in the world. I am not blind to the fact that our health care system has failings. I have seen them firsthand. We can fix a broken system in a way that actually works to get costs down, to get more people covered, to give people more choice, and carry out this plan, not in this atrocious plan which raises taxes, cuts Medicare, and takes away choices from the American people.

CONCLUSION OF MORNING BUSINESS

The PRESIDING OFFICER. Morning business is closed.

CAREGIVERS AND VETERANS OMNIBUS HEALTH SERVICES ACT OF 2009

The PRESIDING OFFICER. Under the previous order, the Senate will proceed to the consideration of S. 1963, which the clerk will report.

The assistant bill clerk read as follows:

A bill (S. 1963) to amend title 38, United States Code to provide assistance to caregivers of veterans, to improve the provision of health care to veterans, and for other purposes.

The PRESIDING OFFICER. The Senator from Oklahoma.

AMENDMENT NO. 276

Mr. COBURN. Mr. President, I call up amendment No. 2785.

The PRESIDING OFFICER. The clerk will report.

The assistant bill clerk read as follows:

The Senator from Oklahoma [Mr. COBURN] proposes an amendment numbered 2785.

Mr. COBURN. Mr. President, I ask unanimous consent that I be permitted to use my time on the bill and my time on the amendment as necessary.

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

The amendment is as follows:

(Purpose: To transfer funding for United Nations contributions to offset costs of providing assistance to family caregivers of disabled veterans

On page 177, after line 10, add the following:

SEC. 1005. REQUIREMENT TO TRANSFER FUNDING FOR UNITED NATIONS CONTRIBUTIONS TO OFFSET COSTS OF PROVIDING ASSISTANCE TO FAMILY CAREGIVERS OF DISABLED VETERANS

The Secretary of State shall transfer to the Secretary of Veterans Affairs, out of amounts appropriated or otherwise made available in a fiscal year for “Contributions to International Organizations” and “Contributions for International Peacekeeping Activities”, such sums as the Secretaries jointly determine are necessary to carry out the provisions of this Act and the amendments made by this Act.

SEC. 1004. MODIFICATION OF ELIGIBILITY FOR FAMILY CAREGIVER ASSISTANCE

(a) LIMITATION.—Section 1717A(b), as added by section 102 of this Act, is amended—

(1) in paragraph (1), by striking “and” at the end;

(2) in paragraph (2)(C), by striking the period at the end and inserting “; and”;

and

(3) by adding at the end the following new paragraph:

“(3) who, in the absence of personal care services, would require hospitalization, nursing home care, or other residential care.”.

(b) EXPANSION.—Such section 1717A(b) is further amended—

(1) by striking “on or after September 11, 2001”;

Mr. COBURN. Inquiry, Mr. President.

It is my understanding that I am going to have to use my time on the bill and my time on the amendment as necessary.

The PRESIDING OFFICER. The Senator is correct.

Mr. COBURN. I reserve the remainder of my time and yield to the chairman and ranking member.

The PRESIDING OFFICER. The Senator from Hawaii.

Mr. AKAKA. Mr. President, I ask unanimous consent that I be permitted to use my time on this bill.

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

Mr. AKAKA. Mr. President, as chairman of the Senate Committee on Veterans’ Affairs, I had the honor of speaking at the World War II Memorial this past Veterans Day. As I stood there remembering my own comrades and their families, I thought of what the brave men and women in the service give up every day so we can enjoy the freedoms that come with American citizenship.

It is in that spirit that I urge this body to pass S. 1963, the Caregivers and Veterans Omnibus Health Services Act of 2009 without further delay.

The Nation’s young veterans coming home from Iraq and Afghanistan have faced a new and terrifying kind of warfare, characterized by improvised explosive devices, sniper fire and counterinsurgencies. Military medicine, fortunately, is saving more of these young servicemembers’ lives than ever before.

In World War II, 30 percent of Americans injured died. In Vietnam, 24 percent died. In the wars in Iraq and Afghanistan, about 10 percent of those injured have died.

As more of the catastrophically disabled are surviving to return home, more will require a lifetime of care. With our decision on S. 1663, we decide whether that care will be in their homes with the help of their family members or in institutions. If we want that care to be in the home, we need to help the families shoulder the burden of providing it.

During the prior administration, the President’s Commission on Care for America’s Returning Wounded Warriors—known as the Dole-Shalala Commission—found that 21 percent of Active Duty, 15 percent of Reserves, and 24 percent of retired or separated servicemembers who served in the Iraq or Afghanistan conflicts said friends or family members gave up a job to be with them or to act as their caregiver.

By giving up a job, caregivers often give up health insurance, when they need it the most.

Studies also show family caregivers experience an increased likelihood of stress, depression, and mortality, compared to their noncaregiving peers.

Without a job, without health insurance, and in very stressful situations, family caregivers have worked to fulfill the Nation’s obligation to care for its disabled warriors.

S. 1963 would give these caregivers health care, counseling, support, and a living stipend. The bill would provide caregivers with a stipend equal to what a home health agency would pay an employee to provide care. It would give the caregivers health care and make mental health services available to them.

The bill also provides for respite care so caregivers can return to care for these veterans with renewed vigor and energy. It lets these young veterans return to their families and not to a nursing home.

While the caregiver program in this legislation will be limited at first to the veterans of the Iraq and Afghanistan wars, other provisions of the bill improve health care for all veterans.

There are provisions which make health care quality a priority, strengthen the credentialing and privileging requirements of VA health care providers, and require the VA to better oversee the quality of care provided in individual VA hospitals and clinics.

The bill will also improve care for homeless veterans, veterans who live in rural areas, and veterans who suffer from mental illness.

About 131,000 veterans are homeless. S. 1963 would help these veterans obtain housing, pension benefits, and other supportive services. It would provide financial assistance to organizations that help homeless veterans.

Seventeen percent of servicemembers are now women. This legislation contains a number of provisions which are designed to improve the care and services provided to women veterans.

It would provide for the training of mental health professionals in the treatment of mental sexual trauma and provide care for the newborn children of servicewomen. It would give women veterans a quality of care they have earned through their service to this country.

The bill also provides new assistance to veterans who live in rural areas. According to the VA, of the 8 million veterans enrolled in VA health care, about 3 million live in rural areas. This legislation would bring more services into rural communities through telemedicine and increased recruitment and retention incentives for health care providers. It also would increase the VA’s ability to use volunteers at veteran centers and create centers of excellence for rural health.

Finally, S. 1963 addresses the signature injuries of this war—PTSD and traumatic brain injury. According to a recent RAND report, one in five veterans returning from Iraq and Afghanistan will develop post-traumatic stress disorder. Countless others will suffer from traumatic brain injury and face
significant problems in readjusting to life at home. Many studies have shown the importance of early intervention to the effective treatment of these invisible wounds.

This legislation contains provisions that allow Active-Duty military to seek mental health services at vet centers and increase access to care for veterans with traumatic brain injury.

Before concluding, I wish to share one of the many stories I have heard as I have worked to move this legislation through the Senate.

SOT Ted Wade sustained a severe brain injury after his humvee was hit by an improvised explosive device in Iraq. His right arm was completely severed above the elbow, and he also suffered a fractured leg, broken right foot, and visual impairment, among other injuries.

His wife Sarah Wade became his caregiver and a dedicated advocate for her husband and for others who are providing caregiver services.

In testimony before the House Veterans’ Affairs Committee earlier this year, Ms. Wade made the point that:

Young veterans with catastrophic injuries need long-term care for as long as the injuries they sustained in service to their country. Just like servicemembers need a team in the military to accomplish the mission, they need a team at home for the longer war.

I agree completely with that view. Veterans need all the support we can provide. We, as a country, can give them options that veterans of my generation never had. We can give them the option to really come home.

To those who are concerned about the cost of this legislation, I say we cannot turn our back on the obligation to care for those who fought in the current wars. When we as a body vote to send American troops to war, we have promised to care for them when they return.

I firmly believe the cost of veterans benefits and services is a true cost of war and must be treated as such.

I ask that our colleagues accept no more delays and act on this important legislation.

Mr. President, I reserve the remainder of my time and yield the floor.

The PRESIDING OFFICER. The Senator from North Carolina.

Mr. BURR. Mr. President, I thank and congratulate the chairman of the VA Committee. This is important legislation, and I think the work this body is doing is in the best interest of our veterans. We fight these wars, and we want to make sure our veterans are taken care of properly.

I rise in support of S. 1152, the Caregivers and Veterans Omnibus Health Services Act of 2009. This is actually the combination of two bills reported out of the Veterans’ Affairs Committee this year, and it did enjoy bipartisan support.

The centerpiece of the legislation is the support it would provide to caregivers of severely injured veterans of current wars. The bill would provide counseling, support, living stipends, and health care for those caregivers.

As my colleagues know, family caregivers play an extremely important role and, I might say, a unique role in helping to meet the severe needs of our injured veterans’ personal care needs. For some veterans, family members serve as their primary caregiver; some of whom have lost their jobs but, more importantly, have lost their health care as a result of that commitment to that family member.

As the chairman spoke about a service member he had remembered in this—Ted Wade is a North Carolina— he made the same impression with me. I also think about caregivers Edgar and Beth Edmundson from North Carolina as well, the parents of Eric Edmundson, a severely injured veteran from Operation Iraqi Freedom. They have been caring for Eric since the day he was injured. A hospital took Eric out of a VA hospital because the VA basically had come to the point where they said they could not improve Eric’s life.

After Eric was injured on patrol along the Iraqi/Syrian border, he went into cardiac arrest while he was awaiting transport to Germany. It was in fact that cardiac arrest, that traumatic brain injury, that put Eric in a situation where he couldn’t walk and he couldn’t talk. He couldn’t walk and he couldn’t talk.

Eric’s father stepped to the plate and immediately began researching all the options for Eric’s treatment. Despite being told his son would not emerge from his vegetative state, Ed Edmundson pushed on. He sold his house, he cashed in his savings and retirement pay, all in an effort to provide Eric 24-hour care as a father.

Under his father’s constant attention and relentless pursuit of new options, Eric received the treatment he needed. Without his dad’s commitment, without the commitment of the rest of Eric’s family—who basically dropped everything else important in life to focus on his needs—Eric would not be doing as well as he is today. I might say he walks and he talks and he can communicate.

His family and his parents believe in him, and he believes in what they could accomplish.

Let me tell you the rest of the story. Beth, Eric’s mom, recently suffered a compound fracture of her ankle while caring for Eric’s daughter Gracie. Because Beth and Ed have no health insurance, they are on the hook for $36,000 worth of medical bills. Had Eric chosen Beth, his mother, as his caregiver, that would have been the effect. We would have provided coverage for Beth to have health care coverage. I believe that is what this legislation is about—recognizing the individuals who make life-altering commitments to members of their family or service members who, without that commitment, might not have the quality of life they have.

As I mentioned, assistance to caregivers is just one part of this bill. Other provisions would remove barriers to emergency care provided to veterans at non-VA facilities. It would expand health care services for women veterans, provide additional outreach to veterans in rural communities, provide additional improvements in mental health care services provided to veterans, enhance services to homeless veterans, improve the ability of VA to recruit and retain the needed health care professionals, authorize major medical facility construction projects, test a concept I introduced of providing veterans and their survivors with dental coverage, and much more.

This is a good bill. It is not perfect. It is not comprehensive. It does not do everything I wish it would do. But it is a bill we, as Senate colleagues, strongly consider supporting the amendment of Senator Coburn, and I think it should pass.

When the committee passed this bill, it would not limit it to current veterans of current wars; we would provide coverage for all veterans. Since it came out of committee in a bipartisan way, we have narrowed it down not to include all veterans. The amendment of Senator Coburn expands it to all veterans.

When the committee considered the caregiver bill, we considered it because we wanted to keep veterans out of nursing homes. That was the goal, to give them an alternative because the traditional role of the nursing long-term care facilities had not worked at improving the quality of care and the quality of life for these veterans. That was our goal.

Senator Coburn brings some definition to who is eligible for this based on the fact that there would be a need to head toward a home. We may think a little bit with the definition as to whether it is exclusive or totally as inclusive as we would like, but make no mistake, it is not different from the intent of the committee as to why the committee passed the caregivers act.

Let me mention one probably the most important piece of the amendment of Senator Coburn. It actually pays for what we are doing. We say the Veterans Administration shall.' There is no money we have already appropriated and let’s shift it? This is something that we, the Senate, but it is called prioritizing. Let’s prioritize where the Federal investment should go. Let’s make sure we pass the Caregivers and
Health Care Act. Let's make sure we pay for it with the Coburn amendment, and let's pull that money out of already-appropriated funds so we can not only look at our veterans, but we can look at our children and tell them this is a good bill.

I yield the floor.

The PRESIDING OFFICER. The Senator from Hawaii.

Mr. AKAKA. Mr. President, I yield 10 minutes to the Senator from Washington, Mrs. Murray.

The PRESIDING OFFICER. The Senator from Washington is recognized.

Mrs. MURRAY. Mr. President, last week many of us spent time back home celebrating our veterans and honoring the great sacrifices they made for our country. I had the opportunity to commemorate Veterans Day at the Tahoma National Cemetery in Kent, WA. It was truly an honor to stand with veterans and their families as we paid our service to them.

This recognition is important, it is certainly deserved, but it is not enough. We owe it to our veterans to make sure our commitment to them extends beyond Veterans Day and that they have access to the health care and services they earned.

Growing up, I saw firsthand the many ways that military service can affect both veterans and their families. My father served in World War II. He was one of the first soldiers to land in Okinawa as a discharge veteran, and he was awarded the Purple Heart.

Like many soldiers of his generation, my dad did not talk about his experiences to us when he came home. In fact, we only learned about them by reading his journals after he passed away. That experience offered me a much larger lesson about veterans in general.

They are reluctant to call attention to their service. They are reluctant to ask for help. That is why we have to publicly recognize their sacrifices and contributions. It is up to us to make sure they get the recognition they have earned. Our veterans held up their end of the deal, now we have to hold up ours.

As a member of the Veterans’ Affairs Committee, I am keenly aware that we have a lot of work to do for the men and women who served us. Not only must we continually strive to keep up our commitments to veterans from all wars, but we have to also respond to the new and very different issues facing veterans who are returning from Iraq and Afghanistan today, wars that are being fought under conditions that are very different from the ones in the past.

That is precisely what the caregivers and veterans omnibus health bill that is before us today aims to do.

One of the changes we have seen in our veterans population recently is the growing number of women veterans who are seeking care at the VA. Today more women are serving in the military than ever before, and over the next 5 years, in fact, the number of women seeking care at the VA is expected to double. Not only are women answering the call to serve at unprecedented levels, they are also serving in a very different capacity.

In Iraq and Afghanistan, we have seen wars that do not have traditional front lines; therefore, all of our servicemembers, including women, find themselves on the front lines. So whether it is the check points or helping to search and clear neighborhoods or supporting supply convoys, women servicemembers face many of the same risks from IEDs and ambushes as their male counterparts.

But while the nature of their service has changed, the VA has been very slow to change the nature of the care they provide for these women when they return home. Today at the VA there is an insufficient number of doctors and staff with specific training and experience in women's health issues, and even the VA's own special studies have shown that women veterans are underserved.

That is why included in this veterans health bill that I introduced today is a bill I introduced that will enable the VA to better understand and ultimately treat the unique needs of our female veterans. That bill authorizes several new programs and studies, including a comprehensive look at the barriers women currently face in accessing care through the VA. It is a study of women who have served in Iraq and Afghanistan to assess how those conflicts have affected their health.

There is a requirement that the VA implement a program to train and educate and certify VA mental health professionals to care for women with sexual trauma, and there is a pilot program that provides child care to women veterans who are seeking mental health services at the VA.

This bill is the result of many discussions with women veterans on the unique and very personal problems they face with the invisible war. Oftentimes after veterans meetings I held in which male veterans would speak freely about where they believed the VA wasn't meeting their needs, women veterans would approach me afterwards and ask up to me very quietly and whisper about the challenges they face.

Some of these women told me they don't view themselves as a veteran even though they served and therefore they don't seek care at the VA. Others told me how they believed the lack of privacy at their local VA was very intimidating, or about being forced into a caregiving role that prevented them from going to the VA. So often caregivers would have to struggle to find a babysitter just in order to keep an appointment. To me and to the bipartisanship of Senators who have cosponsored my women veterans bill, these barriers to care for women veterans were unacceptable.

As more women now begin to transition back home and step back into careers and their lives as moms and wives, the VA has to be there for them. This bill we are talking about today will help the VA modernize to meet their needs.

Another way this bill meets the changing needs of our veterans is in the area of assisting caregivers in the home. As we have all seen in Iraq and Afghanistan, medical advances have helped save the lives of servicemembers who, as we know, in previous conflicts would have forfeited not only the severity of their wounds. But these modern miracles also mean many of those who have been cast catastrophically wounded need round-the-clock care when they come home. In many of our rural areas, where access to health care services is limited, the burden of providing care often falls on the families of those severely injured veterans.

For these family members, providing care for their loved ones becomes a full-time job. Oftentimes we hear they have to quit their jobs, and often they are forced to forfeit not only their source of income but often their own health care insurance as well. That is a sacrifice that is far too great, especially for families who have already sacrificed so much.

That is why this bill also provides those caregivers with health care, with counseling, with support, and, importantly, a stipend.

This bill also takes steps to provide dental insurance to our veterans and surviving spouses and their families.

It improves mental health care services and eases the transition from active duty to civilian life. It expands outreach and technology to provide better care to veterans who live in rural areas. It initiates three programs to address homelessness among veterans at these especially difficult economic times.

This is a bill that is supported by numerous veterans service organizations, both VA and, and it is supported by many leading medical groups. It was passed in the Senate Veterans’ Affairs Committee with broad bipartisan support, after hearings with health care experts and VA officials and veterans and their families. Like other omnibus veterans health care bills before us, bills that have often passed on the floor with overwhelming support, it puts veterans before politics. It is a bipartisan bill designed to move swiftly so its programs can be implemented. It is a bipartisan bill designed to make sure our veterans do not become political pawns. Yet we have faced a lot of delays in getting here. Those delays are all too common here in the Senate.

We have seen bipartisan nominations stalled, funding bills slowed down to a crawl. It has taken us months to pass a simple extension of unemployment benefits for people who are out of work.

Providing for our veterans used to be one area where political affiliation and bipartisan bickering fell to the wayside. I hope those days are not behind us. Our aging veterans and the brave men and women who serve in Iraq and
Afghanistan need our help now. How we treat them at this critical time is going to send a signal to a generation of young people who today might be considering military service.

As I have said many times, it is so important that we keep our promises. President Abraham Lincoln made to America’s veterans 140 years ago, “to care for the veteran who has borne in battle, his widow and his orphan.”

Our veterans have waited long enough for many of the improvements in this bill. We cannot ask them to wait any longer.

I spoke last week on the floor on the eve of Veterans Day urging colleagues to move quickly on this bill. I am so glad progress is now being made toward making that happen. As we wait to pass this bill, our promise goes unfulfilled to many of our Nation’s heroes. I urge my colleagues to pass this bill quickly so we can get to the work of providing our veterans with the support and services they have earned.

I thank the Chair.

The PRESIDING OFFICER. The Senator from Oklahoma.

Mr. BEGICH. Madam President, the reason we are having the debate now is because nobody would have the debate earlier. It is important for the American people. I don’t have any opposition to veterans care. As a matter of fact, I support keeping our commitments.

But the thing wound out, on October 28 it came to the floor. Part of my amendment, when it actually came out of committee, was in the bill. It was taken out before it came to the floor, not by the members of the committee. It was taken out. But the very fact that we make an issue, because somebody wants to debate a bill and offer amendments on a bill, and then we are supposedly antiveteran because we think maybe we ought to pay for some things we do around here, so because we want to pay for it, we are cast aspersions that we don’t want it to be debated. The worst thing that happens in this body is we pass bills that the American people have no idea about because we refuse to debate them.

I apologize to no one for having put a hold on this bill for a very good reason. The very good reason is this: Our veterans demonstrate courage greater than we ever demonstrate in this body. We owe them that and we ought to support them. What is the courage I am talking about? The courage to make priorities, to make sure we keep those commitments. This bill, as it is written now, will cost $3.7 billion over the next 5 years. I think we ought to do that for these veterans. But I also think their sacrifice should not be in vain and stolen and paid for by their grandchildren. I believe we ought to pay for what we are going to do.

It is disturbing that the Senator from Hawaii mentioned speaking at the World War II memorial. This bill, as written, excludes World War II veterans from the benefit. It excludes gulf war veterans from the benefit. What about them? Is the reason the other veterans, the Vietnam war veterans, the Korean war veterans were not included is because we thought we couldn’t afford it? I think that is probably the reason. Which begs the question: for those of our veterans, we ought to treat them the same, one, and we ought to have the courage to make hard choices about how we pay for it.

It is easy to charge this money to our grandkids. I have no doubt that is what we will end up doing. But the biggest threat facing our country today is not Islamic fascism and Islamic terrorism. The biggest threat facing the country today is the fact that every young child born today will encounter $400,000 worth of debt for benefits they will get nothing from. When we calculate the interest cost on that, by the time they are 25, they will have been carrying a debt load of $1,119,000.

As I look at my colleagues who want to do this but don’t want to pay for it, I am bewildered to think that we can call and honor the courage and service of our veterans without taking some of the same courage to make some hard choices about other things that are not nearly as important as our veterans. We can’t do both. We can’t continue down the road we are on. We can’t continue to spend the money we are spending and borrowing, 43 cents of every dollar spent last year, borrowing it from our grandkids. It won’t work. We will fail as a nation.

Look at President Obama’s recent trip to China. What was the message that emerged? They are worried about us financially. They are worried about our deficit spending. Why are they worried? Because they own close to $1 trillion worth of debt. They now impact our foreign policy decisions only by the fact that they own so much of our debt.

Can we continue to do this and have a free America? Can we continue to do this and our children have opportunity, at least to the level we have experienced? What are our veterans fighting for? Why did they put their bodies at risk, if it is not for a greater future for the country?

When we think about this past year—and it will be worse next year, it will be 44, 45 cents borrowed of every dollar spent. This bill will add a lien against our grandchildren as well as our veterans? This isn’t even a hard vote. Our entire contribution to the United Nations is wasted in the fraud of the peacekeeping we contribute to. We contribute 25 percent of the United Nations money, and we have reports and studies and leaked documents that show the vast majority of the money we put in the United Nations gets defrauded from the United Nations.

We are going to get to make a choice with this bill. We will say we will treat all veterans the same, No. 1, and we are actually going to pay for it by saying it is a greater priority to take care of our veterans than to fund a corrupt, fraudulent peacekeeping force as run through the United Nations. That is what we are going to say. If this amendment passes, it will send a wonderful signal to the United Nations to clean up their act. It will send a signal that our children and grandchildren that we will finally start acting responsibly, and it will send a great message to veterans that we do care and we care enough to make sure the sacrifice they made will not be squandered by us not making hard choices.

We owe a lot to our veterans. The No. 1 thing we owe them is to make sure what they fought for and the future we have is secure in our children and grandchildren’s generation. It is not secure today, based on the fiscal situation we find ourselves in.

I reserve the remainder of my time.

The PRESIDING OFFICER (Mrs. MURRAY). The Senator from Hawaii.

Mr. AKAKA. Mr. President, I yield 5 minutes to the Senator from Alaska, Mr. BEGICH.

The PRESIDING OFFICER. The Senator from Alaska.

Mr. BEGICH. Madam President, I rise in support of S. 1638, the Caregivers and Veterans Omnibus Health Services Act of 2009. I am pleased we are now considering this bill. S. 1638 is comprehensive legislation that addresses many of the needs of our veterans and their caregivers. This bill is a compilation of two earlier bills introduced by Chairman AKAKA to improve veterans health care and provide much needed benefits to their caregivers. I thank the chairman of the Veterans’ Affairs Committee for his leadership on this bill and in committee. He understands the importance of providing the Department of Veterans Affairs the necessary tools and policies to serve the needs of veterans. This legislation ensures that wounded warriors returning from Iraq and Afghanistan can receive care in their home by providing caregivers the necessary benefits to stay at home and care for them full time. This is especially important in rural States such as my State of Alaska where obtaining a caregiver from remote areas is extremely challenging. In those areas, families take care of their injured servicemembers. To further help rural veteran and servicemembers, this bill includes provisions for severely disabled or require emergency care to seek medical attention at non-VA facilities without being billed. For a veteran in one of the many remote villages of Alaska, this is especially important, for they already face many economic challenges.

The bill takes other steps to alleviate shortfalls in rural veterans health care. Telemedicine program expansion, authority to collaborate with Indian Health Services and community organizations are among some of the additional efforts taken.

In addition to providing for caregivers and improving health care for
rural veterans. S. 1963 will finally require the Department of Veterans Affairs to identify and take action on shortfalls in health care for women veterans, mental health care, and outreach to homeless veterans. 

The organizations support S. 1963 as introduced by Chairman Akaka. Unfortunately, one of my Senate colleagues disagrees with me and my other Senate colleagues and the 13 veteran organizations about this initiative and whom they serve. My Senate colleague has offered an amendment that almost doubles the cost. Although he claims the bill is discriminatory against veterans from previous wars, the expansion of rural, women's health, mental health, and homeless initiatives are not limited to any particular group of veterans. Additionally, my colleague's amendment offsets the cost of the bill by requiring the Department of State to transfer money to the Department of Veterans Affairs for United Nations peacekeeping operations. 

Sitting here for a few minutes listening to my colleague, I have to say a couple comments that are not written here. First, my colleague, who voted for the war supplementals that had no funding, is now saying that instead of the cost there and no offset to them, sent people to war. When you do that, you have to also remember the costs associated over the long term. I wasn't here during those votes. I wasn't here when $1 trillion <br>vision in 2008. If my Senate colleague were truly concerned about costs, he would not have chosen, as I mentioned, to cut accounts, which undermines our national security and breaks international obligations. His amendment just does not make sense. It is fiscally and politically irresponsible. I urge him to withdraw this amendment and to remember that he has voted billions of dollars in funding that was not offset for these wars. Funding the wars is just as important as fulfilling our promises to our veterans when they return. 

So many issues facing our veterans today are addressed in S. 1963. Passage of this legislation and its enactment into law will improve and increase services for our veterans and acknowledge the sacrifice of their caregivers. 

I urge my colleagues to vote no on the amendment and support passage of S. 1963 as it has been introduced. 

Again, I thank the chairman, Senator Akaka, for his unwavering support and advocacy for our veterans. 

Madam President, I yield the floor. The PRESIDING OFFICER. Who yields time? 

Mr. Akaka. Madam President, I yield 3 minutes to the Senator from Montana, Mr. Tester. 

The PRESIDING OFFICER. The Senator from Montana is recognized. 

Mr. Tester. Thank you, Madam President, and I thank Chairman Akaka. 

Madam President, I rise this morning to urge the Senate to pass the Caregivers and Veterans Omnibus Health Services Act of 2009. Chairman Akaka has done a great job of explaining the particulars of this bill. I thank him and Senator Burr for their leadership in our committee. I could also echo Senator Akaka in explaining the reasons to vote for better health care for this county's veterans. But, instead, I am going to boil it down to one reason. Madam President, we promised it—we promised it to those who have served in our military. We promised it, just as we promised our troops the resources they need when they are in battle. This is not a vote about politics or partisanship; it is about living up to the pledge we made to all our veterans. 

Montana is a rural State, which means that all 100,000 veterans there are rural veterans. Many of them live in frontier communities. Sadly, that means they have a tougher time getting the care they have earned. Many of them still have to pay out-of-pocket travel expenses to get to a VA hospital for their health care. According to some studies, veterans who live in rural America do not live as long as veterans who live in urban places. That is not only sad, it is disgraceful, and it is unacceptable. 

This bill contains provisions I included with the help of rural veterans and veterans service organizations in Montana. A vote for this bill is a vote to give veterans in rural America and frontier communities better access to health care. A vote for this bill will lock in an acceptable VA mileage reimbursement rate for disabled veterans who have long distances to travel to get to a VA hospital. A vote for this bill will authorize the VA to award grants to veterans service organizations that drive veterans to their medical appointments. In places such as Montana, we would be in pretty tough shape without the dozens of volunteers who make that sort of thing happen. A vote for this bill will also improve health care in Indian country, and it will improve mental health care for rural veterans.

Last week, over Veterans Day, I had the honor of attending events across Montana. I had the opportunity to thank you to our veterans, as we should do every day. A lot of veterans to whom I spoke last week made it clear—made it clear to me—we still have a lot of work to do to live up to the promises we have made to our fighting men and women. This legislation is the be-all and end-all, but it is a big step forward that is the result of putting politics aside and working together to do right by all of the men and women who have served our country. 

Passing this legislation is living up to a promise. It is common sense. That is why I urge my colleagues to support it. With that, Madam President, I yield the floor. The PRESIDING OFFICER. Who yields time? 

The Senator from Oklahoma. 

Mr. Coburn. Madam President, may I inquire how much time I have remaining? The PRESIDING OFFICER. The Senator from Oklahoma controls 112 minutes. 

Mr. Coburn. Thank you, Madam President. I want to go back to the start of this again. The American people need to know what a hold is. What is a hold? A hold is a decision to say that a bill is going to go through the Senate without debate, without discussion, that by unanimous consent everybody agrees we ought to pass a bill the way it is. Unfortunately, 70 percent of the bills that go through the Senate pass that way. The American people get to hear no debate, get to have no knowledge about what is in the bill, whether there is controversy about what is in it. As a matter of fact, they do not know that the bill on the floor is actually different from the bill considered out of committee. It has been modified, not with the vote of the committee but with the direction of the chairman only. 

So the purpose of our holds is either you are against the bill—and I have no secret holds. Everybody here knows that. When I hold a bill, everybody knows the bills I hold, and I give a reason for why I hold them. I do not hold them sheepishly. The purpose for a hold is to develop debate, to have the very discussion we are having on the floor.

This bill was filed October 28. It was brought to the floor the week before 2006. If my Senate colleague were truly concerned about costs, he would not
last without the ability to amend it, debate it, or discuss it. So the reason we are here today is so we can do just that.

I have stated numerous times—I have stated it to the chairman of the committee and the ranking member of the committee and others—I do not oppose—as a matter of fact, I am for providing for our veterans. What I am opposed to is us sinking our grand-children in debt.

The Senator from Alaska makes the claim or insinuates that I was here when the tax cuts came through. I was not. I believe when you do tax cuts you match them with spending cuts.

There is $350 billion a year in waste, fraud, and abuse that goes through this government every year. Not one amendment out of over 600 that have been offered has been agreed to by this body to eliminate some of that waste—not one.

Everybody who has spoken against this amendment or for this bill, with the exception of Senator BURR, has a 100-percent voting record for fiscal money. Not once do they vote against any spending bills, not once since I have been in the Senate—5 years. Not one of those who are opposed to paying for this has said: I see something wrong with this spending bill. It is not a priority. We ought to cut it. Therefore, I am not going to vote for it.

I have had criticism because the first year I was here I actually voted for a war supplemental. But at that time, we had a deficit of $10 billion, not $1.4 trillion. At that time, we had an economy that was growing, not an economy on its back. At that time, we had not totally mortgaged our children’s future.

It is time for all of us to change. It is time for all of us to make the same decisions everyday outside of Washington has to make every day, which means you have to make a choice. You get to choose on what is a priority and what is not. For you, see, our body, the supposed most deliberative body in the world, has a bias. The bias is this: Offend no one. Offend no one.

How do you do that? How do you offend no one? You offend no one by taking the government credit card out of your pocket and putting it into the machine and saying: We do not have to make those hard choices. We are not going to offend anybody by cutting programs. We are not going to offend anybody with the $50 billion a year of waste at the Pentagon. The fact is, 2 years ago the Pentagon paid out performance bonuses of over $6 billion to companies that did not meet the performance requirements.

Sadly, not one American, not the Federal Government, got any of that money back. None of it came back because the other side of the story is, we fail to do oversight. We fail to do the hard work that does not give you a headline. That is very hard work to hold the executive branch and agencies accountable. So our veterans do sacrifice.

I am for the Caregivers Act. I am for us doing all these things. But I am only for them if, in fact, we will start making the same hard choices our veterans make, the same hard choices everybody else in this country makes when it comes to making a decision about the future.

You see, a lot of people in our country today are underwater on their mortgages. They are underwater on their mortgages. Guess who else is. We are as a nation. We are underwater. Let me show you, for example, what the financial situation is with our country.

Medicare is broke. Part A will run out of money in 2017. We have 50 million baby boomers—I am one of them—who are going into Medicare in the next 8 to 10 years. So not only is the cost per Medicare patient going to go up, but we are going to add 50 million to it. It is broke.

Medicaid. It is broke. It comes out of your pay check. You do not get your tax revenue. But the States are broke over their share of Medicaid.

The census. It is broke. It is going to cost 2 1/2 times what the last one did. It is total mismanagment by the Federal Government.

Fanny Mae and Freddie Mac—broke to the tune of $200 billion of your money, each one of them; $400 billion that your kids get to pay back, your grandkids. They do not get the opportunities because they are both broke. We have done such a wonderful job.

Social Security. It is the easiest to fix, but it is essentially broke because we have stolen $2.6 trillion from it. And then we are not being honest with the American public about what our true deficit is because when I said a minute ago that our deficit was $1.43 trillion, that is not true. That is Enron accounting. That is Washington accounting.

The real deficit is well over $1.5 trillion because we stole more money from Social Security. Guess what. Next year, for the first time in the history of Social Security, more money will be paid out than will be paid in. For the first time, it runs in the red next year. We owe money, so technically it is not broke yet—until some of that $2-plus trillion goes back into it—but it is essentially broke.

How about the post office? They just announced their loss for this year. They are going to have a bigger loss next year. It is huge.

Cash for clunkers. That was broke when it started.

The highway trust fund. It is broke. We do not have enough money for what we are obligated to pay out. It is broke.

Now we are talking about government-run health care? A $2.5 trillion program? That is what the real number is on it when you get the Enron accounting out of the bill that Senator Reid introduced last night—$2.5 trillion.

And now we are saying we do not have the courage to take care of our veterans. I do not think the American people are going to tolerate this much longer, nor do I think they should tolerate it—that we will continue to steal the opportunity and future of our children.

I think the Senator from Alaska can be offended by taking money for the abuse, fraud, and waste in the U.N. because in every country he mentioned, U.N. peacekeepers have been accused of rape and pillaging the very people they were supposed to have been protecting.

In every country he mentioned, U.N. peacekeepers we paid for were raping the very citizens they are supposed to be protecting. Yet we do not have the courage to say: Time out. We are not sending you any more money until you clean up the mess. No, we are not going to do that. We are not about to do that. What we are going to do is we are going to say we will take the money for the veterans from our grandchildren and we will not make the hard choice. I think it would be a wonderful message to send to the American public that maybe they ought to start being transparent about where the money goes. Do you realize nobody can know where the money goes? You don’t get to know. I, as a Senator, don’t get to know. The President pro tempore doesn’t get to know where the money goes. Yet your country puts $5 billion a year into that and you have no idea. The only way we find out is occasional leaks.

By the way, all of those U.N. peacekeepers who have raped and pillaged, not one of them has been convicted. Not one of the agencies, in terms of their eight programs that have been incompetent and wasted money, have been convicted. They are immune to conviction. The waste, fraud, and abuse of this country is only exceeded by one organization, and that is the United Nations. Yet we don’t have the courage because the State Department is against this amendment, and they sent a letter outlining why they are against it. They are going to put into the RECORD why they are wrong. I ask unanimous consent that at the end of these remarks, my rebuttal statement in response be printed in the RECORD.

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

(See exhibit 1.)

Mr. COBURN. The State Department Bureau of Legislative Affairs opposes this amendment. It lists a number of reasons as reasons to the U.N. and oppose the Coburn amendment. Many of the programs and activities the State Department listed have experienced severe problems in execution or are taking credit for activities by national governments or private entities.

Let’s take the recent elections in Afghanistan. The United Nations cannot account for tens of millions of dollars provided to the Afghan election commission, according to a recent GAO audits—these are confidential; they were not released; we just happened to be fortunate enough to have people who would give them to us—and interviews with
current and former senior diplomats. The Afghan election commission, with over $20 million in U.N. funding and hundreds of millions of dollars in U.S. funding, facilitated and helped mass election fraud and operated ghost polling places.

Should we keep sending them money for incompetence, waste, and fraud? “Everybody kept sending money” to the elections commission, said Peter Galbraith, former deputy chief of the U.N. mission in Afghanistan.

Nobody put the brakes on. U.S. taxpayers spent hundreds of millions of dollars on a fraudulent election. This is a deputy to the senior U.N. official in Afghanistan. He was fired last month. He protested the fraud and he got fired by the U.N., that wonderfully competent organization.

As of April 2009, the U.N. had spent $72.4 million supporting the electoral commission, with $56.7 million of that money coming from the U.S. Agency for International Development. The Special Inspector General for Afghanistan Reconstruction states that the United States provided at least $283 million in funding for that election.

In one instance, the United Nations Development Programme paid $6.8 million for transportation costs in areas where no U.N. officials were present. We paid transportation costs, but no U.N. officials were present. Why did we pay it? Where did that money go? Where is the money?

Overall, the audits found that U.N. monitoring of U.S. taxpayer funds was “seriously inadequate.”

In other words, it is there, they send it out, they don’t have any idea, but you can bet well-connected people at the U.N. are making millions off U.S. dollars.

How about the monitoring of nuclear programs in North Korea and Iran? In 2002, the North Korean Government used United Nations Development Programme money—UNDP money or aid—to purchase missiles for them for development from the U.N.—they purchased conventional arms and ballistic missiles. With money we gave the U.N., the U.N. turns around, gives it to North Korea, and they buy missiles and arms. There is a real problem at the U.N. We will not face up to it.

It also transferred millions of dollars in cash to the Government of North Korea, with no oversight on how the money was spent—no oversight, just handed them millions of dollars in cash.

In September 2009, North Korea announced to the United Nations Security Council that it was almost completely in weaving nuclear materials from its nuclear reactor. Last week, North Korea announced the processing was complete.

We helped finance it through the United Nations. We helped finance it through the United Nations. As of this morning, Iran had rejected the U.N. offer to send enriched uranium out of the country to prevent it from developing nuclear weapons.

We don’t know how much U.N. money has gone in there yet, but I promise I will try to find out. But I can guarantee that millions of our dollars have been wasted that could pay for our veterans or we can borrow it from our children.


U.N. peacekeeping operations are plagued by rape and sexual exploitation of refugees. From 1994 forward, 68 separate instances of rape, prostitution, and pedophilia—68 separate times—and we pay half the U.N. peacekeeping costs. We don’t manage the money; the U.N. manages the money.

What would happen if U.S. troops were doing that? Yet we have no control.

In 2006, reported BBC News: Peacekeepers in Haiti and Liberia were involved—we are involved—we lose—where we can read that in the BBC News of November 30, 2006, if you want to look it up.

In 2007, leaked reports indicate the U.N. has caught 200 peacekeepers for sex offenses in Haiti, including paying for a minor to buy sex from rape to assault on minors. Not one of them has been prosecuted, not one.

Just this month, Human Rights Watch reported that Congolese Armed Forces, supported by U.N. peacekeepers in the eastern Democratic Republic of Congo, have brutally killed hundreds of civilians and committed widespread rape in the past 3 months in a military operation backed by the United Nations. That is this month. Yet we continue to send billions of dollars every year to the United Nations.

Mr. DURBIN. Madam President, will the Senator from Oklahoma yield for a procedural question?

Mr. COBURN. I will be happy to yield for a procedural question.

Mr. DURBIN. I am interested in speaking on behalf of the bill, and I know the Senator has time allocated under the unanimous consent request. I wish to ask him at his convenience if he has a time when he would be able to yield to this side or is he going to speak and use all his time?

Mr. COBURN. I do not plan on consuming all of it at this time. I have about 10 or 15 minutes more to go, and I will be happy—is the Senator wanting time?

Mr. DURBIN. Could I ask unanimous consent that when the Senator breaks or prepares to yield the floor, at least temporarily, that I be recognized next?

Mr. COBURN. I have no objection to that.

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

Mr. DURBIN. I thank the Senator.

Mr. COBURN. Going back to the Congo, most of the victims were women, children, and the elderly. Some were decapitated. Remember, these are U.N. peacekeeping forces—peacekeeping. Others were chopped to death by machete, beaten to death with clubs as they tried to flee.

They may not have been actual U.N. officers, but the U.N. was supplying all the logistics, all the transportation for this group of people. Where is the oversight?

U.N. contribution: Compiling forecasts of global agriculture production and identifying areas of likely famine and the risk of severe hunger, to facilitate food assistance. We make a contribution to the U.N. Food and Agriculture Organization, which used to be the bread basket of Africa and which is now dependent on food imports. We are helping to pay for President Mugabe—who can’t travel hardly anywhere else in the world because he is such a rogue dictator—by sponsoring, through our dollars, meetings where he is the headline speaker.

The meeting was branded a failure within a couple of hours of its start after the 192 participating countries unanimously rejected the United Nations’ appeal for commitments of billions of dollars in yearly aid to develop agriculture in poor nations.

It is not because they don’t care about people having problems with food; it is they recognize the U.N. is ineffective at doing that and they are not going to commit more money, but we continue to commit more money.

The U.N. Environment Programme spends $1 billion a year—20 percent of it our money—on global warming and its effect on agriculture.

The U.N. has coordinated efforts by the global shipping industry and governments to prevent and respond to acts of piracy on the high seas.

It was totally ineffective. Do you know why we don’t have count of piracy on the high seas? It is because of Task Force 51, which was formed by the U.S. Navy because the United Nations was totally ineffective in accomplishing that purpose.

I could go on and on. But the fact is, the United Nations is not only morally bankrupt in its leadership and efficiency, it is filled with fraud, waste, and, as noted, tremendous acts of violence through the peacekeeping armies it is supposed to protect. Yet we are going to have people say we shouldn’t take some of that money away. We are not taking all the money away with this amendment anyway; we are just taking a small portion to pay for our bill.

We are going to have people actually vote to continue to do these things, instead of taking care of our veterans and not steal it from our children.

I heard Senator Tester speak about the wonderful things in this bill to help people who drive to VA clinics and VA hospitals. There is a better idea. If a veteran is deserving of care, give him a card. Let them go wherever they want.
Why should they have to drive 160 miles, when they can get the care right down the street from somebody they trust and they know. But instead we say: We are going to promise you health care, but you can only get it here. Real freedom for our veterans is real freedom for the veterans who are doing. This doesn’t apply to veterans, but it does apply to those who would not.

If you think about what is happening in our country right now and how things are being shifted, what we are doing is, we are on the cusp of a dramatic change in our country in terms of balance. This huge bill, which I will talk about later, is a major move in that direction. Senator Byrd and I were talking this morning about this. In this bill is a 5-percent tax on cosmetic surgery. Just the day before yesterday, the U.S. Preventive Task Force Services recommended—because it is not cost effective for women under 50 not get mammograms unless they have risk factors. You tell that to the thousands of women under 50 who were diagnosed with breast cancer last year with a mammogram. Tell them it is not cost effective. But also in this bill is a 5-percent tax on breast reconstruction surgery after they have had a mastectomy. They are going to tax having their breasts rebuilt after their breasts have been taken off because it is an elective plastic surgery. It is an elective cosmetic surgery. We are going to have a tax on it because we have taxed elective cosmetic surgery.

In England, where I studied law, I learned that provision was made for veterans. We have a provision that veterans who fought for freedom. Give them the best in the world. Nobody can compare. They are underfunded in those areas. The VA has the best in the world. Nobody can compare. On prosthetics, the VA is the best in the world. Nobody can compare. On post-traumatic stress disorder, they are the best in the world. Nobody can compare. They are underfunded in those areas. This bill is right on that. But the real commitment is to give the choice. The veteran fought for freedom. Give them the choice, the freedom to choose what they want for them.

Why is it important we change how the Senate operates in terms of making hard decisions? The reason it is important is there are millions of these little girls, from 50 to 70 million, who will die of breast cancer. She has a little sign around her neck. She says: “I am already $38,375 in debt and I only own a dollhouse.” Of course, when you divide up the $12 trillion which we passed this week in directly owned debt; it doesn’t count the billions—I mean the trillions—we have borrowed from Social Security and the other trust funds, such as the waterway trust fund and all those other organizations we have stolen from the American people. But that is for every man, woman, and child in this country. It is over $30,000 now, this year. I think when you look at her, you have to say, certainly, we ought to be making some changes. By the way, between now and 2019, that number grows to over $96,000 per man, woman, and child. But she is a child. This doesn’t apply to veterans, but it applies to almost everything else we are doing.

This is what Thomas Jefferson said: “The democracy will cease to exist when the people are governed by wealthy men.” If you take away from those who are willing to work to give to those who would not.
We have a difference of opinion on the matter before us. This bill, S. 1963, is the most important piece of veterans legislation this year for several reasons. I congratulate Chairman Akaka and Ranking Member Burr for bringing this matter to the Senate with a unanimous vote in committee, with both Democrats and Republicans supporting it, and for good reason.

In addition to the provision that was put forth in an earlier bill, there is a dramatic change in the law to help women veterans. More and more returning veterans from Iraq and Afghanistan and around the world need special care. Unfortunately, the VA system wasn’t providing that care as we believed it should. This bill takes care of that. It is the most dramatic expansion for women veterans and their health needs we have seen.

The same is true for rural health care—who gets up. Every morning Officer is from downstate Illinois, as I am, and he knows the Marion VA Center is a critical part of the treatment of veterans in southern Illinois and the surrounding States. Literally thousands of hard-working people provide care for veterans, which they desperately need, close to their homes. This bill addresses the enhancement and improvement of rural care for veterans.

The same is true for mental health issues. It is an excellent bill. The part of the bill that is near and dear to me relates to caregivers assistance. It relates to the fact that many veterans who come home are not in institutional settings, not in a convalescent center; they are home. But they survive every day because of the loving care of a member of their family—a wife, a husband, a mother, a father, a sister, or a brother. Great sacrifice takes place. I cannot tell you exactly how many of these caregivers there may be. Estimates range as high as 6,000 or 8,000. I have met some of them, and I know them personally. I have heard their stories. They are heroic—just as heroic as the veteran who needs their care. They are literally giving their lives to keep that veteran alive, healthy and happy, at great personal sacrifice. Many times they cannot go to work. Many times they give up a business because they want to stay home with that husband they love.

A young woman came into my office the other day who is moving from Chicagoland area after more than 5½ years. She has been the caregiver for her husband who was the victim of a traumatic brain injury in Iraq. For this young woman, who is in her thirties, it is an amazing show of love and sacrifice on her part.

We have also spoken of the family in North Carolina we know very well—the
family of Eric Edmundson, a young soldier who was the victim of a traumatic brain injury. He is alive today—I can say this without contradiction—because his dad quit his job, sold his business, and cashed in the value of his home. With his wife, they have to take care of their son and little granddaughter. That is the most loving family I can remember seeing, and they are doing it for the son they love, but they are doing it, as well, for a veteran who served our country.

The purpose of this bill is to give these caregivers a helping hand and the medical training they need so they can do what is necessary to keep that veteran alive and as well as possible, improving if possible. It is also to give them a respite maybe for a week or two each year so they can go on vacation and have a visiting nurse or someone who will come and provide assistance. They need that with the stress and burden they are carrying. That needs to be lifted temporarily—so they can recharge their battery and come home and be dedicated once again.

In the discretion of the Veterans’ Administration, it can give a monthly stipend or health care as well. The first thing we know from foreign families who have run out of their son under the care of the Veterans’ Administration, and they have no health insurance. We are trying to find a way to provide health insurance for these caregivers. In my mind, it is simply fair and right that we would do this. That is why I thank Senator AKAKA and Senators for including it in this bill.

I also want to address the issue before us, the pending amendment by the Senator from Oklahoma. The Senator from Oklahoma has come to the Senate floor several times and expressed his opposition to this bill, primarily for budgetary reasons. I understand that. But I say to him I was worried this day would come. I was worried the day would come when the war, which we paid for by borrowing money, would generate victims and veterans who needed care, and when it came time to give them the care many of the people who voted to fund the war by going into debt would say: But we can’t help the veterans unless we pay for it.

In all the family. If we vote to go to war, we vote to accept the consequences of war. That means an obligation that we have to these veterans. It is a solemn promise we gave them. We said to these men and women if they would hold up their hand, take an oath to defend the United States and risk their lives, we would stand by them when they come home. If they are injured, we will be there. If their family is disadvantaged, we will do our best to help them too. I think that is part of our solemn obligation to these veterans.

Now the question is raised as to whether we can afford to do that, uniless we come up with a sum of money to pay for it at this moment. I say to the Senator from Oklahoma, and those who take his position, if we paid for this war to start with by borrowing money, how can we turn our backs on the veterans’ caregivers who keep them alive argue that it is simple budgetary justice? It is just not. It doesn’t track. I don’t believe those two approaches are acceptable.

Also, the Senator from Oklahoma does two things in this amendment: I wish we could do—one I wish we could do. I have talked to him about it on the Senate floor—and that is to expand coverage for caregivers of those who served before 9/11. I would like to do that. Currently, we believe there are about 2,000 caregivers who would qualify for this caregiver amendment, this demonstration project. If we expand it to all veterans caregivers, the number rises to over 52,000. It is a just thing to do. It is something we may ultimately have to do in the future. We are going to make that commitment, it is a dramatically larger commitment than this demonstration project, this bill for those who suffered serious injuries since 9/11. To increase the scope of it from 2,000 caregivers to all caregivers is to increase the cost of it dramatically. That is something we have to measure and decide at some point—whether we want to do that.

I will work with the Senator from Oklahoma to that end. I think all veterans’ caregivers deserve this. I hope we can prove with this approach that it is a reasonable thing to do—keeping these veterans home where they want to be, in a safe, happy surrounding, is not only right but it is cheaper than institutionalization.

The second part of Senator Coburn’s amendment related to this provision says the money would be available for caregivers if the veteran would otherwise need to be institutionalized. I think that may be drawing a line that is too harsh. I think there are those who need the help of a caregiver but may not technically need to be institutionalized. I think those who are suffering from post-traumatic stress disorder, a traumatic brain injury with seizures—to say they need to be institutionalized may be overstates. To say they need the help of a caregiver and then move forward to treatment, I understand that. On that basis, I think the Senator from Oklahoma expanded this bill from 2,000 to 52,000. On the other hand, he draws a line on institutionalization that may go too far. I think what we ought to do in this demonstration project is give the VA the authority to measure this and see what is appropriate. I think there are so many individual cases that, when we generalize like this, it is a mistake.

The Senator from Oklahoma believes the money to pay for this should come from the money set aside for international peacekeeping through the U.N. I will not stand here in defense of every decision made by the U.N. It is hard to do that. We make mistakes in the United States, and the U.N. does too. They have been caught and so have we. I want to make sure money is not wasted. We should be vigilant, whether it is money being spent by our government or agencies we support. I think that is why the Senator Coburn is going to cut back on international peacekeeping in areas of the world where I think it is critical.

I visited the Democratic Republic of Congo 2 years ago with Senator BURR of Kansas and U.N. peacekeeping forces there, the massacres of innocent people would go unchecked.

This has been going on for over a decade. During this period of time, innocent men, women, and children have been literally hacked to death and killed. The international peacekeepers make a difference there. They make a difference in Haiti where I visited twice and have seen firsthand the degraded poverty in our own hemisphere and, unfortunately, the fact they are on the verge of violence almost every moment.

I also think it is a mistake for us to cut back on those international agencies that monitor the spread of nuclear weapons. If we want to keep an eye on Iran and make sure they don’t develop nuclear weapons to threaten their neighbors in the Middle East and the rest of the world, we need this international force to come in and do its inspection work. They are the only credible third parties that can come in and decide whether the Iranians have gone too far. Their judgment through the United Nations is one that is credible to other nations. To cut back in their efforts at monitoring the spread of nuclear weapons is, in my mind, shortsighted and invites instability in a world that is already too dangerous.

I urge my colleagues to defeat the Coburn amendment. I say to my friend from Oklahoma, at the end of the day, after we start this program, if the Veterans Administration can find the resources through the appropriations to move it forward, I am open to working with him to expand it to caregivers from previous generations of veterans and to see if there is a way to make sure it is spent exactly where it is needed and as we have described it.

That is the nature of this work. We are not perfect in what we do, but we start with good intentions and hard work and try to put the language together. But at this moment, I say to the Senator from Oklahoma, first, I am glad he no longer put a hold on this bill. It is an important bill. I am glad he has had his chance to offer his amendment. I urge my colleagues to defeat it, but I say it in good faith to my friend from Oklahoma.

I will work with him on this bill, in fact, I think it is a good start because he is seeking to enact law and implemented to make sure it meets the goals we both share—fairness to all veterans and providing care to those who need
it. This is a good start, but let us promise to work together, if it is enacted, to make sure we continue in that vein.

I yield the floor.

The PRESIDING OFFICER. The Senator from Oklahoma.

Mr. COBURN. Mr. President, the majority whip is a formidable orator and he is appreciated in lots of ways. We work together on subcommittees on the Judiciary Committee. I have a fondness for him. Although one area he did not agree to work with me is to pay for it.

Never have I said I don’t want us to do this for our veterans. Not once. The reason we are on the floor, the only reason we are on the floor having this debate is because of my hold; otherwise, we would never have gotten here to have the debate which I think is valuable, we would never have gotten here. The only reason we are on the floor is for our veterans. Not once. The reason we are on the floor is to pay for it.

I have said, and I have said it over and over, that this amendment does not agree to work with me is to pay for it.

But there has to come a time—every time I offer an amendment on this floor and every time we start making our choices. That is what we hear all the time. Over 600 times in the last 4½ years, it is never a good time to start making hard choices. That is just what we heard.

The Senator from Illinois referenced Congress. Just this month the Congolese army, with the assistance of the United Nations, slaughtered a bunch of people. And we are supposed to continue?

I put two other things out there. Under Federal law, the Accountability and Transparency Act, the United Nations is required to tell the American people how our money is spent because the State Department is required to find it out and put it online. They have refused to do it. So we have no idea what it is.

Two years ago in the Foreign Ops bill, an amendment was agreed to by 100 Senators that there would be transparency. Our money going to the United Nations would be conditioned on the fact that the United Nations would be transparent on how it was spent. That was voted 100 to 0 in the Senate.

Guess what happened on the way to the bank coming out of the conference committee. It was eliminated. So now we send over $5 billion directly, $5.2 billion, plus billions more through USAID through the United Nations, and we do not have any idea how it is spent.

What we do know is that the United Nations will not make the choices. But the American taxpayer, that little girl is sending them out of her future every year. It would be a wonderful thing for us to say that.

It would be a wonderful thing to send the United Nations a wonderful fire shot across the bow they have to start being accountable for the dollars that the American taxpayer, that little girl is sending them out of her future every year. It would be a wonderful thing for us to say that.

Let me restate for Members, when the committee passed this bill out, we passed it out with all caregivers being included. It was after the committee reported it out that we narrowed it to OEF and OIF veterans and their caregivers. It was the intent of the committee to include all the people Senator DURBIN, the majority whip, said we might consider later on but not now. The committee’s intent was let’s do it in the Senate.

It was also the committee’s intent that these were individuals who were targeted for us to provide this caregiver benefit so to we can keep them out of nursing homes because of the Eric Edmundsons. Senator Coburn amendment is consistent with the bill that was passed out of committee unanimously. The bill says the Secretary “shall,” therefore, in its current form, means he has to. The Secretary will then have to prioritize spending within the Veterans Administration to fund these programs. The third piece of what Dr. Coburn’s amendment does is rather than force the Secretary to prioritize within just VA programs, meaning there are going to be veterans who win and veterans who lose, why not say as a Congress: Why shouldn’t we do what we are supposed to do? Why should we not prioritize the spending here?

What my good friend from Illinois suggested was why should we prioritize for the United Nations? Let me say the answer is quite simple: It is our money. The suggestion that the Congress doesn’t have a fiduciary responsibility to fund programs we implement at a time when we are borrowing 50 cents of every dollar we spend is ridiculous on its face.

To suggest that the Senate, the Congress can operate any differently than a family in America suggests that we ignore the input of everybody who asked us to represent them. We do represent the American people, 100 individually who represent the entire country. How can we do it differently than any family who is out there struggling to meet their end-of-the-month obligations and when their revenue does not meet their expenses? What do they do? They either cut back their expenses or they find a place to raise more revenue.

Let me suggest this as simple as, Is it time for us to prioritize where we are placing money? Members will have to decide: Is pulling money from the United Nations an appropriate place for us to pull money from to then spend on our country’s veterans?

I believe we have an obligation. I believe we have a promise, even for programs that did not exist prior to this time, that, when we see it is in the best benefit of the quality of life of our troops, that we provide that benefit for them. But I believe we also have an obligation to this generation and the next one and the next one to pay for it. This is not a choice that is tough for Members. If you support the Coburn amendment, you support practically everything the committee supported when it passed the bill unanimously.

The suggestion that the Congress...
unsustainable in its current level of investment. 17 percent of our gross domestic product. I find it somewhat odd that we would start the debate given that it is unsustainable in its current financial investment with how much more money does it cost to reform health care. The obvious answer is it should cost zero. If you are already spending too much, we should look at the reforms before we look at the coverage expansion. I hope every American ought to be covered. As a matter of fact, Dr. COBURN and I have offered comprehensive bills to do that. But it is matched with real reform.

What was heralded in the last 24 hours is, in fact, a $2.5 trillion health care bill—$2.5 trillion—over a 10-year period of collecting the revenues and paying out the expenses. This is where gimmicks, smoke and mirrors—whatever you want to call it—are used in Washington. If you collect revenue for 10 years and then pay benefits for 20 years, you don’t get a true picture of what it is going to cost over 10 years. You get a true impact of the revenue stream which is over $800 billion.

From where will that $800 billion in new tax revenue come? Taxes. The go up $493.6 billion—$493.6 billion. We will cut $464.6 billion out of Medicare. A $5 trillion we are going to take from a program with a designated population of beneficiaries of our Nation’s seniors and the disabled as well and we are going to take $5 trillion from Medicare and shift it over to meet the new burden of a health care plan yet to be constructed.

Why is this problematic? It is $1,063 per Medicare beneficiary every year. Over the 10-year cycle of this health care plan, we are going to steal from every senior in this country $10,363 worth of health care money. We are going to take it from their program, and we are going to put it over in this new program because it is paid for. Legitimately, when you raise taxes, when you raise fees, when you raise revenue, you are making tough choices. I think when you go in and tax health plans and that raises $149.1 billion; when you increase a penalty for a nonqualified health savings account and you get $1.3 billion—these are revenues. They are legitimate.

It is no smoke and mirrors. I don’t think American people believe for a minute this is deficit neutral. I don’t believe for a minute they believe we are going to take $464 billion out of Medicare. If they do believe it, they know we are going to pay it back with future taxes on the American people.

This is fine, if that is what you want to prioritize. But health care reform affects every American. This is a very personal issue for every American and every family. It touches them unlike anything else we do. The truth is, they care, they take it and you put it in one pocket and you take it out of the other pocket, the effect on them either has not changed or it is negative.

Let me suggest to my colleagues this bill is 2,074 pages. I will admit—I may be the only one—I have not read it since it was introduced at 6 o’clock last night. I am not sure there are many Members who have or could have. But let me suggest there will be a question of whether or not those who use taxpayer money to perform abortions. Personally, I believe that is wrong. I will not support a piece of legislation that does that. This bill does that.

An employer mandate, at a time when American companies are trying to be competitive in a global marketplace? We raised $28 billion in employer mandates. I am not sure that is making U.S. companies more competitive in a global marketplace. I think the economy is the No. 1 challenge we have in America. I think 10.2 percent unemployment and going up—if it were a disease, we would be on the floor of the Senate calling it an epidemic and we are spending whatever it takes to try to drive it down. We are doing nothing. As a matter of fact, we are doing everything we can to try to drive up unemployment, to dry up the economy, and to make companies less competitive in a global market.

The President said one of the objectives of health care reform was we need to bend the cost curve down, we need to make sure there are cost savings in health care. Let me ask you what the Congressional Budget Office says:

Under the legislation, federal outlays for health care will increase during the 2010–2019 period, as would the federal budgetary commitment to health care.

That is Washington language for: You know what. Our expenditures on health care are going to go up. What happens when Federal expenditures go up? Everybody’s go up. That is a known quantity. We all know it. The coverage expansion would drive a new increase in government spending on health to the tune of $160 billion over 10 years. Make no mistake, this does not bend the curve down, it bends the curve up. We spend more money.

CBO scored the bill as reducing the deficit by $130 billion over 10 years, 2010–2019. What does it take into account, to come to that calculation? It assumes doctors are going to get cut 23 percent in their reimbursements in 2011. We have less than 1 million doctors to serve 300 million people. Does anybody believe for a minute we are going to allow a 23 percent cut to go in at a time when we are starved—trying to attract people to go into medicine as a profession? If it does go, in the first time, we are going to take $247 billion out of the pockets of doctors we rely on to perform the surgeries, to make the diagnosis for us and everybody else in this country.

The new creation of the CLASS Act, long-term care policy, shows in the CBO score a $72 billion savings. Let me explain it like this: Nobody qualifies today because it doesn’t exist. People are going to pay premiums to be eligible for this long-term benefit. It takes about 20 years of paying in before somebody is going to be eligible to pull out. It is not similar to Medicare, when we created it, where, even if you never paid in, you were entitled to collect revenues for 20 years before we ever pay out the first dime. It is not hard to understand why you would have a $72 billion surplus out of this.

Now ask, what happens after that? What happens after the next year past that 20-year number? The truth is, it starts to get into the trillions and trillions of dollars for which the Federal Government is obligated, based upon the premiums and the benefits people have signed to it, that they pay out.

If you eliminated these two gimmicks, just on its face this bill would be $139 billion out of balance, in the red. It would not be paid for.

Let me suggest that is no smoke-and-mirror tools. The start date was moved from 2013 to 2014. No longer is our focus on how do we get care delivered as quickly and as efficiently. We just pushed it off a year because we said the Congressional Budget Office says we don’t want to raise money, and we have raised all we can in fees and taxes. Maybe not all. I think they probably have some things targeted that are still yet to come out. The key thing is, even if you did implement it, there are 24 million Americans who are still without insurance. The objective to cover everybody was not met. There are $25 billion worth of unfunded mandates to our States. I don’t know of a State that is in financial health today. There may be one or two.

My State of North Carolina was $4 billion out of balance. Last year, the Federal stimulus was $2 billion of closing the gap. That $2 billion, by the way, we didn’t have. We borrowed to get it. The North Carolina and other States to create jobs. It was used to close budget gaps so they didn’t have to make tough decisions. As a matter of fact, we found out this week, on one of the news channels, there is $56 billion that didn’t have anything to do with stimulus.

We are the laughingstock of the world on the way we applied the stimulus package. But the sad part is not the fact that it has been uncovered, it is the way we applied the stimulus and put Americans to work. Now we are saying to the States we are going to put another $25 billion on you.

In Medicare, we are going to cut from the fee-for-service payments $192 billion. So we already have $247 billion over here that we are getting from doctors if we go through with the payment cuts. Now we are targeting another $192 billion out of Medicare reimbursements, right out of the pockets of doctors and hospitals. Is there a community hospital in this country that will be able to survive, given the cuts that are getting ready to hit them? We cut Medicare Advantage $118 billion. Some
cheer that. I tell you who doesn’t cheer it: the 20 percent of America’s seniors who chose Medicare Advantage as their preferred choice to traditional Medicare because it required of them less out-of-pocket obligation, it didn’t hit them for 365 days. The day they walked into a hospital. What about those 20 percent of our Nation’s seniors when they lose Medicare Advantage?

What about the $43 billion in DSH, dispenser payments? We pay the hospitals to make up for the uncompensated care they deliver? I guess the authors of the bill would say we are covering everybody so there is no uncompensated care. Wrong: 24 million are still uninsured. There is going to be uncompensated care, and we are taking away the money we are providing the hospitals to make up for the uncompensated care they delivered, meaning it is coming right out of their pocket. So, they will not be eligible for subsidy. If they currently have coverage but they may be below income and for some reason their employer has to drop their health care or cut back on the plan because—maybe they are in greater and so the cost is less. But now, all of a sudden we are saying that is not important.

There are 162 million Americans who currently have employer-based health care. In this bill, regardless of what that employer does, they will not be eligible for subsidy. If they currently have coverage but they may be below income and for some reason their employer has to drop their health care or cut back on the plan because—maybe they are in greater and so the cost is less. But now, all of a sudden we are saying that is not important.

One of the reasons the health care system in America is the best in the world is because we spend money to innovate. We hope companies find breakthroughs. We look at diagnostic abilities in an effort to try to detect early, so the cost is greater and so the cost is less. But now, all of a sudden we are saying that is not important.

The right approach is available. My colleagues and I have proposed commonsense and fiscally responsible ways to increase access to affordable access to health care. We need to do that. We have never said we don’t need reform. What we have said is we need reform that will give more affordable access for coverage to Americans who do not have the access today.

We should reassess the goals of health care reform and implement policies that we know will reduce costs. For sure, reducing frivolous lawsuits. Study after study has shown the benefits of medical malpractice reform. In Texas, we have tort reform. We have seen a dramatic increase in physicians who are willing to practice medicine. It has lowered the cost of medical malpractice premiums, and doctors have been able to do their work with their patients with much more freedom, knowing they do not need to order unnecessary tests just to cover themselves in case they get sued. The majority insists on rejecting this suggestion, that puts commonsense standards in place for frivolous lawsuits or lawsuits at all.

I will offer an amendment, or at least prepare one and hope to be able to offer it, that would cap damages, reduce malpractice premiums, and encourage doctors to practice in medically underserved areas, especially rural areas, where so many of our under-served areas, especially rural areas, have no doctors. There are counties in Texas that don’t have a doctor within hundreds of miles and several counties. That is because the medical malpractice premiums are so high, they cannot afford to do it.

The small business premiums are going to go up, if this bill is passed. Small businesses already have a hard time offering coverage to their employees. Why would we make the problem worse, especially when we have the highest unemployment in decades? We should be allowing small businesses to pool together and buy plans. We have

Members: Support the Coburn amendment on the veterans bill. Support passage of the veterans bill. Read the health care bill. Be prepared to debate the health care bill for a very long time and be prepared to stand for the American people on what is right.

I yield to the PRESIDING OFFICER. The Senator from Texas is recognized.

Mrs. HUTCHISON. Mr. President, as has been mentioned several times, the majority leader unveiled the Democrats’ health care reform bill yesterday around 5 o’clock. This bill was drafted behind closed doors. There was no Republican input. It didn’t have any transparency until yesterday at 5 o’clock, despite the promises we have heard that government would be more transparent in this new administration. The 2,000-page bill released yesterday is expected to have a vote to proceed to it within the next 2 days. The bill is 354,654 words. To put it in perspective, we have 17 pages in the Constitution, in 463 words; Lincoln’s Gettysburg Address contained 266 words; the Ten Commandments has 297 words. This is over 350,000 words.

Why don’t we have time to read this bill, digest it, allow our amendments to be put in the bill language, because, clearly, this bill will need amendments?

The health care of our citizens may be the most important of all things to every person and every family. We are a democracy and the American people have a right to be heard on all issues but especially on this type of issue. We should be given the opportunity to read and hear what is in this bill, to hear it discussed, to hear from our constituents because it ought to be on the Internet. That is why we have the Internet access to bills that are introduced in the Senate. But by the time our constituents have a chance to read it, we will already have had a vote on whether to proceed to the bill.

Even after a cursory review, I know this bill includes changes that are disastrous to families, health care providers, and the economy. Higher taxes, mandates—especially for small businesses—penalties, cuts to Medicare, higher premiums, restricted choices, a government plan—the list goes on. The bill includes almost $1 trillion in taxes, including a new Medicare payroll tax; $80 billion in new taxes for individuals who don’t buy coverage; $149 billion in taxes on employers who don’t offer the right percentage of coverage to employees; $102 billion in taxes on insurance plans, pharmaceutical companies, and medical device companies which study after study have shown will be passed on to the people who get these services and equipment.

To make matters worse, the bill includes almost $1 trillion in cuts to Medicare. It is guaranteed to reduce choice and coverage for seniors. In my State of Texas, 400,000 people love their Medicare Advantage, or at least they have it and are satisfied. They will lose Medicare Advantage under this bill. The Democrats are touting the cost of the bill as meeting the President’s goal of being under $1 trillion because CBO scored it at $849 billion. But this is a budgetary sleight of hand, because what is actually being scored is the net cost of this spending in this bill won’t take effect until 2014. They are taking the 10 years with 4 years where the bill is not spending anything. If you score it for the 10 years following when it actually comes in, the bill costs $2.5 trillion, not $849 billion.

Given more time to analyze this bill, who knows what else we would discover? If the Democrats think this is the reform Americans wanted, why rush the bill through the Senate? Why rush it through before we have the ability to review details?

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The small business premiums are going to go up, if this bill is passed. Small businesses already have a hard time offering coverage to their employees. Why would we make the problem worse, especially when we have the highest unemployment in decades? We should be allowing small businesses to pool together and buy plans. We have
championed that proposal for years in the Senate, but we have never been able to get over the hurdles to pass a small business health plan. If we could do that, we could spread the risk. The bigger risk pools would produce lower premiums and allow more small businesses to pool their employees affordable health care coverage. Allowing businesses to pool doesn’t cost the government anything. Therefore, it would not require tax increases, as we see in the bill before us. The Democrats are trying to address the problem of unaffordable insurance by offering credits to small businesses to offset the cost of premiums. But the credit only lasts for 2 years. That is hardly anything that is going to encourage businesses to take on the added cost when the credit lasts for 2 years. I will be preparing amendments that at least double that to 4 years, expand the eligibility and duration of these credits so we can help small business through even 4 years is not enough. We should offer credits all the way through.

Offering tax incentives. There are small businesses and individuals in this country who have no access to affordable health care. Why not give every individual who purchases their own health insurance the same tax break a corporation gets for offering health care coverage to their employees? Employers who receive insurance through their employment pay the premiums and do not pay taxes on the premiums they spend for insurance. Why should individuals who purchase their own health care coverage be treated differently? I have a bill, with Senator DeMint, that will help provide insurance for more Americans through tax credits and competition. Our approach would be a tax credit for every individual, $2,000 per year, and for families $5,000 per year for their purchase of health insurance. This would allow individuals to purchase their own insurance and so they would not have to be affected by what their employer offers or if they change jobs. This is the kind of reform that could make a difference.

How about creating a transparent marketplace online for consumers to go in and shop and hopefully have bigger risk pools, more competition, bringing the cost down? That is not the kind of marketplace that is in this bill. This exchange has so many mandates on the plans that, like the Massachusetts exchange, it would raise the cost of premiums and would not help in any way bring the cost down so that premiums are more affordable.

These are the ideas that would improve competition in the marketplace. I can tell you, from the input I have received from my constituents since the bills have been out of committee, before the bill came to the floor or is on its way to the floor yesterday, it caused some committee that wrote bills that were put together and released yesterday, I have listened to what people say. I can tell you they don’t want Medicare cuts. They don’t want more taxes. Small businesses certainly don’t want more mandates. They don’t want government-run insurance. They know that a government plan is eventually going to crowd out the private insurance company plans throughout the country.

I am going to be preparing an amendment that will allow States to opt out without penalties, not just of the government insurance plan but of all the harmful mandates we have in the government opt-out by States, if they are going to still have to pay the higher taxes, if they are going to have to pay higher premiums to pay for the other States that have the plan? States should not be forced to participate in the government plan, nor subsidize and pay for such a plan through increased taxes.

I will prepare amendments that will exempt individuals and employers from the mandate to buy insurance, if this bill causes premiums to rise above their currently projected values.

The solution to health care issues is not to give more power to the government. The solution is to give more power to the American people. They deserve a marketplace that is in this bill. That is the guidelines regarding screening for breast cancer. Breast cancer is the second leading cause of death in women in this country. Whether and when to screen for breast cancer has been debated for decades. In 1993, the Clinton administration proposed the government takeover of health care. In that proposal put forward by the Clinton administration, there would be no payment for mammograms for women under the age of 50, there would be payment in the government plan for a mammogram every 2 years, exactly what has just been recommended by the Federal task force.

Since we have had the guidelines, which have been in place for many years, death rates from breast cancer have been declining. Since 1990, there are larger decreases seen in women younger than 50. The American Cancer Society states that these decreases are the result of early detection and increased awareness. The evidence has repeatedly shown that screening and early detection save lives.

Unbelievably, the United States Preventive Services Task Force has recommended against routine mammograms for women under 50, saying it is not worth subjecting some patients to unnecessary biopsies, radiation, and stress. The task force also recommended not teaching women to do regular self-exams. We have to ask the questions: Why this change? Why now? Nothing substantial in the clinical evidence, but the panel decided to review the data with health care spending in mind. Nearly everyone realizes that fewer screenings mean insurance plans, including a government-run plan, will save money.

This is how rationing begins. I hope America wakes up. This is how rationing begins.

In an article by the Wall Street Journal today, they recognized that. It reads: Every Democratic version of ObamaCare makes this Task Force an arbiter of the benefits that private insurers will be required to cover as they are converted into government contractors. What are the recommendations will become de facto rules, and under national health care these kinds of cost analyses will inevitably become more common as government decides where finite tax dollars are allowed to go.

That is a quote from the Wall Street Journal today.

The American Cancer Society came out with this incredible recommendation and said, with its new recommendations, the task force is essentially telling women that mammography at age 40 to 49 saves lives, just not enough of them. So if the screening is not going to save your mother’s or your sister’s or your wife’s, would that screening be worth it?

Decisions about care must be between a doctor and a patient, not a doctor who has a loyalty to anyone but the patient, not a doctor who is working for the government and having to maintain government task force guidelines, such as the one we have just seen.

That is the crux of the debate on this health care bill that has been released in the last 15 hours. I am so worried we are now beginning to see the handwriting on the wall. The President said once there is no reason we should not be catching diseases such as breast cancer and colon cancer before they get worse. It turns out, there is a reason: cost.

The insurance companies have sort of said in the last day or so that they are not even going to stop the coverage of mammograms for women starting at the age of 40. But when the government plan comes into effect, you know that every insurance company is going to say: If we are going to be competitive, we must adhere to the same standards as the government plan. It is going to happen.

We must have time to look at this bill. We must have time to look at what is happening, to the health care, to Medicare. The cuts in services, the taxes, the mandates are going to overwhelm the health care of our country. We must have time to look at this bill before we have a moratorium. We have time to study it. We must let our constituency study it because they will catch things they care about and they will inform us, and that is why we are here.

So I am very concerned that we are setting too fast on something we should be taking slowly and carefully to assure we are not going to do something we are not sure is right, and
where we have the chance, to change what we see is wrong.

Thank you, Mr. President.

The PRESIDING OFFICER (Mr. Udall of New Mexico). The Senator from Arizona.

Mr. KERRY. Mr. President, I wish to compliment the Senator from Texas for sounding this warning. Being from Texas, she is undoubtedly aware of a great country-western song out right now by Brad Paisley called "Welcome to the Future." I think we have seen a glimpse of the future under Obamacare here by this pronouncement of the U.S. Preventive Services Task Force recommending against the routine screening of women between ages 40 and 49 for best cancer.

I want to speak for about 60 seconds about this issue to go into the actual numbers from the study to which Senator Hutchison referred. The rationale of the study is that you would need to screen 1,339 women in their fifties to save one life, screening is not worthwhile. But since you would need to screen 565 additional women—in other words, 1,904, to be precise—in their forties to save 1 life, screening is not worthwhile. That is the kind of cost-benefit analysis that is rationing, and it is precisely Senator Hutchison's point that this is how rationing begins.

Welcome to the future.

Mrs. Hutchison. Mr. President, if the Senator will yield, I appreciate him giving us these statistics because it is 1 life out of 1,904 to be saved, but the choice is not going to be yours; it is going to be someone else who has never met you, who does not know your family history.

That was in the Clinton government reform, takeover of health care in 1993, and it was soundly rejected. It was soundly rejected. It was part of the reason it was soundly rejected—this mammogram rationing before the age of 50—because it was wrong, and every woman in the Senate at the time rejected—that plan, rejected keeping women under the age of 50 from having mammograms paid for by insurance plans.

So I thank the Senator from Arizona for connecting this and showing the statistics because this is not the American way of looking at our health care coverage. It is not the American way, and we must stop this government takeover of health care.

Mr. President, I yield the floor.

Mr. KERRY. Madam President, I speak in opposition to amendment No. 2705 to the Caregivers and Veterans Omnibus Health Services Act. This amendment, offered by Senator Coburn, would cut funding for international organizations, including U.S. contributions to NATO and the United Nations. This would gravely undermine our vital national security interests at a critical time. We all strongly support strengthening our nation's military capabilities and nation's veterans, but Senator Coburn's amendment sets up a completely artificial choice between protecting the health of America's veterans and ensuring that our Nation meets its national security objectives and international obligations.

To be clear, this amendment would cut funding from the contributions to NATO's peacekeeping account, which provides the assessed dues to the U.N. and NATO, APEC, OAS, OECD, and the OPCW, as well as take funding from the contributions to international peacekeeping operations account. That is why I oppose this amendment, for several critical reasons:

First, we obviously need as much support as we can get from our NATO allies for our joint mission in Afghanistan. We cannot, and should not, carry this burden alone and how can we ask NATO to do more while we are at the same time cutting our NATO contributions? This would seriously undermine our standing with NATO and with our NATO allies at a time when we can least afford it. We simply cannot afford to that happen.

Several other international organizations are also threatened by this amendment. Funding for the Organization of American States, which addresses threats to hemispheric security, from terrorism to narcotics, would be cut. The Organization for Economic Cooperation and Development, which promotes economic growth in 30 member states and more than 70 other countries, would lose funding. The Asia-Pacific Economic Cooperation, which promotes trade, security, and economic growth throughout the Asia-Pacific region, and which the United States will host in 2011, would also be cut. The Organization for the Prohibition of Chemical Weapons, which ensures worldwide implementation of the Chemical Weapons Convention, as well as the World Trade Organization, which provides the stable framework for international trade that is so vital to our United States, would suffer funding cuts.

Second, our United Nations contributions fund a wide range of U.N. activities in support of key United States foreign policy priorities. U.N. organizations are monitoring nuclear programs in North Korea and Iran. We need the best information possible about the nuclear programs in Iran and North Korea, and the last thing we need to be doing is cutting funding for the very organization that is doing the on-ground monitoring. The U.N. is also providing vital assistance for the upcoming elections in Iraq, which will be critical to the future of democracy there. U.N. food and agriculture agencies are combating food insecurity and food assistance. U.N. health agencies are on the frontlines of detecting outbreaks of avian flu and H1N1 and defending against them. In addition, we work through U.N. organizations to protect a range of U.S. interests, from the intellectual property rights of American entrepreneurs to coordinating international aviation safety standards.

Third, passage of this amendment would directly threaten ongoing peacekeeping operations in nations essential to America's national interests. There are now over 115,000 peacekeepers the second largest deployed military in the world serving in 17 missions in some of the most dangerous corners of the world. These U.N. peacekeeping operations are working to preserve peace and stability in fragile countries with grave humanitarian situations, including Darfur, Liberia, Lebanon, Haiti, and the Democratic Republic of Congo. U.N. peacekeeping is eight times less expensive than funding a U.S. force, according to the Government Accountability Office, and these peacekeeping operations help shoulder the burden with our military. U.N. peacekeeping missions also help end brutal conflicts, support stability, the economic development, and bring relief for hundreds of millions of people. And if not for U.N. peacekeeping missions, some of these conflicts could require the presence of U.S. soldiers.

The Asia-Pacific region is a good example. The U.N. force in Haiti has dramatically reduced the number of kidnappings that plague the nation and helped deliver food and medicine, clean streets, and maintain security after several successive tropical storms devastated the country. The mission in Haiti is in the midst of a successful transition from keeping the peace to enhancing security for the people of that country. In the 1990s, Florida faced wave after wave of illegal Haitians trying to escape from the failed state. Should this mission be abandoned? Should we abandon the people of Darfur?

Fourth, the President has stated his commitment to paying U.S. dues to the U.N. on time. As Ambassador Rice has said, we must meet our obligations. As we call upon others to help reform and strengthen the U.N., the United States must do its part and pay its bills. Our dues to the United Nations and other international organizations are treaty obligations. The full payment of assessed contributions affects the standing and influence that the U.S. has at these organizations. Going into arrears undermines U.S. credibility and negatively influences world opinion regarding the U.S. respect and appreciation for the role of multinational organizations that support and advance U.S. foreign policy.

We all want our veterans and their families to know that they have earned it many times over—but this amendment presents us a false choice between caring for our veterans and protecting our global interests: we must do both. It is for these reasons I oppose Senator Coburn's amendment and urge all Members to oppose the amendment as well.
2785 to the Caregivers and Veterans Omnibus Health Services Act of 2009.

This is a deeply flawed amendment that may hurt certain veterans of the wars in Iraq and Afghanistan. And for that reason, I must vote against it.

Several disabled veterans often need someone to care for them at home. The family members of these veterans often shoulder the burden of this care, which can take a significant financial, psychological, and emotional toll. This bill would provide a family member caregiver with health care, counseling, support and a monthly stipend.

But amendment No. 2785 actually seeks to shut certain Iraq and Afghanistan veterans out of this new benefit by mandating that only those who require “hospitalization, nursing home care, or other residential care” are eligible.

The Wounded Warrior Project characterized the impact of the amendment as such that it would “set a much higher bar” by requiring that the “veteran be so helpless as to require institutional care if personal care were not available.”

This would potentially shut out veterans suffering from severe mental illness, or those learning to adapt to life at home with blindness or amputations.

The Disabled American Veterans also echoed this concern as a reason for opposing this amendment, writing that the amendment’s “new restrictive eligibility language could actually reduce the number of severely wounded and disabled veterans returning home from the wars in Iraq and Afghanistan eligible for such services.”

For these reasons, I urge my colleagues to defeat this amendment, which is also opposed by the American Legion, the Iraq and Afghanistan Veterans of America and Swords to Plowshares.

It is long past time to pass the underlying bill. This legislation is too important to our veterans to sit in Congress because of the stall tactics of one lone senator.

It includes important health care improvements for women veterans including requiring the Department of Veterans Affairs to train mental health care specialists on how to better treat military sexual trauma. It also implements programs to provide child care to women veterans who require medical care.

In addition, the bill includes two important provisions from bipartisan legislation that I authored with Senator Boxer.

The first gives active duty service members access to vet centers, which are community-based counseling centers run by the Department of Veterans Affairs where veterans can receive mental health care services.

The second provision authorizes vet centers to counsel former servicemembers on their rights to present their medical records for review to ensure that the discharge process they underwent was fair. This is particularly important for servicemembers who may have been discharged improperly with a personality disorder and therefore are not entitled to benefits when in fact they suffer from a combat-related condition such as post-traumatic stress disorder.

We owe our veterans an enormous debt of gratitude, and the best possible treatment and care for injuries sustained in service to our country. This bill is an important step toward fulfilling that obligation.

The PRESIDING OFFICER. The Senator from Hawaii.

Mr. AKAKA. Mr. President, can you tell me how much time I have remaining?

The PRESIDING OFFICER. Remaining on the Senator’s side is 31 minutes 33 seconds; on the other side, 42 minutes 15 seconds.

Mr. AKAKA. Mr. President, let me make further comments about the pending bill on the floor and speak particularly about the cost of war.

To those who are concerned about the cost of this legislation, let me say firmly believe we cannot renege on the obligation we have honorably serve our country. When we as a nation vote to send American troops to war, we are promising to care for them when they return. The cost of veterans health care is a true cost of war and must be treated as such. The cost associated with the underlying bill does not need to be offset. The price has already been paid many times over by the service of the brave men and women who wore our Nation’s uniform.

Regardless of what my colleagues may think about the United Nations and its role in international affairs, this is not the time or place to be debating those issues. At this moment, we are talking about meeting veterans’ needs.

Iraq and Afghanistan Veterans of America agrees. IAVA writes that:

The amendment to S. 1963 brought to the floor is just the latest in a long series of delaying tactics that plays political games with veterans’ health care and services.

This bill would provide family caregivers—who typically have full-time jobs—with health care, counseling, support, and a living stipend. This modest stipend would be equal to what a home health agency would pay an employee to provide similar services.

To assert that this legislation requires excessive spending is simply wrong. This spending is critical when taking into account the sacrifices these men and women have made for the Nation.

The sponsor of the amendment we are considering has expressed the view that S. 1963 unfairly discriminates against veterans because its caregiver assistance provisions focus on OEF and OIF veterans. While it is correct that the caregiver provisions target the veterans of the current conflicts, I do not believe that constitutes discrimination.

The reasons for this targeting, at the least, are three: one, the needs and circumstances of the newest veterans in terms of the injuries are different—different—from those of veterans from earlier eras; two, the family situation of the younger veteran is different from that of older veterans; and three, by targeting this initiative on a specific group of veterans, the likelihood of a successful undertaking is enhanced.

I note that most major veterans groups support this bill and the caregiver provisions. I do not believe they would do so if they felt it was discriminatory.

As my colleagues know, I am a veteran of World War II. If we can provide help to the newest veterans in ways that were not available to the veterans of my generation, I support that 100 percent.

Caregivers from Iraq and Afghanistan are returning home today to face new and different challenges. In World War II, a third of those injured on the battlefield did not make it home. Today, 90 percent of those injured make it home but often with catastrophic and life-threatening injuries. Some of these injuries leave invisible wounds. Unprecedented rates of post-traumatic stress disorder and other mental illnesses are affecting these young men and women. These veterans will be cared for somewhere, and by what we do today, we may decide whether that care occurs in a nursing home or in their own home. The soldiers of my generation had no such choice. I say, let’s help the Nation’s newest veterans to really come home, and let’s help their families.

According to a report from the Center for Naval Analyses, 84 percent of caregivers for veterans were either working or in school prior to becoming a caregiver. An employed caregiver will lose, on average, more than $600,000 in wages, pension, and Social Security benefits over a “career” of caregiving. The younger veteran’s family, the more wages a caregiver will lose. We can no longer ask our newest generation to bear the cost of the Nation’s obligation to care for its wounded warriors.

The premise of the amendment seems to be, if it is good for some, it is good for all. But the needs of veterans are not the same, and expanding a benefit to any veteran who might benefit could endanger the entire program. The underlying bill already includes a provision directing VA to report to Congress within 2 years from the law’s enactment on the feasibility of expanding the provision of caregiver assistance to family members of non-disabled veterans. Such an approach is not discriminatory; it is the responsible way to approach the issue.

I note that other health care improvements which would result from this bill help virtually every group of veterans, including women veterans, homeless veterans, and veterans who live in rural areas.
Mr. President, 25 years ago—I will never forget this—I came home from school to find my mom, who was 45 years old, was in high school, and my mom and my dad sat me down and my mom told me that she had breast cancer. After that, as any kid would, I worried about whether my mom was going to live and what life would be like without a mom. It was a very difficult time for our family.

The good news is that my mom, through self-examination, found a lump, and she is today, 25 years later, a breast cancer survivor. But I am not sure that, if you were to ask my mom today and tell about the positive result that occurred if she had not undertaken that self-exam, if she had not received the care she was given so quickly and so effectively because she found the lump after having been trained and encouraged to do self-exams.

So she is a success story, and millions of women across this country are success stories because they have heed ed the advice of preventive medicine. They have listened to the advice for many years now from the American Cancer Society and other experts that self-exams and mammograms for women in their forties prevent breast cancer, and they prevent us from losing our moms and our sisters and our daughters. But this week, a task force, a government task force, kind of ironically named this week, a task force, a government task force, contradicted their previous recommendations and said women in their forties should not be having mammograms on a regular basis. That makes absolutely no sense.

We are in a world where everyone agrees the best advice for reducing healthcare costs and to increase longevity of people is through preventive medicine. We know through the success we have had in recent years that self-exams and mammograms save women’s lives.

There are going to be what they call false positives, women who find something that turns out not to be a lump. And, sure, they are going to be anxious during that time period while it gets checked out. But would you rather have your mom, your sister, your daughter be anxious for a couple days and get a good result or would you rather have them, on the other hand, not do the self-exam, not get the mammogram, and get cancer and potentially die? I hope not.

We know these mammograms for women in their forties save lives. We know self-exams save lives. It is not just me saying it; the facts show it. The American Cancer Society notes that since 1990, deaths from breast cancer have declined by 2.3 percent, and they have declined 3.3 percent for women in their forties and fifties. Lives are being saved.

So why would this government task force that is supposedly focused on prevention want to do away with self-exams and mammograms on a regular basis for women in their forties? What could be the reason?

The reason my colleague from Texas so eloquently stated, is cost. It doesn’t make sense anymore because we are not saving enough lives for the money that it is costing for mammograms. Our moms and our daughters and our sisters are worth that cost.

If you were to ask me where we are going with this new healthcare proposal and you want to know what the future is for how the government and your insurance company are going to view your health care, just take a look at how they look today and look they next going to say the same thing about men getting prostate exams in their forties? Are we going to start making these cost-based decisions or really furthering them to a degree that we haven’t seen before? Are we going to lose our family members because we are rationing medical care? These are big issues.

The American people, as my colleague from Texas said, need to wake up and they need to watch what is going to happen in this Senate, this great body that debates the important issues. Never has there been an issue as important in modern times as what is going to happen over the next month or 6 or 8 weeks as we discuss these issues that are going to affect our health and our families’ well-being.

I sent a letter to Secretary Sebelius yesterday on this issue. I saw her comments yesterday where she disagrees with the recommendation for the women for that. Women do not need to get the message now that they shouldn’t be doing self-exams. Women should not be getting the message that they shouldn’t be getting regular mammograms in their forties. They need to do both because it is going to help save their lives. No government task force, based on lack of any new information, should contradict its prior recommendations that they do just that.

I had a chance to speak with the surgeon general of the State of Florida, Dr. Ana Viamonte-Ros, yesterday about this issue, and she concurs with me, as does the American Cancer Society and other groups, including the American College of Obstetricians and Gynecologists, that women should still do self-exams, and they should still get mammograms on a regular basis in their forties.

I wish to read for this Chamber a letter that I received today from a friend of mine down in Broward County from my home State of Florida. She writes:

Please thank the Senator for his efforts on this important issue. I am a breast cancer survivor who was first diagnosed before 50 years of age having a mammogram. Subsequent to the mammogram, my tumor was removed surgically. Unfortunately, within 5 years, I was diagnosed again with breast cancer in the other breast and had to undergo surgery and chemotherapy. The second time I found the tumor through self diagnosis. Every day I thank God that I had a life-saving mammogram and that my doctor showed me how to do a self examination.

Just recently I learned through TV that there are also recommendations that women should not utilize self exam as a way to detect breast cancer. It’s too unreliable. More important, my sisters and my friends found their tumors through self-exam. Please ask the Senator to dispel any efforts or notions that self exam is not a good means of detection.

This is an important issue. We need to get the message out to the women of America that these recommendations are wrong. I only can stand here today with this good story about my mom because if she wouldn’t have done that self-exam, she might not be here with us.

So I hope the American people will, as my colleague from Texas said, wake up and see what this means and what this portends for the future.

With that, I yield the floor.

The PRESIDING OFFICER. The Senator from Hawaii is recognized.

Mr. AKAKA. Mr. President, I wish to make further comments on some of the concerns our speakers have had.

As the Senator from Hawaii has stated his primary goal is to increase veteran eligibility for caregiver assistance. It appears, however, that the amendment could well have the opposite effect and deny caregiver assistance to many OEF/OIF veterans by significantly narrowing the eligibility criteria for caregiver assistance.

The amendment would add a provision that would require that in addition to sustaining a serious injury and requiring personal care, a veteran be so helpless as to require institutional care if personal care services were not available. This proposed modification is problematic because not all veterans in need of caregiver assistance would be appropriate for such need of institutional care.

To illustrate, consider the example suggested by the Wounded Warrior Project, one of the principal advocates for the caregiver legislation: A veteran who is recovering from severe wounds, suffers from PTSD and depression, and needs help with feeding, dressing, and getting to the bathroom, under the provisions in S. 863 this veteran would...
be eligible for caregiver assistance. However, since the veteran in this example would not necessarily benefit from or require institutional or residential care, the veteran would not be eligible for caregiver assistance under the changes proposed by the amendment. Given the veteran's co-occurring PTSD and depression, however, the VA's failure to provide that assistance could have a severe impact on the veteran's mental health and well-being.

PTSD, one of the signature wounds of the current war, is a condition which many long-term institutional care settings and nursing homes are not prepared to handle or treat. As a result, the inclusion of this new eligibility condition would exclude many veterans in critical need of caregiver assistance.

There is another problem raised by the amendment's proposed expansion of the caregiver assistance to all veterans. By expanding eligibility for caregiver assistance to all severely injured veterans, the amendment would convert a manageable initiative targeted on the veterans of the current conflicts into a huge undertaking that would surely encounter many problems.

The reasoning behind initially administering services to a smaller pool allows for greater efficiency and the opportunity to improve before expanding such services to a larger universe of veterans.

I note that the Disabled American Veterans argues against the pending amendment because of its potential impact. DAV writes, and I quote:

While the amendment proposed by Senator Coburn seeks to extend caregiver services to veterans from all eras, its new restrictive eligibility language could actually reduce the number of severely wounded and disabled veterans returning home from the wars in Iraq and Afghanistan eligible for such services. For this and other reasons, DAV does not support the Coburn amendment to S. 1963.

I ask unanimous consent that this letter be printed in the RECORD. There being no objection, the material was ordered to be printed in the RECORD, as follows:

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DISABLED AMERICAN VETERANS,

November 19, 2009.

Hon. Daniel K. Akaka,
Chairman, Senate Veterans’ Affairs Committee,
Rajchel Senate Building, Washington, DC.

Dear Chairman Akaka: On behalf of the Disabled American Veterans (DAV), thank you for calling quickly before the floor the S. 1963, “The Caregiver and Veterans Omnibus Health Services Act of 2009.” DAV strongly supports Senate approval of this legislation as introduced, and urges all Senators to support its passage.

S. 1963 combines the content of two prior measures (S. 252 and S. 801) into a single VA health care omnibus bill that would make significant enhancements in VA health care services. This legislation contains vital provisions to help assure equal access to and quality of care for women veterans.

S. 1963 would also provide desperately needed support to family caregivers of severely disabled veterans, particularly those returning from Iraq and Afghanistan, as well as expand mental health services, improve traumatic brain injury care and aid homeless veterans.

As we have shared with you in testimony earlier this year, DAV believes that disabled veterans of all eras could benefit from family caregiver support services. While the amendment proposed by Senator Coburn seeks to extend caregiver services to veterans from all eras, its new restrictive eligibility language could actually reduce the number of severely wounded and disabled veterans returning home from the wars in Iraq and Afghanistan eligible for such services. For this and other reasons, DAV does not support this Coburn amendment to S. 1963.

Mr. Chairman, we look forward to continuing to work with you, Ranking Member Burr, your counterparts in the House and others to craft the most expansive and effective caregiver assistance program that we can achieve. Again, thank you for your vigorous leadership on this legislation and for all you have done to support disabled veterans and their loved ones who care for them.

Sincerely,

Joseph A. Viola
National Legislative Director

Mr. AKAKA. Mr. President, the proponent of this amendment has expressed the view that this veterans omnibus bill should allow for veterans to do so by directing a transfer from the State Department to VA of funds appropriated for “Contributions to International Organizations” and “Contributions for International Peacekeeping Activities,” both of which are categories of large U.S. payments to the United Nations.

Regardless of any Senator’s beliefs about the role of the United Nations or U.S. support for the U.N., this is neither the time nor place to be debating those issues. For that reason alone, I believe the amendment should be rejected.

I understand from CBO, however, this amendment does not even accomplish what I believe the amendment’s author intends. According to CBO, the cost of the bill would still be estimated at the same level. According to CBO, having the State Department transfer funds to the VA is no different than having VA fund it through its own appropriations accounts.

It also appears that the amendment would change nothing with respect to U.S. payments to the U.N. Again, according to CBO, if the amendment’s author wishes to have the State Department transfer funds to VA instead of contributing to the U.N., the amendment would have to be made to the State, Foreign Operations, and Related Programs Appropriations Act, and not to the pending measure which is an authorization bill.

This legislation has been delayed too long. To continue to obstruct this vital veterans bill while attempting to link it completely to unrelated U.N. spending is simply unacceptable.

This amendment should be rejected and S. 1963 should be passed by the Senate.

I yield the floor and reserve the remainder of my time.

The PRESIDENT pro tempore: The Senator from Oklahoma is recognized.

Mr. COBURN. Mr. President, I listened very carefully to the chairman of the Veterans’ Committee. He misses one major point: If, in fact, we don’t send the money to the U.N., we will have money to pay for the veterans—if we don’t send the money.

That is what this amendment does. It prevents the money that may come from the State Department’s budget to the U.N. I admit it is fungible, but that is money we will not send to something that is low priority, that is wasteful, that is nontransparent, and that the money could be better spent on family caregivers of severely disabled veterans, particularly those returning from Iraq and Afghanistan.

I also take issue with my friend’s words that it is time. I think the chairman will agree that this bill was not noticed until October 28. That is when this bill was noticed. When the bill was noticed, the next day a unanimous consent request came through to say pass this without any debate, without any discussion, pass it through the Senate. I said, no, we ought to have a debate. At that time, we passed the Veterans’ Committee a list of some 20 options of things that are lower priority than helping our veterans. They were rejected out of hand, which is the problem I have been describing on the floor earlier.

Every time it comes down to making a choice, the majority of this body chooses not to make a choice, not to choose a priority, not to do what we get paid to do, not to make choices in the best interests of the Nation. They choose to not choose. But by choosing not to choose priorities, we still choose, because what we choose is to take the money from our children. We choose to lower the standard of living of our children.

I want to tell you about veterans with whom I have spoken. I have had a lot of calls on this, because how dare somebody hold up a veterans bill before Veterans Day. The vast majority of the calls say we think you ought to support veterans, but we also think you ought to pay for it. Our country can’t keep doing what we are going to do. So on the last appropriations bill through this body, I gave you an opportunity. We have heard three Senators today say there is no price we should not give to support our veterans. Direct quotes, “No price is too great”? There is one price that is too great, because all three of those Senators who spoke said we think you ought to earmark their earmarks to pay for veterans in the VA-MILCON bill. They all voted against paying for it in the MILCON bill by eliminating the unrequested items they had earmarked for them in the VA-MILCON bill. So, yes, there is a price that is too great—the price of helping yourself and your own constituency on a parochial basis and putting that ahead of the best interests for our veterans. So the words “there is not a price too great”; ring hollow.

I ask unanimous consent to add Senators INHOFE and BURR as copromoters of my amendment.
Mr. COBURN. Mr. President, as we talk about this debate, as my colleagues know very well, the debate isn’t about veterans; it is not about the veterans budget. It is about reallocating some fiscal sanity in Washington of which we have none. This bill here—the health care bill that was released last night—over the next 10 years will spend $2.5 trillion. That is what it will spend. We don’t know the accuracy of CBO. They certainly haven’t done very well in the past on health care, as to whether it saves money. What we do know is that it doesn’t cut the cost of health care, which is the problem. It transfers $2.5 trillion under the guise of the control of the Federal Government, which is not efficient.

I have not heard one colleague defend the United Nations. Nobody will get up in this body and defend the atrocities, the waste, and the fraud of the U.N. Nobody will say that. But those same people who actually agree with it but won’t do anything about it will vote against this amendment. They will vote against the amendment. They won’t defend what has very accurately been called the behavior of the lack of fiscal sanity, the fraud and theft, the rape and pillage by the peacekeepers, the lack of oversight, and the total lack of transparency. They will say that with their words, but they will defend it with their vote. They are going to absolutely defend it with their vote. Once again, they are going to refuse to make the hard choice. Most of them listening to this agree, but it is the wink and nod that we play around this body. They know the U.N. is a big mess. They know it is a big problem. But they won’t do anything to fix it. They will vote for complete transparency and vote to condition our funds on transparency. If you open your eyes, you will see that we are going to borrow more, and we are going to collect less. What is the implication of that? What is the implication of borrowing money we don’t have and spending it on things that are not a priority, such as caring for veterans? The implication is that it will come to an abrupt halt in a very damaging and painful way—maybe not for us in this body but certainly for my children and my grandchildren, and certainly for those who follow us.

There is a difference between the financial aspect of it. It is that we are losing, as we do this, the very integral part of what makes our Nation great. It is called “sacrifice.” That is why we honor our veterans. It is because they sacrificed, they put themselves on the line. Our heritage has been, from the founding of this country, to the very people who risk their lives and fortunes to initiate this country—the heritage has been of one generation sacrificing so the next generation can have greater opportunity and greater freedom and greater liberty.

I have tremendous worry for our Nation. If you open your eyes, you will see, because we cannot keep doing what we are doing.

Some statistics. These are accurate, based on GAO, OMB, and Congressional Budget Office:

Ending September 30, not counting the supplemental, the Federal Government spent $32,000 for every household in this country. But we only collected an average of $18,000 per family. We borrowed, per family, $15,603 last year. Those numbers are going to be bigger next year. We are going to spend more, we are going to borrow more, and we are going to collect less. What is the implication of that? What is the implication of borrowing money we don’t have and spending it on things that are not a priority, such as caring for veterans? The implication is that it will come to an abrupt halt in a very damaging and painful way—maybe not for us in this body but certainly for our children and our grandchildren, and certainly for those who follow us.

There is a difference between the financial aspect of it. It is that we are losing, as we do this, the very integral part of what makes our Nation great. It is called “sacrifice.” That is why we honor our veterans. It is because they sacrificed, they put themselves on the line. Our heritage has been, from the founding of this country, to the very people who risk their lives and fortunes to initiate this country—the heritage has been of one generation sacrificing so the next generation can have greater opportunity and greater freedom and greater liberty.

As I said earlier, when we come back and get down to the actual voting on this amendment, most people will say: We can’t do that. It is not time to make a hard choice.

I want to tell you, those veterans who have closed-head trauma made a hard choice. Those veterans who lost their eyesight and are blind made a hard choice. Those who lost a limb made a hard choice. Those veterans who have severe disability and their families made a hard choice.

In a little while, we are going to dis-honor that, because we are going to refuse to make a hard choice and rationalize in a way that it isn’t going to do any good or make any difference, and we are not going to even attempt to get the out-of-control spending in Washington under control. We will reject the notion that you can, in fact, look at something and see what it is like, such as the corruption, such as the theft, such as the rape and pillage of the U.N. peacekeeping troops, and we are going to say that is not important, and what is important is that we keep doing it the way we have always done it. We will continue to do it the way we have always done it.

The way we have always done it for the past 20 years does not honor what built this country. It doesn’t honor making that sacrifice. It does not honor saying I will make a tough vote, even though the administration doesn’t want me to make this vote. I will make that vote that is right for the country, right for the future, right for our kids and our grandkids. I will make that vote.

We will not see that today. We will not see the courage mustered up to choose to make the opposite choice. There is the choice: Ignore with a blind eye the absolute tragedies that are going on at the United Nations, the absolute waste, the incompetency, the favoritism, the theft that is going on and say you did something good for veterans.

The fact is, the reason our veterans have such severe injuries is because they protect our liberty, protect our freedom, and protect our future. We are not going to choose the opposite. We are going to choose the opposite. We are going to say this amendment does not make sense.

When will we muster the courage to make a real choice, to go out and defend that veterans are worth more than the waste at the United Nations? We will not make the choice because we know we can vote against this amendment and still tell the veterans we did it. So my colleagues have a choice. Here is the choice: Ignore with a blind eye the absolute tragedies that are going on at the United Nations, the absolute waste, the incompetency, the favoritism, the theft that is going on and say you did something good for veterans.

When their standard of living is 35 percent below the standard of living we experience today—by the way, that is what is forecast as the government takes over 40 percent of the GDP of this country and as we end up with interest costs in excess of $1 trillion a year just to fund the excesses of what we are doing today, which is less than 5 years away, and we will be spending $3 trillion a year. We are not going to have any recollection of this vote. We will have no recriminations against us. We will have just voted and said that is
another amendment to try to make us make a choice, but we refuse to make one.

By voting against this amendment, you are defending the audacity, corruption, inefficiency, and fraudulent behavior of the United Nations. That is what you are doing. Nothing can be cut. Have you noticed that? Nothing is not important to the politicians of this city. Everybody has an interest group. Oh, we can’t go against that. That is an absolute formula for disaster for our country.

I wish to enter into the RECORD some additional information on the United Nations. I only touched the surface on the amount of outlandish things that have gone on in the United Nations. I did not mention Oil for Food, billions of dollars, and of the people who took all that money, none of them got prosecuted. The U.N. Headquarters renovation is going to cost $2 billion and should cost about $800 million. I did not talk about that or the lack of transparency in terms of the State Department, in terms of reporting how our money is spent at the United Nations. I only touched the surface on the United Nations.

I ask unanimous consent to have printed in the RECORD this information.

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

AMENDMENT S1542

REDIRECT U.S. DUES TO THE UNITED NATIONS TO THE VETERANS CAREGIVER PROGRAM

The United States is the single largest contributor to the United Nations, providing over $4 billion annually to the United Nations system that is estimated to be at least $20 billion. No one knows for sure how big the U.N. really is—not even the U.N. itself since it operates in an opaque, unaccountable fashion, refusing even the most basic of transparency requests.

The budget that is rife with waste, fraud, and abuse, but the U.N. budget is far worse. Its funding is complicated by diplomatic immunities, spends across international bodies. The soldiers then raped 16 women and cut off their arms, and then threw their bodies into a mass grave, where they were left to rot. The U.N. Foundation is devoted, in part, to promoting a positive image of the United Nations. It has spent $31 billion in humanitarian assistance to Iraq.

For example, the most recent audit of U.N. peacekeeping operations found poor internal controls and recommended that the investigation into these cases is being undermined by bribery and witness intimidation by U.N. personnel.

In 2006, it was reported that peacekeepers in Haiti and Liberia were involved in sexual exploitation of refugees. In 2007, leaked reports indicate the U.N. has caught 200 peacekeepers for sex offenses in the past three years ranging from rape to assault on minors. In all of these cases, there is no known evidence of an offending U.N. peacekeeper being prosecuted.

Just this month, Human Rights Watch reported that Congolese armed forces, supported by U.N. peacekeepers in the eastern Democratic Republic of Congo, brutally killed hundreds of civilians and committed widespread rape in the past three months in a military operation backed by the United Nations.

Most of the victims were women, children, and the elderly. Some were decapitated. Others were chopped to death by machete, beaten to death with clubs, or shot as they tried to flee.

The peacekeeping mission provides substantial operational and logistical support to the soldiers, including military firepower, transport, rations, and fuel.

The attacking Congolese soldiers made no distinction between combatants and civilians, shooting many at close range or chopping their victims to death with machetes. In one of the hamlets, Katanga, Congolese soldiers took young men, cut off their arms, and then threw their heads and limbs 20 meters away from their bodies. The soldiers then raped 16 women and girls, including a 12-year-old girl, later killing four of them.

The U.S. now pays 27% of all U.N. peacekeeping operations. Reducing our contribution to U.N. peacekeeping could help ensure that U.N. peacekeepers are not funding widespread rape and exploitation of refugees.

The United Nations cannot account for tens of millions of dollars provided to the troubled Afghan election commission, according to two confidential U.N. audits and interviews with current and former senior diplomats.

The Afghan election commission, with tens of millions in U.N. funding and hundreds of millions in U.S. funding, facilitated mass election fraud and operated ghost polling places.

"Everybody kept sending money" to the elections commission, said Peter Galbraith, the former deputy chief of the U.N. mission in Afghanistan. "Nobody expects U.S. taxpayers spent hundreds of millions of dollars on a fraudulent election." Galbraith, a deputy to the senior U.N. official in Afghanistan, was fired last month after protesting fraud in the elections.

As of April 2009, the U.N. spent $72.4 million supporting the electoral commission. The Special Inspector General for Afghanistan Reconstruction states that the United States provided at least $293 million in funding for the election.

In one instance, the United Nations Development Program paid $8.8 million for transportation costs in areas where no U.N. officials were present. Overall the audits found that U.N. monitoring of U.S. taxpayer funds was "seriously inadequate."

The United Nations wasted millions in funds for critical Afghan reconstruction projects. The United States is the single largest contributor to the United Nations and largest contributor to the United Nations. It has provided at least $293 million in funding for the election.

In 2006, the United Nations (UN) Security Council and Iraq began the Oil for Food program to address Iraq's situation after sanctions were imposed in 1990. More than $57 billion in oil revenue was obtained through the program, with $31 billion in humanitarian assistance transferred to Iraq.

The Oil for Food program had weaknesses in the four key internal control standards—risk assessment, contract activities, information and communication, and internal controls—facilitating Iraq's ability to obtain illicit revenues ranging from $7.4 billion to $12.8 billion. In particular, the UN did not provide for timely assessments to address the risks posed by Iraq's control over contracting and the program's expansion from emergency assistance to other areas.

According to GAO, the Oil for Food program was flawed from the outset because it did not have sufficient controls to prevent the Iraqi regime from manipulating the program.

GAO identified over 700 findings in these reports. Most reports focused on U.N. activities in Iraq, which included coordination, planning, procurement, and logistics support. The program's expansion from emergency assistance to other areas.

According to GAO, the Oil for Food program was flawed from the outset because it did not have sufficient controls to prevent the Iraqi regime from manipulating the program.

U.N. HEADQUARTERS RENOVATION

In 2008, the United Nations began construction associated with its Capital Master Plan to renovate its headquarters complex in New York City. As the U.N.'s host country and largest contributor, the United States taxpayer has a vested interest in the way funds are spent in renovating these buildings.

The United Nations headquarters renovation, now estimated to cost $2 billion from 2008 to 2012, is expected to cost almost $1 billion above its budget before breaking ground on the project. Part of
the cost increase is due to previously hidden “scope options” for “environment friendly” options like planting grass on the roof and electricity-producing wind turbines.

First, it is needed to adequately maintain its complex after 50 years of deterioration and decay. The U.N. paid millions of dollars to an Italian design firm that had to be retracted on account of the design not being adequate and after never producing a single workable plan for the renovation project.

The U.N. renovation project is just another example of a project out of control. The U.N.’s purported $2 billion renovation budget includes over $550 million for expected increased costs and other “contingencies.”

As the United States is responsible for 22% of the U.N. budget, it is entirely reasonable that we would likely come after the $1.9 billion responsibility for at least $220 million in the renovation project.

Unfortunately, the U.N. renovation program is carried out by the same system responsible for at least $485 million in the renovation of the U.N. buildings. However, this figure is likely to rise as GAO has assessed that there exists a high risk that the project will cost much more than anticipated.

The current cost of the U.N. renovation is as follows: $300 million for construction, $500 million budgeted future escalation in costs, $200 million for contingency, $75 million for redundancies (extra generators, additional fiber optic lines, etc), $40 million “sustainability” (wind turbines, grass on roof, etc). The U.N. European “palace” renovation

In addition to housing a massive bureaucracy in New York, the United Nations also keeps a European headquarters, in scenic Geneva, Switzerland. The similarity is striking, as this 70 year old building that used to house the European headquarters is reportedly in need of a billion dollars to fully renovate the “Palais des Nations,” as the U.N. building is known, because the building suffers from 70 year old cracks, rusty pipes, asbestos, and a roof caving in.

For cost comparison, $1 billion could build 497,244 square meters of office space in Geneva, Switzerland. That’s one Oil-for-Food scandal later the U.N.’s own internal audits suggest that the entire procurement system is plagued by corruption.

The overwhelming majority of the U.N. budget goes to staff salaries and common staff costs including travel to resorts to discuss non-proliferation and direct humanitarian assistance or conflict prevention. The U.N. has never identified offsets in existing funding in order to pay for new U.N. spending, a position supported by a U.N. General Assembly resolution.

Following the U.N. Secretariat’s poor example, 3% of the U.N. not covered by the U.N. budget, have experienced massive budget growth due to a complete inability to control spending. Peacekeeping is growing by 40%, the U.N. tribunals by 15% and numerous other categories are no better off.

The State Department is willfully ignoring the law in reporting transparency on U.S. contributions to the United Nations

The U.S. taxpayer should not be giving billions in funding to the U.N. and then be refused basic information about that contribution. The Office of Management and Budget and the State Department are willfully ignoring the law regarding congressional reporting requirements for U.N. contributions.

In the National Defense Authorization Act of 2007 and the National Defense Authorization Act of 2010, the Director of the Office of Management and Budget (OMB) is now required by law to report annually to Congress the total cash and in-kind contributions to the U.N. from the United States. OMB has passed this responsibility to the State Department, and unfortunately, our lead agency on U.N. matters ignored this law in 2007, and when it finally provided the required funding reports in 2008, it appears that the reports are missing over $1 billion worth of funding information. The State Department has not submitted its report for 2008.

Ranking Member Ileana Ros-Lehtinen of House Foreign Affairs Committee comments on the U.N. lobbying for more contributions from the U.S.

“Last year, American taxpayers ponied up nearly $5 billion for the U.N. system. The U.S. is by far the world’s largest donor to the U.N. And yet, we are only now learning the true cost of peacekeeping operations. The U.S. responds to emergency appeals. We are always on deck. Yet, the head of the U.N. comes to Congress and scolds us for not doing enough! He demands yet more money from us while making little progress in cleaning up the badly-broken U.N.

The U.N.’s ineffectiveness is not from a lack of cash, but the result of a corrupt system which wastes money and apologizes for dictatorships.

“The U.N. has been hijacked by a rogues’ gallery that uses our funds to undermine peace and security. Dictatorships use the Human Rights Council and Durban 2 conference process to restrict universal freedoms and protect extremists. The U.N Relief and Works Agency (UNRWA) aid violent Palestinian terrorists and the Palestinian Authority, which is laundering banks under U.S. sanctions or under U.S. investigation for financing Islamist militants. The U.N. Development Program (UNDP) pays the legal fees of its corrupt officials but refuses to protect whistleblowers.

While Iran, Syria, and North Korea endanger the entire world, the U.N. is preoccupied with condemning democratic states like the U.S. and Israel.

In conclusion, the U.S. is facing serious economic challenges here at home. How can a morally bankrupt U.N ask our taxpayers to bail them out?”

Mr. COBURN. Mr. President, I will finish and give the Chairman the last word. What the chairman and his committee are attempting to do is honorable. It is the right thing to do to help our veterans and to secure and help those who are helping our veterans. I ask the American people to see that we ought to do that on the backs of our children. I think we ought to do it on our backs. We ought to carry that load. Our children and our grandchildren should not have to carry that load. We owe it to the Americans who have sacrificed for the sacrifices they have made for us. This bill does not do that.

This bill takes the easy route. It says you do not have to pay for it, it is not required. There is not anything we can get rid of. After I offered all these options to the committee in terms of what they could get rid of that would pay for it. If we do not pay for it from what I offered, then get rid of our own earmarks, the things that make us look good. We chose to keep our earmarks and charge it to our grandkids, It is a wonderful choice and a wonderful thing for the American people to see.

On this vote, they are going to see three things. They are going to see all the people who voted to keep their earmarks vote against this amendment. The first thing they are going to say is: My earmarks are more important than paying for veterans, caregivers, and everything else expanded in this bill.

The second thing they are going to see is that we do not have the courage to take on fraud, waste and abuse and lack of transparency at the United Nations. They are going to see us fail to live up to the expectations they have for us.

The third thing they are going to see is that we do not have the courage to take on fraud, waste and abuse and lack of transparency at the United Nations. They are going to see us fail to live up to the expectations they have for us.

Mr. President, if you believe that anybody in America knows we are in trouble financially, They know the Federal Government is too big. They know the Federal Government is inefficient. They know we can do better. They are just wondering when we are going to start. When will it start? When will we make a hard choice? I regret it is not going to be on this bill because it is symbolic. If there ever was a bill on which we should start to make the hard choices, it should be on a bill that honors and takes care of the people who have made hard choices for us, the people who have sacrificed their lives and their future and their families for us.
The third thing, regrettably, that they are going to see is that we are going to continue to play the game the way it has been played: Get the votes to defeat the amendment; we will take a little bit of heat; maybe somebody will notice. I will tell you. Twenty years from now, our kids are going to notice, our grandkids are going to notice.

One final thought. If you are under 25 in this country, pay attention to me right now. If you are under 25—there are 15 of you. Twenty years from now, you and your children will each be responsible for $1,919,000 worth of debt of this country for which you will have gotten no benefit—none. The cost to carry that will be about $70,000. That is not per family, that is per individual. The cost to carry that will be about $70,000 a year before you pay your first tax.

Ask yourself if you think we are doing a good job when we are going to take away your ability to educate your children, when we are going to take away your ability to own a home, and we are going to take away your ability to have the capital formation to create jobs in this country. Watch and see. That number is going to grow every time we do something like this without paying for it, without offsets, without getting rid of something less important.

I yield back the time and yield the remainder of my time to the chairman of the committee.

The PRESIDING OFFICER. The Senator from Hawaii is recognized.

Mr. AKAKA. Mr. President, I wish to make a point of clarification. This bill, the pending measure, is made up of two bills which is now S. 1963. It was S. 252, which was reported in July, and S. 801, which was reported in mid-October. Both bills were held at the time they went into the calendar. No amendment was prepared to either bill. The first amendment was proposed on Monday of this week, 2 weeks after the bills were combined as S. 1963.

In closing, the debate about the United Nations is not one which belongs on a veterans bill. The underlying bill is a bipartisan approach to some of the most urgent issues facing all veterans—for women veterans, for homeless veterans, to help with quality issues to help all veterans.

This bill, by the way, also includes construction authorization for six major VA construction projects already funded by the VA spending bill.

I urge our colleagues to reject the amendment to S. 1963.

Mr. AKAKA. I yield back my time.

I suggest the absence of a quorum.

The PRESIDING OFFICER (Mr. FRANKEN). The clerk will call the roll.

The bill clerk proceeded to call the roll.

Mr. LEAHY. 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. LEAHY. I thank the Chair.

EXECUTIVE SESSION

NOMINATION OF DAVID F. HAMILTON TO BE UNITED STATES CIRCUIT JUDGE FOR THE SEVENTH CIRCUIT

The PRESIDING OFFICER. Under the previous order, the Senate will proceed to executive session to resume consideration of the following nomination, which the clerk will report.

The bill clerk read the nomination of David F. Hamilton, of Indiana, to be United States Circuit Judge for the Seventh Circuit.

Mr. LEAHY. Mr. President, is there a division of time in this matter?

The PRESIDING OFFICER. The time until 2:30 is equally divided.

Mr. LEAHY. Mr. President, I yield myself 10 minutes.

Mr. LEAHY. Mr. President, the Senate is concluding its long-delayed consideration of the nomination of Judge Hamilton to be United States Circuit Judge for the Seventh Circuit. Early this week, 70 Senators—Democrats, Independents and Republicans—joined together to overcome a filibuster of this nomination. This has been a record year for filibusters by the bipartisan minority: filibusters of needed legislation, filibusters of executive nominations and filibusters of judicial nominations, which just a few years ago they proclaimed were "unconstitutional." Although their filibuster failed, what they achieved was obstruction and delay.

This is a nomination that has been stalled on the Senate Executive Calendar for 5½ months, since June 4. In the days since that bipartisan majority of 70 Senators reached an agreement that would make a filibuster of this nomination impossible to sustain, filibusters of needed legislation, filibusters of executive nominations and filibusters of judicial nominations, which just a few years ago they proclaimed were "unconstitutional." Although their filibuster failed, what they achieved was obstruction and delay.

As has been reported since the nomination was made in mid-March, President Obama's nomination of Judge Hamilton as his first judicial nominee was intended to send a message of bipartisanship. President Obama reached out and consulted with both home State Senators, Senator Lugar and Senator Bayh, a Republican and a Democrat, in making his selection. This stands in sharp contrast to the methods of his predecessor, who was focused on a narrow ideological effort to pack the Federal courts, often did not consult, and too often tried to force extreme candidates through the Senate. That is why I venture to contrast to the methods of his predecessor, who was focused on a narrow ideological effort to pack the Federal courts, often did not consult, and too often tried to force extreme candidates through the Senate.

This is a nomination that has been achieved was obstruction and delay. Their filibuster failed, what they proclaimed were "unconstitutional." Although their filibuster failed, what they achieved was obstruction and delay.

Mr. LEAHY. Mr. President, I yield myself 10 minutes.

Mr. LEAHY. Mr. President, the Senate is concluding its long-delayed consideration of the nomination of Judge Hamilton to be United States Circuit Judge for the Seventh Circuit.

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The unfair distortions of Judge Hamilton’s record by right-wing special interest groups seeking to vilify him...