longer place lifetime limits on care. Think about what that means to this family who picked up and moved and looked for a new job to get health insurance to keep their boys alive. Is that what America should be? I think not.

Let me be very blunt about this. As good as this law was, it was not perfect. There are things that need to be addressed, examined, and changed. I have said before, and say again, the only perfect law was written on stone tablets and carried down a mountain by ''Senator Moses.'' Everybody else has been trying and hasn't quite hit that standard. So let's be humble about this and be open to change. But let's not repeal this, as the Republicans have called for time and again. Let's not say to the Lathrop family: Sorry. You are on your own if another lifetime limit comes along that may literally endanger the lives of these two beautiful little blue-eyed boys.

That is what this debate is about. It is a story about a real family. That is why the other side hates to hear these stories, because the stories literally explain why stepping backward in time and repealing health care is exactly the wrong course for America.

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

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

The assistant legislative clerk proceeded to call the roll.

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 Madam President, I ask unanimous consent that the order for the quorum call be rescinded.

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

A SECOND OPINION

Mr. BARRASSO. Madam President, we are just about 1 year to the day from the day the President signed into law the health care law that is going to have an impact on all the people of this country. Here we are, 1 year later and we know a lot more about this law and people all around the country know a lot more about this law.

I spent part of the weekend visiting folks in Buffalo, WY, attending the Buffalo health fair. A health fair is a place in the community where people get together and get their blood tested ahead of time. It is very inexpensive. It is based on prevention and early detection—issues this health care law was supposed to address but has failed miserably at. At the health fair, I talked to people who were getting their blood results back, checking their cholesterol, checking their blood sugars to see about diabetes, checking their thyroid levels, and as these people were getting their blood tested—and many people, probably half the population of Buffalo, turned out to have their blood tested—they started asking me questions about the health care law, the kind of questions any American would be concerned about: Am I going to lose my freedoms? Am I still going to be able to keep my doctor? Will it truly get the cost of care down?

Regrettably, this health care law, now 1 year since it has been signed, turns out to actually be bad for patients, bad for providers—the nurses and the doctors who take care of those patients—and bad for the taxpayers, the people left footing the bill because we know a lot more now, 1 year after the law was passed, than we did when it was passed.

People remember this as the law that was crammed through the Senate in the dead of night, written behind closed doors, and all the unseemly bargains that were cut to convince Senators to vote for it, getting by on the barest number of votes. There were things such as the cornhusker kickback, the Louisiana purchase—the sort of things that offended people all across this country. So people are upset with this health care law, No. 1, in the way it was passed: In spite of the fact the President promised it would be seen on C–SPAN, all the discussions were held behind closed doors and despite the fact that many Americans never had a chance to read this 2,700-page law.

When the President made his initial speech about what he was aiming to accomplish in health care reform, I said that would be great. I am an orthopedic surgeon, practiced medicine for 25 years, and I think we need to do the sorts of things the President initially addressed. Unfortunately, the health care law went in the opposite direction. When people worked their way through the 2,700-page bill, they found that instead of lowering the cost of care, the cost of their care was going to go up; instead of allowing people to keep the doctor they wanted, they were going to, unfortunately, have to change that situation. That is why I have been coming to the floor week after week with a doctor's second opinion about this health care law.

So here we are, 1 year later. We know the cost of health care is going up. The President said health care premiums would be lower for families by $2,500. No family has seen that—or none that I know of; certainly none I have talked to in Wyoming, not one. Instead, people have seen the cost of their health insurance going up, not down.

The President said he was never going to raise taxes. It turns out, in fact, there are a lot of tax increases as part of this health care law. Even the 1099 form Senator JOHANNS has championed on the part of small businesses around the country, the efforts to remove these onerous obligations on our small businesses, have nothing to do with health care. That got crammed into this bill in the dead of night so those who support the bill can claim it was going to lower the cost. Even the Congressional Budget Office admits costs are going up, not down, and this is absolutely impacting jobs.

The President promised there would be efforts for small businesses to have some advantages and some tax credits and some help, but what we found out is that if you have a small business with 10 employees and that number climbs to 11, you are going to lose some of those benefits. If you are paying your employees an average of over $25,000 a year and you want to give them a raise, you start losing some of the benefits. So in spite of the fact the President had 4 million postcards sent out to small business owners, very few of them have been able to take advantage of what was promised to them.

Now here we are where additional waivers are being given. We are at a point where over 2.5 million Americans have been given waivers from participating in the health care law. Interestingly enough, these are the very people, for the most part—a significant number—who lobbied for the bill. Once they found out what was in it, they said no, I don't want this to apply to me. Now we see that the State of Maine, the entire State of Maine, has been given a waiver.

I come to the floor today, a year after this has passed into law, and I say everybody in the country ought to be able to get a waiver and opt out of this health care law, opt out completely. These are decisions that should be made at the State level, at the local level. Washington's ''one size fits all'' has hardly ever worked for anything and it surely does not work for health care.

In Wyoming, at the Wyoming Health Fair in Buffalo, as I visited with people and talked to them, do you know what they are worried about? They are worried about losing their freedoms, losing their choice, losing their doctor, losing the health care plan they like. In spite of the President's promises, we know that about 80 percent of people who get their health insurance through small businesses are not going to be able to keep the health care they like. Why? Because of government mandates. Government has said we know what is best for you. You do not, we do. The government says: We know what is best for your family. Government doesn't know what is best. These ought to be local decisions. That is why Senator LINDSEY GRAHAM and I and a number of other cosponsors have introduced legislation to allow States to opt out of this health care law, opt out of the individual mandate, the requirement that forces Americans to buy government-approved insurance.

Let States make that decision if people in their own State need to live under those laws. Let States decide if the employers, the people who are the job creators in our communities, if they have to supply government-approved insurance to the people who live there. Let people make decisions at the local level.

You can lift any newspaper and look at what the Medicaid mandates are doing to our States and the budgets of the States. States such as Wyoming, where we balance our budgets every

year and live within our means, are being crushed by these Medicaid mandates. But it is not just small States such as Wyoming, in terms of population—California, New York, States all across the country are saying to this body: Let us out, let us opt out. We cannot live under these mandates.

The President's solution is to cram more people onto Medicaid, a program that doesn't work, where many doctors will not see these patients, where the reimbursements are so low hospitals say we cannot afford to see these patients because of the impact it will have. Even the actuaries, the people who look at this in the fair and appropriate way to look at the numbers, say 15 percent of the hospitals in this country 10 years from now may not be able to be open because of the way this health care law is going. That is not going to provide more access. It is providing less access.

Why have seniors rejected this so overwhelmingly? Seniors have looked at this and they see $500 billion in Medicare cuts, in things such as Medicare Advantage. There is an advantage to being in that program. That is why one out of four seniors has set up that program and chosen that program. It is because they want choice.

This health care law is one that is taking choice out of the hands of the American families, taking freedom out of the hands of the American families. Something I continue to hear from the people in Wyoming and across the country: We need to repeal and replace with commonsense solutions to allow people to buy insurance across State lines, make it legal to do that; to allow small businesses to pool their resources; to give incentives to individuals who go to something like the Wyoming Health Fair; and work on prevention and early detection of problems. Give those people the opportunity to make individual choices. Expand health savings accounts. Those are the sorts of things we can deal with in a responsible way to help American families get the care they want from the doctor they need at a price they can afford.

That is all the American people are asking for: the care they need from the doctor they want at a price they can afford. They are not getting it under this health care law. It has now been enacted for a full year. The American people know the truth.

I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from Nebraska.

Mr. JOHANNS. Madam President, I rise today to also speak about the health care bill.

The first anniversary of a new law should be a time to celebrate good policy, one would think. The mood surrounding the new health care law is much different. One year later, Americans are demanding as loudly as ever that we repeal it. That is not surprising, considering the almost constant flow of bad news, broken promises, higher costs, and sky-rocketing health insurance premiums.

We did not need a year of bad news and broken promises to know this new law was bad policy. It was fraught with problems even before it hit the Senate floor. Many of us pointed out the inevitable problems within this legislation. We warned how this law was predicated on faulty accounting that would exacerbate our current and future fiscal problems.

It is simply irresponsible and shortsighted to argue that legislation will reduce the debt when it is filled with budget gimmicks. But that is exactly what Congress did when passing this legislation, and we are paying the price.

The administration now admits that the funding elements of this law do not add up. For example, in testimony before the Finance Committee, HHS Secretary Sebelius described the newly created CLASS Act entitlement as ''totally unsustainable.'' Furthermore, in recent congressional testimony, Secretary Sebelius was asked whether the Medicare cuts in the law are used to save Medicare or pay for the health care law. Remarkably, she responded ''both.'' Even a young child knows you can't spend a dollar on a new toy and then spend that exact same dollar to buy an ice cream cone. It is wonderland accounting and even the administration's own Medicare actuary seems to agree. He said the Medicare reductions in the law ''cannot be simultaneously used to finance other Federal outlays (such as the coverage expansions . . .) and to extend the trust fund.''

Double-counting this money is completely illogical and the American people can see through the smoke-screen long ago. But the fiscal problems with this legislation are not even the half of it. As a former Governor, I shared my concern that putting 16 million people into the broken Medicaid Program is a fatal flaw of this law. Medicaid beneficiaries already have a huge problem finding doctors to treat them. Nationwide, 40 percent of doctors will not see a Medicaid patient.

The Medicaid expansion is like giving someone a free bus ticket, and then taking the bus away.

But instead of addressing this problem, the law exacerbates the problem by doubling the number of people on the broken system—Medicaid. If you have an airplane that is already overweight, you wouldn't decide to double the number of passengers to solve the problem, yet that is exactly what the law prescribes.

But even if you overlook the access nightmares created by this expansion, our States simply cannot afford it. States are already struggling to pay their bills and now we are heaping more obligations on them. As a former Governor it breaks my heart we are making those problems even greater.

That is why cash-strapped States are begging us for relief from the crushing Medicaid mandate headed their way.

One didn't have to be a fortune teller to predict the budgetary panic spreading from State capitol to State capitol.

And for what benefit? One year later, many of the promises that were used to sell this law have been debunked. For example, remember the President saying ''if you like your plan, you can keep it''? Turns out, that's not exactly true. Again, the administration's own Medicare actuary concluded that the President's promise is ''not true in all cases.'' Turns out truth seems to be more the exception than the rule with this law. One of the administration's own estimates projects as many as 80 percent of small businesses being forced to give up their current coverage within the next 2 years.

Remember the President promising that he would not sign into law any legislation that did not bring down the cost curve?

In June 2009, President Obama claimed that any health care legislation must control costs. He said, ''If any bill arrives from Congress that is not controlling costs, that's not a bill I can support. It's going to have to control costs.'' One is left to wonder why the President signed this law since his own actuaries estimated it would increase Federal health care spending by $310 million.

Earlier this year, the Medicare actuary provided a moment of sad truth. He testified that President Obama's promise that the health care law would lower costs was ''false, more so than true.'' That is so astonishing that I will repeat it again—the administration's own experts said the President's promise was false, more so than true. That is astonishing.

Remember how the President promised that the health care law would bring down the cost of insurance premiums? As a presidential candidate, President Obama promised no fewer than 20 times that he would cut premiums by $2,500 for the average family by the end of the first term. Yet the average employee's health insurance premium has risen by nearly $1,100 per family since President Obama took office. A recent New York Times article highlighted this missed opportunity:

> Groups of 20 or more workers have been experiencing premium increases of around 20 percent, insurance agents say, while smaller groups are seeing increases of 40 percent to 60 percent or more.

Finally, the first year of implementing this law provides clear evidence that the administration does not think this health care bill is good for everyone. The administration has now granted over one thousand waivers to certain States, employers, unions, and insurance companies, allowing them to be exempt from several of the law's new mandates.

The plans approved for waivers cover nearly 3 million individuals. If the law is so popular and so beneficial, why are we exempting almost 3 million people while the other 300 million have to live with its higher premiums and mandates? This and many other questions

have yet to be answered by the administration.

However, the President's recent budget request does outline his game plan to advance this flawed policy. The current strategy seems to be spending more taxpayer dollars to continue to try to convince a skeptical public that the health care law is good policy; and if they don't agree, use an enforcement hammer to ensure compliance.

Buried within the President's budget is a request for a 315 percent increase for the public affairs office at the Department of Health and Human Services. One of the primary tasks of the Public Affairs Office is to sell the health care reform law to the American people. Furthermore, they also requested a whopping 1,270 new Internal Revenue Service agents to implement the law and to enforce its individual mandate and other related provisions.

While Speaker PELOSI may have advocated passing the bill so that we could learn what is in it, many Americans were not so naive. They understand that you can't spend the same dollar twice. They understand that if something sounds too good to be true, it probably is. They know when someone shows up from the government offering a carrot, there is probably a stick not far behind.

Last year, a real opportunity to craft health care policy on a bipartisan basis was squandered. That missed opportunity will continue to haunt us.

Unfortunately, I worry that the second year under the oppressive provisions of this law will be no better than the last. It is regrettable that we have reached this point, having known so many of these problems existed before this law passed. But of course we were warned.

So, I will use the occasion of the solemn first anniversary to redouble my efforts to right the wrong.

We will work to wipe this misguided law from the books to protect the rights of Americans to choose their doctor, select their insurance, and trust in their own good judgment. Many are committed to the cause. I believe it will happen.

I yield the floor.

CONCLUSION OF MORNING BUSINESS

The ACTING PRESIDENT pro tempore. Morning business is closed.

SBIR/STTR REAUTHORIZATION ACT OF 2011

The ACTING PRESIDENT pro tempore. Under the previous order, the Senate will resume consideration of S. 493, which the clerk will report.

The legislative clerk read as follows:

A bill (S. 493) to reauthorize and improve the SBIR and STTR programs, and for other purposes.

Pending:

Nelson (NE) amendment No. 182, of a perfecting nature.

McConnell amendment No. 183, to prohibit the Administrator of the Environmental Protection Agency from promulgating any regulation concerning, taking action relating to, or taking into consideration the emission of a greenhouse gas to address climate change.

Vitter amendment No. 178, to require the Federal Government to sell off unused Federal real property.

Inhofe (for Johanns) amendment No. 161, to amend the Internal Revenue Code of 1986 to repeal the expansion of information reporting requirements to payments made to corporations, payments for property and other gross proceeds, and rental property expense payments.

Snowe amendment No. 193, to strike the Federal authorization of the National Veterans Business Development Corporation.

AMENDMENT NO. 182

The ACTING PRESIDENT pro tempore. Under the previous order, there is now 2 minutes of debate equally divided prior to a vote in relation to amendment No. 182, offered by the Senator from Nebraska, Mr. NELSON.

The Senator from Nebraska.

Mr. NELSON of Nebraska. Madam President, I rise to speak on my amendment proposing a sense-of-the-Senate agreement to cut the Senate's budget by at least 5 percent.

When I go home every weekend, people come up to me at the grocery store, hardware store and elsewhere, and they tell me they are concerned about our national debt and deficit. They want Washington to cut spending and bring down the cloud of debt that hangs over our economic environment.

As chairman of the Senate Appropriations Legislative Branch Subcommittee, I have been pursuing a 5-percent cut in this year's budget for Congress and agencies and offices on Capitol Hill. We cut this budget a year ago, we are cutting it this year, and we will be back for further cuts next year.

My amendment says that as Congress pursues comprehensive debt reduction while conducting major military action on two fronts, all in the midst of a fragile economic recovery, Congress still should not be exempt from the pain. Fiscal restraint starts at home and with our own budget.

I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from Mississippi.

Mr. WICKER. Madam President, I rise to agree with my colleague from Nebraska, to support his amendment, and to congratulate him for his newfound enthusiasm for this idea.

Actually, on January 10, the House of Representatives passed a rule to reduce its spending by 5 percent. This measure was passed on a rollcall vote of 410 to 13. Soon thereafter, I was the first Senator to call on my colleagues in the Senate to cut their office expenditures by 5 percent. This small but symbolic step could save the taxpayers over $20 million.

On February 4, some 6 weeks ago, I requested unanimous consent to take up a sense-of-the-Senate resolution I authored, urging all Senators to take such action. Unfortunately, at that time and since then, there has been an objection from the other side of the aisle to this unanimous consent request.

My effort was bipartisan. I was joined by 14 of my colleagues, Republicans and Democrats, and I thank them.

We now have an agreement to take up my sense-of-the-Senate resolution by unanimous consent later in the day so as to expedite and refine enactment of the provisions of the Nelson amendment. Based on that understanding——

The ACTING PRESIDENT pro tempore. The Senator's time has expired.

Mr. WICKER. I commend the Senator from Nebraska for coming to this idea somewhat late. But I support his amendment nonetheless.

The ACTING PRESIDENT pro tempore. The Senator from Louisiana.

Ms. LANDRIEU. Is there any time remaining?

The ACTING PRESIDENT pro tempore. There is no time remaining.

Ms. LANDRIEU. Madam President, I ask for the yeas and nays.

The ACTING PRESIDENT pro tempore. Is there a sufficient second? There is a sufficient second.

The question is on agreeing to the amendment.

The clerk will call the roll.

The legislative clerk called the roll.

Mr. DURBIN. I announce that the Senator from West Virginia (Mr. ROCKEFELLER) is necessarily absent.

The ACTING PRESIDENT pro tempore. Are there any other Senators in the Chamber desiring to vote?

The result was announced—yeas 98, nays 1, as follows:

[Rollcall Vote No. 41 Leg.]

YEAS—98

Akaka	Feinstein	Merkley
Alexander	Franken	Mikulski
Ayotte	Gillibrand	Moran
Barrasso	Graham	Murkowski
Baucus	Grassley	Murray
Begich	Hagan	Nelson (NE)
Bennet	Harkin	Nelson (FL)
Bingaman	Hatch	Paul
Blumenthal	Hoeven	Portman
Blunt	Hutchison	Pryor
Boozman	Inhofe	Reed
Boxer	Inouye	Reid
Brown (MA)	Isakson	Risch
Brown (OH)	Johanns	Roberts
Burr	Johnson (SD)	Rubio
Cantwell	Johnson (WI)	Sanders
Cardin	Kerry	Schumer
Carper	Kirk	Shaheen
Casey	Klobuchar	Shelby
Chambliss	Kohl	Snowe
Coats	Kyl	Stabenow
Coburn	Landrieu	Tester
Cochran	Lautenberg	Thune
Collins	Leahy	Toomey
Conrad	Lee	Udall (CO)
Coons	Levin	Udall (NM)
Corker	Lieberman	Vitter
Cornyn	Lugar	Warner
Crapo	Manchin	Webb
DeMint	McCain	Whitehouse
Durbin	McCaskill	Wicker
Ensign	McConnell	Wyden
Enzi	Menendez	

NAYS—1

Sessions

NOT VOTING—1

Rockefeller

The amendment (No. 182) was agreed to.