

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

HEALTH CARE WEEK XIV, DAY 1

Mr. MCCONNELL. Mr. President, I don't know of a single person who wants to see reimbursements cut to doctors who treat Medicare patients, but if Congress is going to step in and prevent it, we shouldn't do it by racking up more debt on the government's credit card.

On Friday, the Treasury Department announced that the government ran a deficit of \$1.4 trillion in the fiscal year that ended just a few weeks ago—a deficit about three times the size of the previous alltime high. This should have been a wake-up call but, instead, within days of the sobering proof of Congress's chronic inability to live within its means, Democrats in Congress want to borrow another \$¼ trillion to keep doctors from getting a pay cut. Republicans want to fix this problem as well, but there are ways to pay for it. When this matter comes before the Senate, Republicans will offer ways to pay for it without asking taxpayers to take on another \$¼ trillion in debt.

It is perfectly obvious why Democrats want to resolve this issue outside the larger debate over health care. They are doing it so they can say their health care plan doesn't add to the deficit. It is a gimmick and a transparent one at that.

Americans are tired of gimmicks and tired of Congress putting everything on the national charge card. We are not teenagers. Our parents aren't going to pay our bill at the end of the school year. The American people—our children and grandchildren—are the ones getting stuck with the bill. It is time we act as if we are aware of that.

Higher debt is just one aspect of the Democrats' health care plan that concerns Americans. At the outset of this debate, everyone agreed on one thing: Any reform would have to address the primary problem with health care; that is, cost. Yet every day we hear about some accounting gimmick that is being used to conceal the true cost of this bill, and now we are hearing it will drive up premiums as well.

The Director of the independent, non-partisan Congressional Budget Office, Doug Elmendorf, indicated in recent congressional testimony that parts of the Finance Committee proposal would lead to higher premiums; in other words, that health care costs would go up, not down. As a result of the Democrats' latest health care proposal, that is exactly what will happen. This is a proposal that is only going to get more expensive as the process moves forward in closed-door discussions between a handful of Democratic lawmakers and the White House. This is what the American people have feared all along, that lawmakers would lose sight of the purpose of reform and end up making problems worse, not better.

The Finance Committee bill includes a new tax on health insurance that most experts, including the CBO, agree would be passed straight to consumers, leading to higher premiums. One estimate suggests this new tax on insurance plans will be passed on to families, costing them nearly \$500 per year in higher premiums starting next year, long before any of the purported benefits of reform would take effect. The Oliver Wyman Group, an international management consulting firm, has also looked at how the Finance Committee bill would impact premiums in a number of States. This is important because every State has different insurance laws. In States such as Kentucky, Arizona, and Virginia, which have flexible insurance laws and generally lower premiums, the impact would be dramatic.

Currently, the average family premium in those States is about \$9,500 a year. Under the Baucus plan, that premium is expected to rise to nearly \$17,000. That is \$7,500 more that the government is telling families they have to spend on health insurance. That is \$7,500 these families can't use for the college fund or to plan for retirement. While the Baucus plan may subsidize some insurance plans, the subsidies likely will not be enough to offset these massive new costs imposed on many of these families.

The bottom line is this: The Finance Committee bill has now been out for a few weeks. The experts are starting to estimate what it would mean for insurance premiums. What we have seen so far isn't good. This is precisely why Americans want us to debate these bills out in the open. This is why they want us to take our time until the true cost is known. This is why they should have ample time to look at proposed changes before Congress acts.

We knew this proposal would raise taxes. We knew it would slash Medicare. Now we know it will raise health insurance premiums. Americans support reform, but higher premiums, higher taxes, and cutting Medicare, that is not reform.

GAG RULE

Mr. President, the administration made a noteworthy admission over the weekend. In a late afternoon memo on Friday, the Department of Health and Human Services said health plans could now communicate with seniors about pending legislation that affects them. By lifting its prior ban on communicating the impact of Democratic plans for health care, the administration was admitting—admitting—the ban amounted to a gag rule, a gag rule that has no place in a society that prizes free speech and open debate. The administration's reversal is certainly welcome and, frankly, not unanticipated. However, many questions remain about the initial order itself and about the administration's willingness to constrain the free flow of information to seniors about their health care. The administration has admitted its

error, though its proposed solution, frankly, needs further review.

The fact is, what health plans were telling seniors is precisely what the Congressional Budget Office also said; namely, that Democratic health care plans could cause seniors with Medicare Advantage to lose benefits—the absolute truth.

Americans believe strongly in the importance of the first amendment. I am glad to see the administration has recognized the error of its ways and rescinded this gag rule in the midst of such an important national debate.

I suggest the absence of a quorum.

The ACTING PRESIDENT pro tempore. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

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

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

RESERVATION OF LEADER TIME

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

MORNING BUSINESS

The ACTING PRESIDENT pro tempore. The Senate will be in a period of morning business until 4:30 p.m., with Senators permitted to speak for up to 10 minutes each.

The Senator from Arizona is recognized.

START TREATY

Mr. KYL. Mr. President, I wish to speak to an issue that is very timely because the United States and Russia are beginning today their seventh round of negotiations on the so-called START treaty. This is a treaty that could limit the number of nuclear warheads and delivery vehicles by both countries and provide an extension of various compliance and verification procedures that are currently followed by both countries.

It is interesting to me that the Russians do not appear to be in much of a hurry to complete the negotiations before the treaty expires, and it expires on December 5 of this year. According to Assistant Secretary of State Richard Verma, in a letter to me and several fellow Senators, I quote:

Russian views with respect to the meaning of these two terms—

And he is specifically talking about the definitions of “strategic delivery vehicle” and “associated warheads,” both of which are obviously key to the treaty, in any event—

Russian views with respect to the meaning of these two terms have not yet been fully explained by the Russian Federation.

We are in the seventh round of negotiations, as I said. When these two fundamental terms have not yet had an