorney General of the Criminal Division, announced that the Justice Department and this administration support completely eliminating the crack/powder disparity and establishing a 1-to-1 ratio, which is included in my bill.

In June, Attorney General Eric Holder testified before the Senate Judiciary Committee. I asked him about this issue and here is what he said.

When one looks at the racial implications of the crack-powder disparity, it has bred disrespect for our criminal justice system. It has made the job of those of us in law enforcement more difficult. . . . [I]t is time to do away with that disparity.

Here on Capitol Hill, Democrats and Republicans alike have advocated fixing the disparity for years.

The following 10 Senators are original cosponsors of the Fair Sentencing Act: Senator PATRICK LEAHY, the Chairman of the Judiciary Committee, who for years has advocated for drug sentencing reform; Senator ARLEN SPECTER, the Chair of the Judiciary Committee's Crime and Drugs Subcommittee; Five other members of the Senate Judiciary Committee—Senators RUSS FEINGOLD, BEN CARDIN, SHELDON WHITEHOUSE, TED KAUFMAN, and AL FRANKEN; and Senators JOHN KERRY, CHRIS DODD, and CARL LEVIN.

I would also like to recognize at this point, though he is not a cosponsor of the bill, Senator JEFF SESSIONS, the ranking member of the Judiciary Committee. He has been a leader in calling for reform of crack/powder sentencing policy.

The Senator from Alabama is a former U.S. attorney, not known to be soft on crime in any way, shape, or form, but he was one of the first to speak out about the injustice of the crack/powder disparity. I continue my dialog with Senator SESSIONS in the hope that he and I can come to a common place with regard to this important issue.

There is a bipartisan consensus about the need to fix the crack-powder disparity. I have been in discussions with Chairman LEAHY and Ranking Member SESSIONS, as well as Republican Senators LINDSEY GRAHAM, ORRIN HATCH, and TOM COBURN, and I am confident that the Judiciary Committee can come together to find a bipartisan solution to this problem.

A broad coalition of legal, law enforcement, civil rights, and religious leaders and groups from across the political spectrum supports eliminating the crack-powder disparity, including, for example: Los Angeles Police Chief Bill Bratton, Miami Police Chief John Timoney, The American Bar Association, The Leadership Conference on Civil Rights, The National Black Police Association, and The United Methodist Church.

The bipartisan United States Sentencing Commission has been urging Congress to act for 15 years. They have argued that fixing the crack-powder disparity "would better reduce the [sentencing] gap [between African Americans and whites] than any other single policy change, and it would dramatically improve the fairness of the federal sentencing system." The Sentencing Commission has repeatedly recommended that Congress take two important steps: No. 1, reduce the sentencing disparity by increasing the quantities of crack cocaine that trigger mandatory minimum sentences; and No. 2, eliminate the mandatory minimum penalty for simple possession of crack cocaine. This is the only mandatory minimum sentence for simple possession of a drug by a first time offender.

The bill that I have introduced does both those things.

In order to ensure that limited Federal resources are directed toward the largest drug traffickers and the most violent offenders, not just those guilty of simple possession and a first offense, the Fair and Sentencing Act provides for increased penalties for drug offenses involving vulnerable victims, violence and other aggravating factors.

For example, an individual being prosecuted for possessing either crack or powder cocaine will face more jail time if he: uses or threatens to use violence; uses or possesses a dangerous weapon; is a manager, leader or organizer of drug trafficking activities; or distributes drugs to a pregnant woman or minor.

The bill would also increase the financial penalties for drug trafficking. This sentencing structure will shift Federal resources towards violent traffickers and away from nonviolent drug users who are best dealt with at the State level.

In the final analysis, this legislation is about fixing an unjust law that has taken a great human toll. At the hearing I held in the Judiciary Committee, we heard testimony from Cedric Parker, who is from Alton in my home State of Illinois. In 2000, Mr. Parker's

sister, Eugenia Jennings, was sentenced to 22 years in prison for selling 14 grams of crack cocaine. Mr. Parker told us that Eugenia was physically and sexually abused from a young age. She was addicted to crack by the time she was 15.

Eugenia has three children, Radley, Radeisha, and Cardez. They are now 11, 14, and 15. These children were 2, 5, and 6 when their mother went to prison for selling the equivalent of 6 sugar cubes of crack. They have seen their mother once in the last 9 years. They will be 21, 24, and 25 when she is released in 2019.

At Eugenia's sentencing, Judge Patrick Murphy said this:

Mrs. Jennings, nobody has ever been there for you when you needed it. When you were a child and you were being abused, the Government wasn't there. But when you had a little bit of crack, the government was there. And it is an awful thing, an awful thing to separate a mother from her children. That's what the Government has done for Eugenia Jennings.

It is time to right this wrong. We have talked about the need to address the crack-powder disparity for long enough. Now, it's time to act. I urge my colleagues to join me in supporting the Fair Sentencing Act of 2009.

Mr. SESSIONS. Mr. President, I see my colleague, the assistant majority leader. I know we have been talking about improvement in the sentencing process for crack cocaine. I have offered legislation for almost a decade that would substantially improve the sentencing process in a way that I think is fair and constructive and allows us to deal with serious criminals like drug dealers. I believe it is pretty close to being a good policy. Senator Salazar, now a member of the Obama Cabinet, and Senator MARK PRYOR, my Democratic colleague from Arkansas, Senator JOHN CORNYN from Texas, and I, all four former attorneys general, offered that legislation. Senator DURBIN has some ideas too. I look forward to working with him. I do think it is past time to act.

I will not favor alterations that massively undercut the sentencing we have in place, but I definitely believe that the current system is not fair and that we are not able to defend the sentences that are required to be imposed under the law today.

I am a strong believer in law enforcement and prosecution of those who violate our laws, particularly criminals who really do a lot of damage beyond just dealing drugs. They foster crime and form gangs. People who use cocaine tend to be violent. Even more, in some ways, people who use crack cocaine, as opposed to powder cocaine, tend to be paranoid and violent. It is not a good thing.

We don't need to give up the progress that has been made, but at the same time we need to fix the sentencing. I oppose anything that represents a 50, 60, 70, or 80 percent reduction in penalties but a significant rebalancing of that would be justified.

Mr. LEAHY. Mr. President, today, I am proud to join Senators DURBIN, SPECTER, FEINGOLD, CARDIN, WHITEHOUSE, KAUFMAN, FRANKEN, and others to introduce the Fair Sentencing Act of 2009. Our bill will eliminate the current 100-to-1 disparity between Federal sentences for crack and powder cocaine, equalizing the penalties for both forms of cocaine. I hope that this legislation will finally enable us to address the racial imbalance that has resulted from the cocaine sentencing disparity, as well as to make our drug laws more fair, more rational, and more consistent with our core values of justice.

I commend Senator DURBIN for his leadership in fixing this decades-old injustice. He chaired a hearing before our Crime and Drugs Subcommittee six months ago to examine this issue where we heard from the Assistant Attorney General for the Criminal Division at the Justice Department. We should do what we can to restore public confidence in our criminal justice system. Correcting biases in our criminal sentencing laws is a step in that direction.

Today, the criminal justice system has unfair and biased cocaine penalties that undermine the Constitution's promise of equal treatment for all Americans. For more than 20 years, our Nation has used a Federal cocaine sentencing policy that treats "crack" offenders one hundred times more harshly than other cocaine offenders without any legitimate basis for the difference. We know that there is little or no pharmacological distinction between crack and powder cocaine, yet the resulting punishments for these offenses is radically different and the resulting impact on minorities has been particularly unjust.

Under this flawed policy, a first-time offender caught selling five grams of powder cocaine typically receives a 6 month sentence, and would often be eligible for probation. That same first-time offender selling the same amount of crack faces a mandatory five year prison sentence, with little or no possibility of leniency. This policy is wrong and unfair, and it has needlessly swelled our prisons, wasting precious Federal resources.

Even more disturbingly, this policy has had a significantly disparate impact on racial and ethnic minorities. According to the latest statistics assembled by the United States Sentencing Commission, African-American offenders continue to make up the large majority of Federal crack cocaine offenders, accounting for 80 percent of all Federal crack cocaine offenses, compared to white offenders who account for just 10 percent. These statistics are startling. It is no wonder this policy has sparked a nationwide debate about racial bias and undermined citizens' confidence in the justice system.

These penalties, which Congress created in the mid-1980s, have failed to ad-

dress basic concerns. The primary goal was to punish the major traffickers and drug kingpins who were bringing crack into our neighborhoods. But the law has not been used to go after the most serious offenders. In fact, just the opposite has happened. The Sentencing Commission has consistently reported for many years that more than half of Federal crack cocaine offenders are low-level street dealers and users, not the major traffickers Congress intended to target.

The Fair Sentencing Act of 2009 would return the focus of Federal cocaine sentencing policy to drug kingpins, rather than street level dealers, and address the racial disparity in cocaine sentencing. The legislation we introduce today would align crack and powder cocaine sentences by setting the mandatory minimum sentencing triggers at the same levels. This equalization is a sound way to address the unjust sentencing disparity between crack and powder cocaine.

We have heard calls for this reform from Senators on both sides of the aisle. Senator HATCH, who has called the current ratio "an unjustifiable disparity," recognizes that because "crack and powder cocaine are pharmacologically the same drug" our sentencing laws do "not warrant such an extreme disparity." Even Senator SESSIONS, now the ranking Republican member of the Judiciary Committee, has called the 100-to-1 disparity in sentencing between crack cocaine and powder cocaine "not justifiable" and called for changes to make the criminal justice system more effective and fair.

The legislation we introduce today would also eliminate the mandatory minimum sentence for possession of crack cocaine. The 5-year mandatory minimum sentence penalty for simple possession of crack is unique under Federal law. There is no other mandatory minimum for mere simple possession of a drug. This bill would correct this inequity, as well. Still, the Federal penalties for drug crimes remain very tough. This bill toughens some of those penalties. It would increase fines for major drug traffickers, as well as provide sentencing enhancements for acts of violence committed during the course of a drug trafficking offense. As a former prosecutor, I support strong punishments for drug traffickers.

This legislation already has support from a broad coalition of groups, including the American Bar Association, the NAACP, the ACLU, Families Against Mandatory Minimums, the Sentencing Project, the United Methodist Church, and many more.

While serving in the Senate, in September 2007, then-Senator Obama said:

If you are convicted of a crime involving drugs, of course you should be punished. But let's not make the punishment for crack cocaine that much more severe than the punishment for powder cocaine when the real difference is where the people are using them or who is using them.

I agree. And the Justice Department agrees as well, as Assistant Attorney

General Lanny Breuer announced at our hearing this spring.

For over 20 years, the “crack-powder” disparity in the law has contributed to swelling prison populations without focusing on the drug kingpins. We must be smarter in our Federal drug policy. Law enforcement has been and continues to be a central part of our efforts against illegal drugs, but we must also find meaningful, community-based solutions.

American justice is about fairness for each individual. To have faith in our system Americans must have confidence that the laws of this country, including our drug laws, are fair and administered fairly. I believe the Fair Sentencing Act of 2009 will move us one step closer to reaching that goal. I urge all Senators to support this measure.

Mr. SPECTER. Mr. President. I have sought recognition to urge support for the legislation introduced today by Senator DURBIN to completely eliminate the unfair and unwarranted sentencing disparity between crack and powder cocaine. I am an original co-sponsor of this bill.

Since the passage of the Anti-Drug Abuse Act of 1986, which established the basic framework of mandatory minimum penalties currently applicable to Federal drug trafficking offenses, there exists a 100-to-1 ratio between crack and powder cocaine. That means it takes 100 times as much powder cocaine as crack to trigger the same 5-year and 10-year mandatory minimum penalties.

On April 29, 2009, 6 witnesses testified before the Senate Judiciary Subcommittee on Crime and Drugs regarding the sentencing disparity between crack and powder cocaine, including the Assistant Attorney General for the Criminal Division at the Department of Justice, the Acting Chair of the U.S. Sentencing Commission, a U.S. District Court Judge representing the Judicial Conference of the U.S. Courts, and a Police Commissioner from a major urban city. All six witnesses testified in favor of an immediate reduction or elimination of this disparity.

At the time Congress established the crack-powder disparity in 1986, it did so because it was believed that crack was uniquely addictive and was associated with greater levels of violence than powder cocaine.

Today, more than 20 years later, research has shown that the addictive qualities of crack have more to do with its mode of administration—smoking compared to inhaling—rather than its chemical structure. Moreover, recent studies suggest that levels of violence associated with crack are stable or even declining.

Last year, 80.6 percent of crack offenders were African Americans, while only 10.2 percent were white. Compare that with powder cocaine prosecutions. For that same year, 30.25 percent of powder cocaine offenders were African Americans, 52.5 percent were Hispanic, and 16.4 percent were white. The aver-

age sentence for crack offenders is 2 years longer than the average sentence for powder cocaine.

Let me repeat that. African Americans, who make up approximately 12.3 percent of the population in the U.S., comprise 80.6 percent of the Federal crack offenders.

It takes about \$14,000 worth of powder cocaine compared to only about \$150 of crack to trigger the 5-year mandatory minimum penalty. Given that crack and cocaine powder are the same drug—just in different forms—why should we impose the same 5-year sentence for the \$150 drug deal as for the \$14,000 drug deal?

These sentencing disparities undermine the confidence in the criminal justice system. Our courts and our laws must be fundamentally fair; just as importantly, they must be perceived as fair by the public. I do not believe that the 1986 Act was intended to have a disparate impact on minorities but the reality is that it does.

The White House and the Department of Justice have asked Congress to eliminate this unfair sentencing disparity. It is time to correct this injustice.

By Mr. DORGAN (for himself, Mr. REID, Ms. MURKOWSKI, Mr. UDALL of New Mexico, Mr. WHITEHOUSE, Mr. JOHNSON, Mr. TESTER, Mr. AKAKA, Mr. CONRAD, Mr. BEGICH, Mr. FRANKEN, Mr. BURRIS, Mr. INOUE, Ms. STABENOW, Mr. UDALL of Colorado, and Ms. KLOBUCHAR):

S. 1790. A bill to amend the Indian Health Care Improvement Act to revise and extend that Act, and for other purposes; to the Committee on Indian Affairs.

Mr. DORGAN. Mr. President, today I introduced the Indian Health Care Improvement Reauthorization and Extension Act of 2009. We face a bona fide crisis in health care in our Native American communities, and this bill is a first step toward fulfilling our treaty obligations and trust responsibility to provide quality health care in Indian Country. I introduce this bill on behalf of myself, Leader REID and Senators MURKOWSKI, UDALL of New Mexico, BEGICH, FRANKEN, WHITEHOUSE, INOUE, AKAKA, JOHNSON, TESTER, CONRAD, BURRIS, STABENOW, UDALL of Colorado, and KLOBUCHAR.

As Chairman of the Senate Committee on Indian Affairs, I have again made health care a top priority for the Committee this Congress. Native Americans suffer staggering health disparities due to an outdated, strained and underfunded health care system. We have a federal health care system for Native Americans that is only funded at about half of its need. Clinician vacancy rates within this system are high and misdiagnosis is rampant. Only those with “life or limb” emergencies seem to get care. Native Americans die of tuberculosis at a rate 600 percent

higher than the general population, suicide rates are nearly double, alcoholism rates are 510 percent higher, and diabetes rates are 189 percent higher than the general population.

These numbers are appalling and represent Third World conditions right here in the U.S.

I have heard the heartbreaking stories about the lack of health care on our Native American reservations: people like Ta’shon Rain Littlelight, Jami Rose Jetty, Russell Lente and Avis Little Wind, who likely still would be living today had they had access to adequate health care. Our Federal system has failed them and so many other Native Americans. We owe our First Americans something better, and the bill I introduced today with my colleagues will provide a better system.

For over a decade, Indian Country has asked Congress to reauthorize and amend the Indian Health Care Improvement Act, P.L. 94-437. The National Steering Committee for Reauthorization, National Congress of American Indians, National Indian Health Board, and other Native American health advocates have been dedicated to improving the health care available to Native Americans across the country. I too am committed to ensuring the United States fulfills its trust responsibility to provide decent health care to the Native Americans.

Last Congress, the Senate passed the Indian Health Care Improvement Act Amendments of 2008, which would have brought needed improvements to the Native American health care system. The bill passed by an overwhelming 83 to 10 vote. This was the first time in almost 17 years that the Senate considered and passed a Native American health care bill. Ultimately, the bill failed to be considered in the House of Representatives. My colleagues and I remain committed to getting a bill enacted into law.

In July, I developed a Native American health concept paper which was sent out to Indian Country for comments. I and the Committee on Indian Affairs held many listening sessions and meetings with many Native Americans around the country to discuss the concept paper. In addition, the Committee has held five hearings focused on Native American health issues this Congress. The Committee has worked to compile the feedback received from the concept paper and other meetings to develop the Native American health bill I introduced today.

Similar legislation has been considered in the 106, 107, 108, 109, and 110 Congresses. Today, my colleagues and I put forward a Native American health bill for the 111 Congress which builds on the work of prior Congresses, but goes beyond to include innovative solutions and reforms for the Native American health care system.

I would like to highlight some of the important updates the Indian Health Care Improvement Reauthorization and Extension Act of 2009 will bring to

the Native American health care system.

Perhaps most importantly, the Native American health bill permanently reauthorizes all current laws governing the Native American health care system. This means that once this bill is passed, Indian Country will never again have to wait nearly 20 years for a reauthorization of the Indian Health Care Improvement Act.

This bill also authorizes long-term care services, including hospice care, assisted living, long-term care and home- and community-based care. Current law does not allow for these services to be provided by the Indian Health Service or tribal facilities. Although some areas of Indian Country are merely focused on addressing life or limb medical emergencies, other areas are in need of long-term care. Thus, I believe they should be authorized.

In addition, the bill establishes mental and behavioral health programs beyond alcohol and substance abuse, such as fetal alcohol spectrum disorders, child sexual abuse and prevention treatment programs. The mental health needs in Native American communities extend beyond alcohol and substance abuse, in fact over 1/3 of the health care needs in Indian Country are related to mental health. The comprehensive mental and behavioral health programs established as a result of this bill will bring necessary care and resources to Native Americans.

In order to address the tragic level of youth suicide, the bill includes behavioral health provisions solely focused on preventing Native American youth suicide. The youth suicide rate in Indian Country is 3.5 times higher than the general population. Earlier this year, I chaired an Indian Affairs hearing to draw attention to this important topic.

The bill also incorporates many new ideas aimed at improving the access to health care available to Native Americans. The bill authorizes projects which will incentivize tribes to use innovative facilities construction which save money and expand the health care services available to Native American communities. For example, these projects include the use of modular component facility construction and mobile health stations.

Modular component health facilities can be built at often one-third the cost and a fraction of the time of a typical health facility. In addition, mobile health stations will allow for Native Americans in rural areas without a hospital, increased access to specialty health services like dialysis, same-day surgery, dental care, or other services. Currently, there is an estimated \$3 billion backlog for maintenance, improvement and construction of Native American health care facilities. In addition, the average age of an Indian Health Service facility is 33 years, as compared to 7 years in the general population. These innovative health care fa-

cilities will go a long way in this disparity and improving access to health care for Native Americans across the country.

The Native American health bill establishes a health delivery demonstration project. This project provides for convenient care services, which could be offered in local grocery stores and other venues, to make health care more available to Native American communities. The health delivery demonstration project authorizes the Indian Health Service to consider other innovative health delivery models, like community health centers, and other models which will increase access to health care services.

I want to end by saying the need for health care is not new for Indian Country. Nowadays, the need for national health care reform is front page news, but our Native Americans have long been in need of health care reforms. Therefore, I intend to offer this Native American health bill as an amendment to any national health care reform bill considered on the Senate floor.

I want to thank all the Native American health advocates who assisted us in the development of this crucial piece of legislation. The Federal Government signed the dotted lines years ago, and today, we make an important step towards finally fulfilling those obligations.

AMENDMENTS SUBMITTED AND PROPOSED

SA 2691. Ms. SNOWE (for herself, Mr. KERRY, and Mr. KIRK) submitted an amendment intended to be proposed by her to the bill H.R. 2847, making appropriations for the Departments of Commerce and Justice, and Science, and Related Agencies for the fiscal year ending September 30, 2010, and for other purposes; which was ordered to lie on the table.

TEXT OF AMENDMENTS

SA 2691. Ms. SNOWE (for herself, Mr. KERRY, and Mr. KIRK) submitted an amendment intended to be proposed by her to the bill H.R. 2847, making appropriations for the Departments of Commerce and Justice, and Science, and Related Agencies for the fiscal year ending September 30, 2010, and for other purposes; which was ordered to lie on the table; as follows:

On page 124, line 21, strike "section." and insert "section, including an assessment of actions other than increased Federal spending that would improve the development and interdepartmental coordination of the policies of the United States under the United States-Canada Transboundary Resource Sharing Understanding for shared groundfish stocks."

NOTICES OF HEARINGS

COMMITTEE ON ENERGY AND NATURAL RESOURCES

Mr. BINGAMAN. Mr. President, I would like to announce for the information of the Senate and the public

that a hearing has been scheduled before the Subcommittee on National Parks.

The hearing will be held on Wednesday, October 28, 2009, at 2:30 p.m. in room SD-366 of the Dirksen Senate Office Building.

The purpose of the hearing is to receive testimony on the current and expected impacts of climate change on units of the National Park System.

Because of the limited time available for the hearing, witnesses may testify by invitation only. However, those wishing to submit written testimony for the hearing record should send it to the Committee on Energy and Natural Resources, United States Senate, Washington, DC 20510-6150, or by email to allison_seyferth@energy.senate.gov.

For further information, please contact Sara Tucker at (202) 224-6224 or Allison Seyferth at (202) 224-4905.

COMMITTEE ON ENERGY AND NATURAL RESOURCES

Mr. BINGAMAN. Mr. President, I would like to announce for the information of the Senate and the public that a hearing has been scheduled before the Subcommittee on Public Lands and Forests.

The hearing will be held on Thursday, October 29, 2009, at 2:30 p.m., in room SD-366 of the Dirksen Senate Office Building.

The purpose of the hearing is to receive testimony on the following bills:

S. 555, to provide for the exchange of certain land located in the Arapaho-Roosevelt National Forests in the State of Colorado, and for other purposes;

S. 607, to amend the National Forest Ski Area Permit Act of 1986 to clarify the authority of the Secretary of Agriculture regarding additional recreational uses of National Forest System land that are subject to ski area permits, and for other purposes;

S. 721, to expand the Alpine Lakes Wilderness in the State of Washington, to designate the Middle Fork Snoqualmie River and Pratt River as wild and scenic rivers, and for other purposes;

S. 1122, to authorize the Secretary of Agriculture and the Secretary of the Interior to enter into cooperative agreements with State foresters authorizing State foresters to provide certain forest, rangeland, and watershed restoration and protection services;

S. 1328 and H.R. 689, to interchange the administrative jurisdiction of certain Federal lands between the Forest Service and the Bureau of Land Management, and for other purposes;

S. 1442, to amend the Public Lands Corps Act of 1993 to expand the authorization of the Secretaries of Agriculture, Commerce, and the Interior to provide service-learning opportunities on public lands, establish a grant program for Indian Youth Service Corps, help restore the Nation's natural, cultural, historic, archaeological, recreational, and scenic resources, train a new generation of public land managers and enthusiasts, and promote the value of public service; and

H.R. 129, to authorize the conveyance of certain National Forest System lands in the Los Padres National Forest in California.

Because of the limited time available for the hearing, witnesses may testify by invitation only. However, those wishing to submit written testimony for the hearing record should send it to

the Committee on Energy and Natural Resources, United States Senate, Washington, DC 20510-6150, or by email to allison_seyferth@energy.senate.gov.

For further information, please contact Scott Miller at (202) 224-5488 or Allison Seyferth at (202) 224-4905.

AUTHORITY FOR COMMITTEES TO MEET

Mrs. SHAHEEN. Mr. President, I ask unanimous consent that the Committee on Commerce, Science, and Transportation be authorized to meet during the session of the Senate on October 15, 2009, at 2:30 p.m. in room 253 of the Russell Senate Office Building.

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

COMMITTEE ON FINANCE

Mrs. SHAHEEN. Mr. President, I ask unanimous consent that the Committee on Finance be authorized to meet during the session of the Senate on October 15, 2009, at 10 a.m., in room 215 of the Dirksen Senate Office Building.

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

COMMITTEE ON HEALTH, EDUCATION, LABOR, AND PENSIONS

Mrs. SHAHEEN. 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 "What Women Want: Equal Benefits for Equal Premiums" on October 15, 2009. The hearing will commence at 10:30 a.m. in room 430 of the Dirksen Senate Office Building.

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

COMMITTEE ON HOMELAND SECURITY AND GOVERNMENTAL AFFAIRS

Mrs. SHAHEEN. Mr. President, I ask unanimous consent that the Committee on Homeland Security and Governmental Affairs be authorized to meet during the session of the Senate on October 15, 2009, at 10 a.m. to conduct a hearing entitled "Domestic Partner Benefits: Fair Policy and Good Business for the Federal Government."

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

COMMITTEE ON THE JUDICIARY

Mrs. SHAHEEN. Mr. President, I ask unanimous consent that the Committee on the Judiciary be authorized to meet during the session of the Senate, on October 15, 2009, at 10 a.m., in the SD-226 of the Dirksen Senate Office Building, to conduct an executive business meeting.

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

SELECT COMMITTEE ON INTELLIGENCE

Mrs. SHAHEEN. Mr. President, I ask unanimous consent that the Select Committee on Intelligence be authorized to meet during the session of the Senate, on October 15, 2009, at 2:30 p.m.

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

SUBCOMMITTEE ON INTERNATIONAL DEVELOPMENT AND FOREIGN ASSISTANCE, ECONOMIC AFFAIRS, AND INTERNATIONAL ENVIRONMENTAL PROTECTION

Mrs. SHAHEEN. Mr. President, I ask unanimous consent that the Committee on Foreign Relations be authorized to meet during the session of the Senate on October 15, 2009, at 10 a.m., to hold a subcommittee hearing entitled "Drought, Flooding, and Refugees: Addressing the Impacts of Climate Change in the World's Most Vulnerable Nations."

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

SUBCOMMITTEE ON INTERNATIONAL OPERATIONS AND ORGANIZATIONS, HUMAN RIGHTS, DEMOCRACY, AND GLOBAL WOMEN'S ISSUES

Mrs. SHAHEEN. Mr. President, I ask unanimous consent that the Committee on Foreign Relations be authorized to meet during the session of the Senate on October 15, 2009, at 2:30 p.m., to hold a subcommittee hearing entitled "U.S. International Broadcasting into the War Zones: Iraq and Afghanistan."

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

PRIVILEGES OF THE FLOOR

Mr. BURRIS. Mr. President, I ask unanimous consent that Riley Roberts be granted the privileges of the floor for my presentation.

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

EXECUTIVE SESSION

EXECUTIVE CALENDAR

Mr. CASEY. Mr. President, I ask unanimous consent that the Senate proceed to executive session to consider Calendar Nos. 481, 482 and 483; that the nominations be confirmed en bloc, the motions to reconsider be laid upon the table en bloc; that no further motions be in order; that any statements relating to the nominations be printed in the RECORD as if read; provided further that the President be immediately notified of the Senate's action and the Senate return to legislative session.

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

The nominations considered and confirmed en bloc are as follows:

DEPARTMENT OF JUSTICE

Brendan V. Johnson, of South Dakota, to be United States Attorney for the District of South Dakota for the term of four years.

Karen Louise Loeffler, of Alaska, to be United States Attorney for the District of Alaska for the term of four years.

Steven Gerard O'Donnell, of Rhode Island, to be United States Marshal for the District of Rhode Island for the term of four years.

LEGISLATIVE SESSION

The PRESIDING OFFICER. The Senate returns to legislative session.

ORDERS FOR MONDAY, OCTOBER 19, 2009

Mr. CASEY. Mr. President, I ask unanimous consent that when the Senate completes its business today, it adjourn until 2 p.m. on Monday, October 19; 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 until 4:30 p.m., with Senators permitted to speak therein for up to 10 minutes each; that following morning business, the Senate resume consideration of the motion to proceed to S. 1776, the Medicare Physicians Fairness Act of 2009, under the previous order.

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

PROGRAM

Mr. CASEY. Mr. President, under the previous order, at 5:30 p.m., Monday, the Senate will proceed to vote on the motion to invoke cloture on the motion to proceed to S. 1776.

ADJOURNMENT UNTIL MONDAY, OCTOBER 19, 2009, AT 2 P.M.

Mr. CASEY. If there is no further business to come before the Senate, I ask unanimous consent that it adjourn under the previous order.

There being no objection, the Senate, at 5:59 p.m., adjourned until Monday, October 19, 2009, at 2 p.m.

NOMINATIONS

Executive nominations received by the Senate:

DEPARTMENT OF DEFENSE

CLIFFORD L. STANLEY, OF PENNSYLVANIA, TO BE UNDER SECRETARY OF DEFENSE FOR PERSONNEL AND READINESS, VICE DAVID S. C. CHU, RESIGNED.

DEFENSE NUCLEAR FACILITIES SAFETY BOARD

JESSIE HILL ROBERSON, OF VIRGINIA, TO BE A MEMBER OF THE DEFENSE NUCLEAR FACILITIES SAFETY BOARD FOR A TERM EXPIRING OCTOBER 18, 2013, VICE A. J. EGGENBERGER, RESIGNED.

JOSEPH F. BADER, OF THE DISTRICT OF COLUMBIA, TO BE A MEMBER OF THE DEFENSE NUCLEAR FACILITIES SAFETY BOARD FOR A TERM EXPIRING OCTOBER 18, 2012. (REAPPOINTMENT)

PETER STANLEY WINOKUR, OF MARYLAND, TO BE A MEMBER OF THE DEFENSE NUCLEAR FACILITIES SAFETY BOARD FOR A TERM EXPIRING OCTOBER 18, 2014. (REAPPOINTMENT)

FARM CREDIT ADMINISTRATION

JILL LONG THOMPSON, OF INDIANA, TO BE A MEMBER OF THE FARM CREDIT ADMINISTRATION BOARD, FARM CREDIT ADMINISTRATION, FOR A TERM EXPIRING MAY 21, 2014, VICE NANCY C. PELLET, TERM EXPIRED.

DEPARTMENT OF COMMERCE

SCOTT BOYER QUEHL, OF PENNSYLVANIA, TO BE AN ASSISTANT SECRETARY OF COMMERCE, VICE OTTO WOLFF, RESIGNED.

SCOTT BOYER QUEHL, OF PENNSYLVANIA, TO BE CHIEF FINANCIAL OFFICER, DEPARTMENT OF COMMERCE, VICE OTTO WOLFF, RESIGNED.

FEDERAL HOSPITAL INSURANCE TRUST FUND

CHARLES P. BLAHOUS, III, OF MARYLAND, TO BE A MEMBER OF THE BOARD OF TRUSTEES OF THE FEDERAL HOSPITAL INSURANCE TRUST FUND FOR A TERM OF FOUR YEARS, VICE THOMAS R. SAVING.

FEDERAL SUPPLEMENTARY MEDICAL INSURANCE TRUST FUND

CHARLES P. BLAHOUS, III, OF MARYLAND, TO BE A MEMBER OF THE BOARD OF TRUSTEES OF THE FEDERAL

SUPPLEMENTARY MEDICAL INSURANCE TRUST FUND FOR A TERM OF FOUR YEARS, VICE THOMAS R. SAVING.
FEDERAL OLD-AGE, SURVIVORS AND DISABILITY INSURANCE TRUST FUNDS

CHARLES P. BLAHOUS, III, OF MARYLAND, TO BE A MEMBER OF THE BOARD OF TRUSTEES OF THE FEDERAL OLD-AGE AND SURVIVORS INSURANCE TRUST FUND AND THE FEDERAL DISABILITY INSURANCE TRUST FUND FOR A TERM OF FOUR YEARS, VICE THOMAS R. SAVING.

FEDERAL HOSPITAL INSURANCE TRUST FUND

ROBERT D. REISCHAUER, OF MARYLAND, TO BE A MEMBER OF THE BOARD OF TRUSTEES OF THE FEDERAL HOSPITAL INSURANCE TRUST FUND FOR A TERM OF FOUR YEARS, VICE JOHN L. PALMER.

FEDERAL OLD-AGE, SUVIVORS AND DISABILITY INSURANCE TRUST FUNDS

ROBERT D. REISCHAUER, OF MARYLAND, TO BE A MEMBER OF THE BOARD OF TRUSTEES OF THE FEDERAL OLD-AGE AND SURVIVORS INSURANCE TRUST FUND AND THE FEDERAL DISABILITY INSURANCE TRUST FUND FOR A TERM OF FOUR YEARS, VICE JOHN L. PALMER.

FEDERAL SUPPLEMENTARY MEDICAL INSURANCE TRUST FUND

ROBERT D. REISCHAUER, OF MARYLAND, TO BE A MEMBER OF THE BOARD OF TRUSTEES OF THE FEDERAL SUPPLEMENTARY MEDICAL INSURANCE TRUST FUND FOR A TERM OF FOUR YEARS, VICE JOHN L. PALMER.

DEPARTMENT OF STATE

ANNE SLAUGHTER ANDREW, OF INDIANA, TO BE AMBASSADOR EXTRAORDINARY AND PLENIPOTENTIARY OF THE UNITED STATES OF AMERICA TO THE REPUBLIC OF COSTA RICA.

DEPARTMENT OF EDUCATION

LYNNAE M. RUTTLEDGE, OF WASHINGTON, TO BE COMMISSIONER OF THE REHABILITATION SERVICES ADMINISTRATION, DEPARTMENT OF EDUCATION, VICE JOANNE M. WILSON, RESIGNED.

UNITED STATES POSTAL SERVICE

ALAN C. KESSLER, OF PENNSYLVANIA, TO BE A GOVERNOR OF THE UNITED STATES POSTAL SERVICE FOR A TERM EXPIRING DECEMBER 8, 2015. (REAPPOINTMENT)

IN THE COAST GUARD

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE UNITED STATES COAST GUARD UNDER TITLE 14, U.S.C., SECTION 271:

To be lieutenant commander

JENNIFER L. ADAMS
RODERICK D. ADAMS
MARCUS E. ALDEY
JASON C. ALEKSAK
JOHN G. ALLEN
KIMBERLY B. ANDERSEN
JONATHAN A. ANDRECHIK
SHAMEEN E. ANTHANIO-WILLIAMS
LAHCEN I. ARMSTRONG
JOHN H. AXTELL
RENE BAZZ
FLAVIO E. BALTAZAR
TIMOTHY G. BALUNIS
KEVIN M. BARKLAGE
JASON P. BARRETT
BRYAN M. BEGIN
CHRIS J. BELMONT
ANDREW F. BENDER
KENNETH E. BETHEA
JULIE Y. BETHKE
BRIAN R. BETZ
IAN G. BIRD
VANESSA BLACKMORE
MARK A. BLAESI
JOHN D. BLOCK
MICHAEL A. BLOCK
STEVEN M. BONN
CHRISTOPHER L. BONNER
JOHN C. BOURCET
JASON T. BOYLE
JASON P. BRAND
BRIAN P. BREGUET
DANIEL L. BREHM
STEPHANIE E. BRENNELL
WILLIAM C. BRENT
SHANE D. BRIDGES
JOHN W. BRIGGS
PEGGY M. BRITTON
DANIEL M. BROADHURST
DARKEIM L. BROWN
DANIEL G. BUCHSBAUM
VINCENT J. BUKOWSKI
CHRISTOPHER G. BURRUS
ROBERT S. BUTTS
JERRY D. BUTWID
JEFFREY P. CABELL
MARCUS A. CANADY
RONALD J. CAPUTO
CATHERINE T. CARABINE
KEVIN R. CARLSON
MARIE M. CASTILLO—BLETSO
GEORGE B. CATHY
MATTHEW M. CHONG
JOHN J. CHRISTENSEN
MICHAEL A. CINTRON
AUSTIN H. COHOON
ANGELA A. COOK
JOHN M. CORBETT

NATHAN E. COWALL
JEFFREY L. CRAIG
KEVIN A. CRECY
JOHN A. CURREN
HAI X. DANG
MICHAEL V. DANISH
WILLIAM L. DAVIS
RULA F. DEISHER
CHRISTOPHER J. DELAMERE
ETIENNE DELARIVA
AARON W. DEMO
MATTHEW C. DERRENBACHER
JOYCE M. DIETRICH
KELLY L. DIETRICH
PATRICK C. DILL
SARA E. DILUNA
DAVID D. DIXON
RICHARD H. DIXON
ROBERT J. DONNELL
TAD F. DROZDOWSKI
JEFFERY A. DRZEWIECKI
SHAUN L. EDWARDS
JOHN T. EGAN
KENNETH W. ELLER
SHAWN G. ESSERT
BRIAN M. FARMER
DAVID T. FEENEY
KRISTOPHER S. FEGLER
MATHEW S. FINE
JOHN M. FIORENTINE
MICHAEL R. FRANKLIN
WILLIAM A. FRIDAY
HSINGYEN J. FU
JOSHUA M. FULCHER
MICHAEL P. GARVEY
DAVID R. GATES
MARCUS G. GHERARDI
MEREDITH S. GILLMAN
ZACHARY N. GLASS
TROY P. GLENDYNE
CARY G. GODWIN
HAYDEN J. GOLDMAN
EYANGELINE R. GORMLEY
HARRY L. GREENE
WILLIAM M. GROSSMAN
KENT D. HALEY
STEVEN J. HALPIN
RYAN C. HAMEL
LUSHAN A. HANNAH
AMANDA D. HARGRAVE
DAVID W. HATCHETT
DERRICK F. HENDRICKSON
MICHAEL P. HENNESSY
ANGELINA HIDALGO
KATE F. HIGGINS
KEVIN S. HILL
BRENNIN J. HILLEARY
JESSE C. HOLSTON
TIMOTHY C. HOLT
DEAN E. HORTON
JASON D. INGRAM
JEFFREY S. JACKSON
JUSTIN W. JACOBS
STEVEN F. JENSEN
ERIC D. JOHNSON
KAREN S. JONES
KAREN L. JORDAN
MICHAEL P. KAHL
NICHOLAS A. KALIN
BENJAMIN G. KARPINSKI
CHRISTOPHER M. KEENE
NATHAN P. KENDRICK
DANIEL J. KENNEDY
MAEVY K. KEOGH
DAVID M. KESSLER
TERRI J. KINDNESS
MATTHEW D. KING
ROBERT J. KINSEY
SEAN D. KRUEGER
PAUL M. LALICATA
DANIEL P. LANIGAN
JOHN M. LEACH
JOHNDAVID A. LENTINE
EDDIE LESANE
JUNE E. LESHNOVER
RACHEL L. LEWIS
PATRICK M. LINEBERRY
SCOTT E. LUGO
MICHAEL C. LUNASIN
PATRICK J. LYSAGHT
SCOTT M. MACCUMBEE
GREGORY J. MADALENA
BRIAN J. MAGGI
JILLIAN C. MALZONE
MATTHEW C. MANOFOSKY
CARYN A. MARGITA
TIMOTHY J. MARGITA
BRYAN A. MARKLAND
DAVID J. MARKAMA
ELIZABETH L. MASSIMI
ZACHARY S. MATHEWS
ERIC S. MAY
STEVEN J. MCCULLOUGH
MARK A. MCDONNELL
BONNIE C. MCMILLAN
SHAWN C. MCMILLAN
BRIAN K. MCNAMARA
ADAM C. MERRILL
MATTHEW A. MICHAELIS
BARRY J. MILES
CAROLYN L. MOBERLEY
ROBERT S. MOHR
YOUNGMEE MOON
PETER M. MORISSEAU
CHARLOTTE MUNDY
BRIAN J. MURPHY
CRAIG E. MURRAY

NICHOLAS E. NEELY
DAVID NEGRON-ALICEA
MARK C. NELSON
MARSHALL E. NEWBERRY
FRANK G. NOLAN
NEIL ORLICH
AARON J. ORTENZIO
BRANDY N. PARKER
MARK B. PATTON
ELIZABETH T. PLATT
BRIAN A. POTTER
STEPHEN C. PRIEBE
LIBBY J. PRUITT
ANTHONY J. QUIRINO
MARC A. RANDOLPH
TOBIAS C. REID
RODNEY RIOS
DUANE B. RIPLEY
NELSON Y. RIVERA
ROBERTO RIVERA
NICOLE D. RODRIGUEZ
AARON J. ROE
DANIEL P. ROGERS
SCOTT P. ROOKE
MORGAN H. ROPER
JESSICA A. ROZZI-OCES
MICHAEL D. RUSSELL
MATTHEW G. SANFORD
MICHELE L. SCHALLIP
SHADRACK L. SCHEIRMAN
STEVEN A. SCHULTZ
TYSON J. SCOFIELD
GARY R. SCOTT
KRISTEN L. SERUMGARD
THOMAS A. SHULER
EMMA E. SILCOX
JAMES H. SILCOX
NICHOLAS R. SIMMONS
MARTIN C. SIMPSON
STEVEN A. SKAGGS
ERIK D. SKOW
KEVIN M. SLIGH
BRIAN A. SMICKLAS
DAVID G. SMITH
JAMES J. SMITH
MARC H. SMITH
TIMOTHY C. SOMMELLA
BRYSON T. SPANGLER
WILLIAM R. SPORTSMAN
NICOLE A. STARR
JONATHAN K. STEHN
RICHARD W. STICKLEY
MICHAEL R. STONE
HEATHER E. STRATTON
MICHAEL R. STRUTHERS
CHRISTOPHER W. SWEENEY
KRIS J. SZCZECHEWICZ
MICHAEL A. TEIXEIRA
DONALD M. TERKANKIAN
BRIAN J. TESSON
KELLY A. THORKILSON
LEE D. TITUS
CHRISTOPHER A. TREIB
CHARTER B. TSHIRGI
ROBERT C. TUCKER
PATRICIA J. TUTALO
ANDREW J. VANSKI
JOSE L. VARGAS
NICOLETTE A. VAUGHAN
XAIMARA VICENCIO-ROLDAN
JERAMY J. WAHRMUND
WILLIAM C. WALSH
MARC D. WARREN
ROBERT D. WEBB
BRIAN R. WILLSON
WINSTON D. WOOD
JESSICA S. WORST
ANDREW W. WRIGHT
BRENT C. YEZEFSKI
YAMASHEKA Z. YOUNG
BRADFORD W. YOUNGKIN

IN THE ARMY

THE FOLLOWING NAMED OFFICER FOR APPOINTMENT IN THE UNITED STATES ARMY TO THE GRADE INDICATED WHILE ASSIGNED TO A POSITION OF IMPORTANCE AND RESPONSIBILITY UNDER TITLE 10, U.S.C., SECTION 601:

To be lieutenant general

MAJ. GEN. KEITH M. HUBER

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT IN THE UNITED STATES ARMY TO THE GRADE INDICATED UNDER TITLE 10, U.S.C., SECTION 624:

To be major general

BRIGADIER GENERAL JOSEPH J. ANDERSON
BRIGADIER GENERAL MARK S. BOWMAN
BRIGADIER GENERAL ROBERT B. BROWN
BRIGADIER GENERAL ROBERT M. BROWN
BRIGADIER GENERAL EDWARD C. CARDON
BRIGADIER GENERAL WALTER L. DAVIS
BRIGADIER GENERAL GENARO J. DELLAROCCHIO
BRIGADIER GENERAL WILLIAM F. GRIMSLEY
BRIGADIER GENERAL MICHAEL T. HARRISON, SR.
BRIGADIER GENERAL DAVID R. HOGG
BRIGADIER GENERAL KARL R. HORST
BRIGADIER GENERAL REUBEN D. JONES
BRIGADIER GENERAL BRIAN A. KELLER
BRIGADIER GENERAL STEPHEN R. LANZA
BRIGADIER GENERAL MICHAEL S. LINNINGTON
BRIGADIER GENERAL FRANCIS G. MAHON
BRIGADIER GENERAL JOSEPH E. MARTZ
BRIGADIER GENERAL WILLIAM C. MAYVILLE, JR.
BRIGADIER GENERAL JAMES C. MCCONVILLE

BRIGADIER GENERAL JAMES M. McDONALD
 BRIGADIER GENERAL PHILLIP E. MCGHEE
 BRIGADIER GENERAL PATRICIA E. MCQUISTON
 BRIGADIER GENERAL WILLIAM N. PHILLIPS
 BRIGADIER GENERAL DANA J. H. PITTARD
 BRIGADIER GENERAL DAVID E. QUANTOCK
 BRIGADIER GENERAL MICHAEL S. REPASS
 BRIGADIER GENERAL TODD T. SEMONITE
 BRIGADIER GENERAL THOMAS W. SPOEHR
 BRIGADIER GENERAL KURT J. STEIN
 BRIGADIER GENERAL MICHAEL J. TERRY
 BRIGADIER GENERAL SIMEON G. TROMBITAS
 BRIGADIER GENERAL KEITH C. WALKER
 BRIGADIER GENERAL MICHAEL J. WALSH
 BRIGADIER GENERAL PERRY L. WIGGINS

IN THE NAVY

THE FOLLOWING NAMED OFFICER FOR APPOINTMENT IN THE UNITED STATES NAVY TO THE GRADE INDICATED WHILE ASSIGNED TO A POSITION OF IMPORTANCE AND RESPONSIBILITY UNDER TITLE 10, U.S.C., SECTION 601:

To be vice admiral

VICE ADM. HARRY B. HARRIS, JR.

IN THE AIR FORCE

THE FOLLOWING NAMED OFFICER FOR REGULAR APPOINTMENT IN THE GRADE INDICATED IN THE UNITED STATES AIR FORCE UNDER TITLE 10, U.S.C., SECTION 531:

To be lieutenant colonel

CHRISTOPHER J. OGRADY

THE FOLLOWING NAMED OFFICER FOR REGULAR APPOINTMENT IN THE GRADE INDICATED IN THE UNITED STATES AIR FORCE UNDER TITLE 10, U.S.C., SECTION 531:

To be lieutenant colonel

MICHAEL R. SPENCER

THE FOLLOWING NAMED OFFICERS FOR REGULAR APPOINTMENT IN THE GRADES INDICATED IN THE UNITED STATES AIR FORCE UNDER TITLE 10, U.S.C., SECTION 531:

To be lieutenant colonel

SCOTT A. PAFFENROTH
 EDWARD D. SOMMERS

To be major

PATRICK B. OATES

ROBERT M. TAYLOR

THE FOLLOWING NAMED INDIVIDUALS FOR APPOINTMENT TO THE GRADE INDICATED IN THE REGULAR AIR FORCE UNDER TITLE 10, U.S.C., SECTION 531(A):

To be major

MISAEEL C. ALONSO
 SHARON M. DAY
 ROBYN T. KARMER
 DERRICK B. WILLSEY

THE FOLLOWING NAMED INDIVIDUALS FOR APPOINTMENT TO THE GRADE INDICATED IN THE REGULAR AIR FORCE UNDER TITLE 10, U.S.C., SECTION 531(A):

To be major

DANA J. ALBALATE
 JOSEPH H. BOYLE
 JAMES D. COLLINS
 PATRICK L. LANAGHAN
 ROBERT R. LIU
 LUZ E. RODRIGUEZ

IN THE ARMY

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE RESERVE OF THE ARMY UNDER TITLE 10, U.S.C., SECTION 12203:

To be colonel

KENNETH E. LAWSON
 KRISTINA D. MOELLER

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE RESERVE OF THE ARMY UNDER TITLE 10, U.S.C., SECTION 12203:

To be colonel

LAWRENCE C. DENNIS
 ROBERT L. GUY
 WILLIAM C. HENSEN
 RONALD E. MARTINMINNICH
 JOHN H. TATUM

THE FOLLOWING NAMED OFFICERS FOR APPOINTMENT TO THE GRADE INDICATED IN THE RESERVE OF THE ARMY UNDER TITLE 10, U.S.C., SECTION 12203:

To be colonel

BARRY R. BARON
 ROBERT M. EPPERLY

EDWARD M. GRICE
 DOUGLAS B. JONES
 RICHARD I. MAESTAS
 PATRICK J. MORGAN
 JAMES C. ODELL
 MARK F. PLAUSHIN
 WILLIAM H. RALSTON
 GEORGE D. ROBERTS
 PETER E. SOUSA
 JEREMY N. STEINBERG
 ISTVAN SZASZ, JR.

IN THE NAVY

THE FOLLOWING NAMED OFFICER FOR APPOINTMENT IN THE GRADE INDICATED IN THE REGULAR NAVY UNDER TITLE 10, U.S.C., SECTION 531:

To be lieutenant commander

RAUL L. BARRIENTOS

THE FOLLOWING NAMED INDIVIDUALS FOR APPOINTMENT TO THE GRADE INDICATED IN THE UNITED STATES NAVY RESERVE UNDER TITLE 10, U.S.C., SECTION 12203:

To be captain

RICARDO B. EUSEBIO
 DAVID G. MALONE
 DAVID W. TERHUNE
 DAVID L. WILKEY

CONFIRMATIONS

Executive nominations confirmed by the Senate, Thursday, October 15, 2009:

DEPARTMENT OF JUSTICE

BRENDAN V. JOHNSON, OF SOUTH DAKOTA, TO BE UNITED STATES ATTORNEY FOR THE DISTRICT OF SOUTH DAKOTA FOR THE TERM OF FOUR YEARS.

KAREN LOUISE LOEFFLER, OF ALASKA, TO BE UNITED STATES ATTORNEY FOR THE DISTRICT OF ALASKA FOR THE TERM OF FOUR YEARS.

STEVEN GERARD O'DONNELL, OF RHODE ISLAND, TO BE UNITED STATES MARSHAL FOR THE DISTRICT OF RHODE ISLAND FOR THE TERM OF FOUR YEARS.