[Quorum No. 8]

Alexander	Franken	Merkley
Ayotte	Gillibrand	Mikulski
Baucus	Grassley	Murkowski
Begich	Harkin	Murray
Bennet	Heinrich	Paul
Blumenthal	Heitkamp	Portman
Booker	Heller	Pryor
Boozman	Hirono	Reid
Boxer	Hoeven	Rockefeller
Brown	Johnson (SD)	Rubio
Cantwell	Kaine	Schatz
Cardin	King	Schumer
Carper	Klobuchar	Sessions
Casey	Landrieu	Shaheen
Coburn	Leahy	Shelby
Coons	Lee	Stabenow
Corker	Levin	Tester
Cornyn	Manchin	Thune
Crapo	Markey	Toomey
Cruz	McCain	Udall (CO)
Donnelly	McCaskill	Udall (NM)
Durbin	McConnell	Warren
Feinstein	Menendez	Whitehouse

The ACTING PRESIDENT pro tempore. A quorum is present.

The question is, Is it the sense of the Senate that debate on the nomination of Patricia M. Wald, of the District of Columbia, to be a Member of the Privacy and Civil Liberties Oversight Board, shall be brought to a close?

The yeas and nays are mandatory under the rule. The clerk will call the roll.

The assistant legislative clerk called the roll.

Mr. CORNYN. The following Senators are necessarily absent: the Senator from Mississippi (Mr. COCHRAN) and the Senator from Illinois (Mr. KIRK).

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

The yeas and nays resulted—yeas 57, nays 41, as follows:

[Rollcall Vote No. 263 Ex.]

YEAS—57

Baldwin	Hagan	Murphy
Baucus	Harkin	Murray
Begich	Heinrich	Nelson
Bennet	Heitkamp	Pryor
Blumenthal	Hirono	Reed
Booker	Johnson (SD)	Reid
Boxer	Kaine	Rockefeller
Brown	King	Sanders
Cantwell	Klobuchar	Schatz
Cardin	Landrieu	Schumer
Carper	Leahy	Shaheen
Casey	Levin	Stabenow
Collins	Manchin	Tester
Coons	Markey	Udall (CO)
Donnelly	McCaskill	Udall (NM)
Durbin	Menendez	Warner
Feinstein	Merkley	Warren
Franken	Mikulski	Whitehouse
Gillibrand	Murkowski	Wyden

NAYS—41

Alexander	Fischer	Moran
Ayotte	Flake	Paul
Barrasso	Graham	Portman
Blunt	Grassley	Risch
Boozman	Hatch	Roberts
Burr	Heller	Rubio
Chambliss	Hoeven	Scott
Coats	Inhofe	Sessions
Coburn	Isakson	Shelby
Corker	Johanns	Thune
Cornyn	Johnson (WI)	Toomey
Crapo	Lee	Vitter
Cruz	McCain	Wicker
Enzi	McConnell	

NOT VOTING—2

Cochran	Kirk

The ACTING PRESIDENT pro tempore. On this vote the ayes are 57, the nays are 41. The motion is agreed to.

NOMINATION OF PATRICIA M. WALD TO BE A MEMBER OF THE PRIVACY AND CIVIL LIBERTIES OVERSIGHT BOARD

The ACTING PRESIDENT pro tempore. The clerk will report the nomination.

The bill clerk read the nomination of Patricia M. Wald, of the District of Columbia, to be a Member of the Privacy and Civil Liberties Board for a term expiring January 29, 2019.

The ACTING PRESIDENT pro tempore. Pursuant to the provisions of S. Res. 15 of the 113th Congress, there will now be up to 8 hours of postcloture consideration of the nomination equally divided in the usual form.

The assistant majority leader.

Mr. DURBIN. Mr. President, I yield back the majority's time on this nomination.

The ACTING PRESIDENT pro tempore. The time is yielded back.

The Senator from Ohio.

Mr. PORTMAN. Mr. President, I would like to speak on the nomination.

The ACTING PRESIDENT pro tempore. The Senator is recognized.

Mr. PORTMAN. Mr. President, I am glad to have this opportunity to come to the floor of this great body to talk about issues that are of great concern to the people of Ohio whom I represent and to the country. We are facing a lot of challenges right now. Certainly health care costs are on the rise, as we have seen, but jobs are also hard to come by.

There is a middle-class squeeze going on out there where paychecks are down and health care costs are up, and belief in the American dream, as a result, is on the decline. Some say for the first time since polling has begun people think that future generations are not going to be as well off as we are. This is sad, and there is work we can and should do to address this.

It starts with dealing with some of the gridlock in Washington and getting some things done. One of my concerns about what the majority has done in terms of taking away the rights of the minority to be heard on nominations is creating a very tough environment to break through that gridlock and get things done.

I think about the judiciary. Today we are talking about a court judge who is up for a nomination and the question is whether she is going to be confirmed. Right now, under the current rules that exist, Republicans have no voice, in essence, because the 50 votes from Democrats—and there are 55 Democrats—can put up a judge and get the votes and put anybody through they want.

Under the system that has prevailed in this body for decades, and one consistent with the intention of the Founders, you have to get 60 votes. In other words, the minority would have some voice, and specifically Republicans, in that there are 45 of us and we would have to supply about 5 votes. That makes a big difference in terms of the kinds of judges who are nominated and ultimately confirmed.

There has been a lot of discussion about what is going on here on the floor in terms of ending the ability of the minority to have their voice heard. I think we also need to focus a little on what impact this will have on the judiciary.

When someone is appointed to the DC Circuit Court—somebody was recently confirmed yesterday and the day before for that body—these are lifetime appointments. Instead of having to go through a process where you have to figure out how to get some Members of the other party to support you, right now—under the new rules that were done by breaking the rules, and again, inconsistent with the intent of the Founders who allowed their voices to be heard—they don't have to get the minority. They can do it with just 50 votes. Again, with 55 Democrats, there is no need to consult with Republicans or to get any support. In fact, they can allow five Democrats to vote the other way.

I worry this will polarize the judiciary. I think we are polarized enough in this place. I think Washington is becoming dysfunctional for a lot of reasons, but one is this increased polarization. Now to have this rule change only creates a difficult environment to get work done, but it will also put judges on the judiciary with lifetime appointments; these judges who, frankly, are more liberal under the Democrats and more conservative under the Republicans than they would otherwise be.

In States such as mine where there is a Republican Senator and a Democratic Senator, we work together to try to put judges forward. Democrats realize in the majority they have now, they have to get some Republican support, so they work with us. You tend to get center-left judges nominated and confirmed right now.

Again, under the new rules that Leader REID and the Democrats have insisted on, that will not be required. Why would you have to consult and work with your counterpart in your State or Republicans on the other side of the Chamber?

When there are 50 votes, you can put forward any judge you want. I do think this will result in judges who are not center left but left and not center right but right. This will polarize the judiciary more, and that concerns me.

I hope, as we are thinking about how we deal with our own procedures—and I know this is an issue that has been debated a lot in the last few weeks because of the decision the Democratic leadership made to take away this right—we also think about what impact this will have on the judiciary. Do we want a more polarized judiciary where some of these ideological differences make it difficult for them to operate just as it makes it difficult for the Congress to operate? I don't think so.

I don't think that is what the American people want, and I know it is not

what the Founders intended when they gave the minority a voice in this body, and I hope we can get back to a regular order where we have a limitation on amendments that is reasonable with reasonable time limits so we can get our work done.

Let's allow amendments to be offered. Let's allow the voices to be heard. Let's allow—in the case of these nominations—input from the other side.

I am very concerned about where this is headed. The logical extension of what the Democrats have done, of course, is to extend this to legislation as well, which I think creates more of a problem than we have already in terms of legislation being passed here that is not reflective of the will of the people, that is not subject to the checks and balances we would have under a rule where we have to get 60, not 50, votes in order to pass legislation.

A prime example is ObamaCare. Let's be honest. The reason it got through the Senate was because a special provision was used called reconciliation, which is supposed to be used for budget matters, revenues, and spending.

I believe that was an inappropriate use of reconciliation as do many other observers who are objective observers and have followed this place for a long time.

ObamaCare was pushed through, not with 60 votes—because after the election of Scott Brown in Massachusetts, they didn't have 60 votes to get ObamaCare through because not a single Republican would support it because Republicans supported an alternative plan. So without a single Republican supporting it, Democrats chose to ram it through with 50 votes. That is all they needed because they used this so-called reconciliation provision that, again, is supposed to be for budget issues, not health care.

I think the results are now plain to see. We have law in place that is affecting my constituents and affecting the constituents of every Senator, that has very negative consequences. Did we need to do something to reform the health care system? Yes. Was the status quo acceptable? No. Is it acceptable now? No.

There are smart reforms to reduce costs, smart reforms add more choice, to allow markets to work better in health care, to not only provide for better quality and better choice but also lower costs. Those were not pursued. We still have the opportunity now to do that.

I talked earlier about the fact that health care is a big concern to the American people. It certainly is among my constituents in Ohio. We do a tele-townhall meeting periodically. We had a couple of them last month where I will get maybe 25,000 Ohioans on the phone at any one time and talk to them about the issues of the day and hear their questions and concerns.

During the tele-townhall meeting, we ask a poll question, such as what is the most important issue you think is facing the country? We ask whether it is national security and terrorism, energy policy and costs at the pump, health care and health care costs, jobs and the economy, or some other issue.

It is interesting in that every single tele-townhall meeting I have had over the past few years has always been that jobs and the economy is the No. 1 issue. Again, there may be 25,000 people at any one time. When we asked the poll question, that has been the No. 1 question. Usually the No. 2 issue is debt and deficit and spending.

The last two tele-townhalls we did last month—guess what the No. 1 issue was. It was not jobs and the economy or debt and deficit. It was about health care because people are so concerned about what ObamaCare is doing to them and their families.

I will let them speak for themselves. Some of us were on the floor a few weeks ago talking about this, but since that time I have received a lot of stories from people I represent.

Here is one from Susan from Batavia which is in Clermont County in southern Ohio. She says:

> I am a single mom. I pay for my own health insurance. I am active and fit. I have cycled over 4,000 miles this year. I am seldom sick. In the 3 years I have paid for my own insurance, I went to the doctor once for illness. My rate was $146 a month. In September I received a letter from Anthem saying that my plan does not meet the requirements of the Affordable Care Act and will be discontinued as of January 1, 2014. I was offered the same coverage I had—not for $146 a month but for $350 a month.

To Susan from Batavia, thanks for your story and letting us know what is happening and how this is affecting you as a single mom who is taking care of herself, doing the right things, and had a plan that worked for her and was told, no, the government knows best. You can't have your plan. Here is the plan you have to have, and in order to have comparable coverage we are going to raise your rates by over double.

This is from Mike from Westlake in northeast Ohio. Mike says:

> I own a small business. Our health insurance rates for single employees under 30 went from $198 per month last year to $650 per month this year. That is a 260-percent increase thanks to ObamaCare. This bill is going to put small businesses out of business.

Here is one from William from Columbus, OH:

> We were paying $540 per month but received a letter from Anthem stating that the rates would increase to $662 per month beginning September 2013 and then $1,014 per month in September 2014 as a result of the requirements per ObamaCare. If that wasn't bad enough, our family doctor of 25 years informed us that he will end his practice on January 1, 2014. The reason being is the government requirements of ObamaCare just made it too difficult to continue.

That is William from Columbus, talking about an issue of price, obviously, going from $540 a month to $1,014 per month. But it is also about choice because his doctor is stepping out because of ObamaCare.

Rachel from Solon says:

> My family owns a small business. We were notified that our current health care plan is substandard at $860 per month. To comply, we now must pay $1,880 a month. This is beyond outrageous.

That is what Rachel says. I agree with her: $860 to $1,880 per month—more than double—in order for her to have health care as a small business owner for her and her husband.

Jon from Dublin:

> We currently have a high-deductible plan from Anthem and pay $331 per month. We are perfectly happy with our plan. It provides wellness visits for free, which is what we really need, and then catastrophic coverage in case of something very unpleasant. When I recently reviewed our coverage and tried to renew it, I asked what an equivalent plan would cost under the exchange. The quote I received was for $833 per month.

Remember, he was paying $331 per month. He likes his plan with wellness visits and catastrophic coverage. It goes from $331 per month to $833 per month.

Back to his letter:

> The deductible even went up from $11,000 to $12,700.

So this notion that people have to get out of these plans because their deductible is too high—the one that is acceptable based on ObamaCare and this top-down approach is now a higher deductible.

He says:

> My family simply cannot afford this plan.

Here is Sarah from Raymond, OH. Sarah writes—and this is painful. These are painful. But Sarah writes:

> I am literally crying right now because of our insurance. My family's new monthly cost starting January 1 is $323.82 biweekly and $647.64 a month, a difference of $420 in what we currently pay, and the new plan offers less with more out-of-pocket expenses. The ACA has failed and it is hurting my family, not helping.

Here is Chuck from West Chester:

> I tried to give this health care thing the benefit of the doubt. I went to the Web site and all the estimates are more expensive than my canceled policy. My canceled policy was not only cheaper; it was better, and I don't qualify for any subsidies. Do I have any choice besides paying more money?

Chuck, I am probably not qualified to give advice, but I will anyway. Your choice is to pay a penalty or pay more. That is what the government is telling you. That is what ObamaCare is telling you.

Cynthia from Canton, OH:

> I am a substitute teacher. Recently I received notice that I was not getting jobs every day like I have been for most of the past 13 years. I am a good, dependable sub, and I work for $70 a day before taxes. I contacted the school system and was told that they are watching any sub to prevent over 30 hours a week because of the Affordable Care Act.

Cynthia's letter to me, unfortunately, is something that I am hearing all over the State of Ohio. It is that people are being told: We need to keep you under 30 hours. She is finding out

as a substitute teacher in Canton, OH, that she can't get the jobs she used to get because they are telling her they want to watch the subs to prevent anybody getting more than 30 hours a week because of the Affordable Care Act. My colleagues probably know this: Under the act, if a person works over 30 hours a week, that person is considered full-time; therefore, the company has to provide the health care insurance that, again, this top-down approach insists on; not the health insurance you may want or your employer may think is appropriate, but the health care insurance that the Affordable Care Act thinks is appropriate. So companies are telling folks, as in the case of this substitute teacher—private and public sector—we need to keep you under 30 hours because we simply can't afford that kind of health care.

Here is Mark from Urbana, OH:

My wife and I are farmers. We have our own private health insurance, which is not cheap. We just learned that our insurer is canceling our plan and that the ObamaCare plan will double our premiums to more than $1,000 per month. My wife is 55 years old. We do not need maternity coverage or free birth control or so much other coverage mandated by ObamaCare. We are modest, middle income people. What we need in this country is a policy to make health care more affordable. We can do this if we let Americans determine their own health care needs and shop for the best and most affordable care. Why not medical savings accounts for everyone? They would be privately owned so that no one is chained to their employer-sponsored plan. Why not require that health care providers post prices of their services? We can come up with much better alternatives to ObamaCare. Please help us.

I agree with him. We can come up with much better alternatives, including letting people save money for their own health care. Why should we want to discourage that? By the way, those HSA savings accounts that Mark is talking about that he would like to see for everyone, those are made less attractive because they take away some of the health care tax benefit.

So we are moving the wrong way. We are moving away from people taking care of their own health needs and encouraging them again to focus on wellness and prevention, understanding that it is their dollar that is at stake and allowing them to build up a little nest egg if they are healthy and if they are able to avoid a health problem, and if they do have a problem, they have coverage, with a high deductible, and they have coverage to take care of it. People should be able to make that decision on their own if that is what is best for them and their family.

Here is Brian from Mentor:

My family's Aetna plan has been canceled due to ObamaCare. My old plan was $454 per month with a $5,000 per person deductible. The same deductible policy to buy a new plan is $1,038 per month—

more than double for Bryan.

Dean from Sandusky:

Ever since I lost my job in 2009, I have been purchasing my own health insurance. Last month, I received a letter in the mail stating that my plan is being canceled due to the ACA. I was told to look at plans on the exchange, which I did, and found a comparable plan that is over twice the cost of what I now have. In addition, this is over half of my monthly pension. I simply cannot afford this.

I have always been a responsible, hard-working, self-dependent person. Now, because of the actions of our government, for the first time in my life I will not have health care coverage. I am 59 years old now and I need this coverage. I am outraged, to say the least. How can our government do this to us? I will remember this come election time.

That is Dean from Sandusky. He lost his job and picked up a plan on the individual market that worked for him. He is now going to have to pay twice as much. He can't afford it. He is not covered. He is on a fixed income. It sounds as though he is going to go without coverage.

By the way, new polling data is out showing that a lot of young people are going to go without coverage. One number is 28 percent of them are; another number is closer to half. I don't know how many. But a lot of young people I talk to say they would rather pay the penalty and take the risk than be covered. That is a problem for them, but it is also a problem for the Affordable Care Act because it is based on those people coming into the system and, frankly, providing the ability for others to get coverage under the risk pools that are set up under ObamaCare.

So the stories I have told are real people facing real problems and they are problems that Washington created for them and their families. They were fine with their coverage. They liked their coverage. I know my colleagues on the other side of the aisle have their own stories about people who are getting coverage and benefiting from it, particularly those with preexisting conditions. I understand that. But these stories really obscure the question we should be debating on the floor. I agree we should cover people with preexisting conditions, and so do most Republicans. The question is how do we do it.

So when Democrats come to the floor and tell me, Rob, you have all of these stories about people who cannot afford health insurance anymore and are having a really hard time on the individual market, but we will tell our stories of folks with preexisting conditions, my answer is that I also believe we ought to cover those people. I don't dispute that. We want to get coverage for more Americans. That is not the question we are debating. The real question is whether ObamaCare, with its mandates, its top-down, centralized controls is the way to accomplish those goals.

If the President and my friends on the other side of the aisle believe that the only way to increase coverage is to make everyone to pay more, to force millions of Americans to give up their insurance, to make people lose their doctors, then they should say that is what their plan is because that is what is happening.

A lack of honesty and transparency, in my view, is one of the great failures of the Affordable Care Act. I believe ObamaCare was sold to the American people under false pretenses. President Obama famously said, ''If you like your health care, you can keep it.'' He said, ''If you like your health care, you can keep it, period.'' But the one thing he could not do then was keep his word. He had to have known it then. All of the information coming out indicates that was knowledge he should have had, yet he kept saying it. What began as a broken Web site and cancellation notices has turned into sticker shock for millions of Americans who are seeing their health care costs soar under ObamaCare. By the way, as I said earlier, these rising costs are not a mistake in ObamaCare; they were intended in ObamaCare. Under ObamaCare, millions of Americans have to pay more for insurance in order for the program to work. The Web site can be fixed. I assume it will be at some point, although they are certainly having a tough time with it. But this basic premise that is the heart of ObamaCare that other people's costs have to go up, and pretty dramatically, cannot be fixed.

The reason goes back to a critical choice made at the beginning of the health care debate. There are different approaches to covering the uninsured, covering those with preexisting conditions. The approach favored by Republicans, at least many Republicans, including me, would create real economic incentives to bring the uninsured into covered access to health care while taking critical steps to reduce the costs of health care. One of the reasons people aren't covered is cost. The best way to lower the number of the uninsured is to make it easier and less expensive for people to get insurance in the first place.

The President chose to take a very different approach. He chose not to focus on the costs, which have gone up; not to focus on providing incentives for people to get coverage, but instead a top-down, centralized approach. He turned to mandates. ObamaCare requires that all Americans purchase insurance. It mandates what type of insurance that coverage includes, and it requires that private insurers accept all comers, including those with preexisting conditions.

Again, we all want to ensure that those with chronic conditions receive health care, but it also changes the way health insurance underwriting works. Normally, insurance works by pooling resources for some future harm. So for those who have preexisting conditions, obviously the harm is already present and their premiums are not going to be able to pay for their care, for the most part. That is why these high-risk pools in States are something I support and others support, providing tax incentives for that. But the offset is these often have astronomical costs. That is how ObamaCare was designed.

So this notion of these costs are going up and we didn't intend that—of course they intended it. It is exactly the way they intended it. ObamaCare needs more money than these policies would provide, so these private plans we talked about earlier—people in the individual market—many of which are high deductibles, low cost, catastrophic plans, many of the people who have these plans are young people who are relatively healthy. These folks were forced to buy insurance they didn't need because ObamaCare needed the money. The plans they had met the needs of those people—met the customers' needs—but, frankly, didn't meet the government's needs. So those plans were regulated out of existence, padded with extra benefits and consumer protections that many of those who chose this policy didn't want, as Mark from Urbana said, and will never use. Sometimes these policies are double or triple, and we have heard cases where they are five, 10 times more.

What we have seen in the individual market is only the beginning. Next year, the same mandates and government outreach that have hit the individual market will come to effect for the employer-based market as well, where the vast majority of us get our health care, through our employer. So at some point 80 million Americans will likely see their health plans canceled or sold and replaced by—when the employer-based market comes under the ObamaCare mandates, which, as we recall, is going to happen about a year from now, because it was put off for a year—that was the delay the President put in effect—we are going to see much more of this.

Again, there is a better way. There is a way to put this partisanship behind us and do this together. We talked earlier about the fact when you cram something through with all votes on one side of the aisle and ignore the other, we tend to get a policy that doesn't work for the American people.

That is exactly what we are seeing here. There is a better way, and we still need to pursue it. Instead of having less choices and higher costs for all Americans, there is a way to put together a plan that actually helps people.

This is something that Republicans and Democrats alike need to focus on. Instead of a top-down, centralized, government-knows-best solution, we need to go to solutions that actually reduce the costs of health care and provide more choice in health care. It can be done.

ObamaCare should be repealed and replaced, in my view, but it should be replaced. The status quo is not acceptable. I think the failures of ObamaCare point the way as to what we should do—reduce the costs. There are steps we could take today; for instance, remove the shackles of government regulations from the market. Let health care insurance and health care be less expensive. Let health care insurance be sold across State lines. That is something you can do with Federal legislation that will provide more competition. It will lower the cost. There are some areas in my State where there are only a couple plans. I am told under ObamaCare, in some States there are only a couple plans. You want to have more competition, not less.

We should give people the ability to get health care on their own. We talked about health savings accounts. We should help create a healthy, vibrant individual health care market by giving people a tax incentive to purchase health insurance comparable to incentives they would receive with employer-provided coverage where there now are tax incentives to provide health care coverage. Let's deal with these frivolous lawsuits. That reduces the costs.

So I appreciate the fact that one of my colleagues has joined me on the floor and is going to continue this discussion. But I wish to go back to where we started. It does not have to be this way. What we are doing in the Senate by taking away the rights of the minority is not going to help us with regard to getting better judges. It did not help us in terms of cramming ObamaCare through with 51 votes rather than the normal 60 that should have been required. It does not help for us to now continue down this track of a government, one-size-fits-all approach to health care. We have heard the stories. We see what is happening and have not even hit most Americans yet because they get coverage from their employer.

Instead, let's work to together. Let's provide more choice. Let's reduce the costs. Let's ensure that everybody has access to health care that works for them and their families. If we do that, the American people might regain a little bit of trust in this institution and in this town.

Madam President, I would like to yield the floor, if I could, for my colleague and your colleague from North Dakota.

The PRESIDING OFFICER (Ms. HEITKAMP). The Senator from North Dakota.

Mr. HOEVEN. Madam President, I thank the esteemed Senator from Ohio for his remarks and express my support for his remarks as well.

Myself and other colleagues have been on the floor today talking about the need to work in a bipartisan way. Obviously, the business before the Senate right now is nominations, and we want to emphasize again the importance of advice and consent in the nomination process but that it needs to be on a bipartisan basis.

The change that, of course, has been made is that now the majority party can vote through, confirm a nomination without any input, any consent, any debate from the minority party. That is an issue not only in terms of the nomination process, the confirmation process of advise and consent, but that is also very much an issue in legislation.

The importance of bipartisanship, whether it is in advise and consent in the confirmation process or whether it is in passing legislation, is seen because we have a country of more than 300 million people—Republicans, Democrats, Independents—but at the end of the day, if we are going to have broad-based public support for the work we do, for the legislation we pass, it has to be done in a bipartisan way.

My colleagues have been pointing that out in terms of the confirmation process. Also, they have been pointing that out in the context of the Affordable Care Act and ObamaCare. That is legislation that was passed on a partisan basis. One party, and one party only, voted for that legislation. What we have seen is that does not work.

To get broad-based support for any legislation—let alone something as important as reform of health care—both parties have to be part of that work product. That is the only way we are going to get broad-based support across this great Nation on the important issues we face.

Earlier today I read story after story from people from our great State expressing real challenges, real difficulties—the higher costs, higher deductibles, higher premiums, higher copays—they are facing as a result of the Affordable Care Act. I talked about the need to engage in the right kind of health care reform, the kind of health care reform that truly empowers individuals to pick their own health care insurance and their own health care provider; the need to pass the kind of legislation that will help us provide expanded health savings accounts tied with higher deductible policies that will encourage our young people to purchase health care insurance because they will be able to do so with lower premiums; the need for tort reform to help bring down health care costs; the need to increase competition across State lines so people have more choice, and with that competition, lower prices when it comes to choosing their health care insurance; and I talked about the need to reform Medicare, as the Presiding Officer knows, to provide the right incentives.

Look at our great State of North Dakota. We have lower health care costs than most other States, and we have very good outcomes. For that we get not more Medicare reimbursement but less. That is exactly the wrong incentive—providing more reimbursement to States that have high costs regardless of outcome and lower reimbursement for States even with lower costs and better outcomes; in essence, getting less reimbursement, getting penalized for good performance. That is exactly the wrong approach and why we so desperately need to make reforms that create the right approach.

These are the kinds of solutions we are advocating that we will continue to advocate to put in place for the American people. We need Members on both sides of the aisle to come together with

a step-by-step, comprehensive approach, market-based approach, that will truly create more choice, more competition, and empower people—empower people—the great citizens of this country to take control of their health care decisions and make the decisions that best suit them and their families.

I see that my colleague from the great State of South Dakota is in the Chamber. As always, I am very pleased to see him, and at this time I yield the floor.

The PRESIDING OFFICER. The Senator from South Dakota.

Mr. THUNE. Thank you, Madam President. I thank my colleague from North Dakota—both colleagues from North Dakota who are here in the Chamber—and I appreciate his leadership as a former Governor, understanding these issues such as health care, which do profoundly impact the people whom we all represent in the Dakotas. There are some unique challenges, obviously, of meeting the health care needs of people in our States because we have a big geography, lots of wide open space. We do not have the big population centers that are in other places in the country, and so health care delivery and coverage of health care, health care insurance and access to it are enormously important to the people we all represent.

I would say it has become abundantly clear that the American people are rejecting ObamaCare, which is the law that was passed several years ago in the Senate, in the house, signed into law by the President. I remember being here at the time and voting on that on Christmas Eve. We were actually here. It was December 24, 4 years ago, I think now, in 2009. We were right up here until the end, and this was, I would say, jammed through the Senate.

The majority had the votes. They were not all that concerned about having participation or input from those of us who served in the other party—as a consequence of that just shoved this thing through right on Christmas Eve. I think that was an unfortunate way in which to conduct the business of the Senate, to enact major legislation. It is very rare around here that legislation of that consequence that literally impacts one-sixth of the American economy is shoved through on a partisan party-line basis.

So that is the way it was done. We said at the time—many of us were down here on the floor over and over predicting that because of the way this was structured it was going to lead to higher insurance premiums, it was going to lead to fewer jobs in our economy, a lot of stress on employers that were trying to create those jobs. All of that is coming to fruition as we hear now reports day after day after day across this country—from my State of South Dakota, other States across the country—from people who are feeling the very real and harmful impacts of the ObamaCare legislation, both in terms of higher premiums but also canceled coverages, higher deductibles, things that affect the pocketbooks of millions of Americans and issues that are discussed and debated at kitchen tables, but they are profoundly important to the economic well-being of people in this country.

When you are seeing the dramatic increases in premiums, the dramatic increases in deductibles, the loss of coverage, the canceled coverages we are seeing across the country right now, it is very disturbing to people. That is why I think you have seen this widespread rejection of ObamaCare.

Interestingly enough, yesterday Health and Human Services released new enrollment numbers for the exchanges for October and November. Over the course of those 2 months, in my State of South Dakota, just 372 South Dakotans—or less than one-half of one-tenth of 1 percent of my State's residents—signed up for health care on the exchanges.

Ten other States also had fewer than 1,000 people sign up.

Oregon, which embraced ObamaCare very early on, had just 44 enrollments. Think about that—44 enrollments to show for 2 months thanks to their Web site, which suffered an even more catastrophic failure than the Federal Web site.

In all, there were 364,682 enrolled in the exchanges during the months of October and November—not even one-quarter of the number the administration had projected after 2 months. To meet its goal of 3.3 million signups by December 31, the administration would have to sign up almost 3 million people in the next 3 weeks or more than 145,000 every single day.

Considering that the administration has averaged fewer than 6,000 enrollments a day over the past 2 months, I would not want to put a lot of money on them being able to meet that goal. It is obvious from the sluggish enrollment numbers that the American people are rejecting ObamaCare. But if anyone needs more proof, three new polls came out last week, all reporting strong opposition to the law among the American people.

The Pew Research Center poll reports that 54 percent of the American people disapprove of the President's health care law.

According to Pew's most recent survey, the percentage of Americans who think the health care law has ''had a negative effect on the country'' rose 11 percent just since September of this year.

In the Wall Street Journal/NBC News poll released yesterday, the President's disapproval rating reached an alltime high of 54 percent. When asked what issue shaped their view of the President this year, 60 percent cited ObamaCare.

The same Wall Street Journal poll also found the number of Americans who think the President's health care law was ''a bad idea'' reached an alltime high.

Quinnipiac University also released a poll yesterday that found that 57 percent of the American people oppose ObamaCare.

The President's health care law has never enjoyed strong popular support. But Democrats and the President argued that public support for the law should not be judged until the law's benefits were in effect.

The law is now in effect. People can buy insurance on the exchanges. Yet opposition to the law is not declining; it is the opposite that is happening. It is actually rising. Opposition to the law is increasing over time as more and more people become aware of the impact on their personal economic well-being.

Quinnipiac reported a 10-point jump in opposition to the law between October 1 of this year and December 11.

Meanwhile, support for the law, already low, dropped a further six points over the same time period.

Even worse for the President, it is not just Republicans and Independents who are fleeing the President's signature law. Many of the President's strongest supporters, those who initially supported his health care law and helped reelect him last year, are deserting the President.

The Pew Research Center found a 10-point drop in support among African Americans since September and a 9-point drop in support among Hispanic Americans—both groups who strongly supported the President in the last election.

The Wall Street Journal/NBC News poll also found ''faith in Mr. Obama has dropped noticeably in recent months among young voters and Hispanics, two groups that had been among his steadiest supporters.''

So the question, I guess, is why are the American people and even the President's strongest supporters rejecting ObamaCare? Why, now that the law is mostly in effect, is opposition growing rather than declining?

Well, I think the answer is very simple. It is because the law has failed to deliver on the President's promises. From rising premiums, to canceled health plans, to lost doctors, ObamaCare is doing the exact opposite of what the President promised it would do. The President said his new law would reduce the cost of health care. In fact, he claimed families would see their premiums fall by an average of $2,500 a year. But that promise fell apart almost immediately after ObamaCare was enacted. In fact, what we are seeing out there is that the average family has seen its health care premiums rise by more than $2,500 since the law's passage. Now that the law is being implemented, those numbers are only going higher. Those families who are lucky enough to keep their plans have been receiving insurance renewal notices with staggering premium increases. Premiums are doubling or

even tripling for many families, and deductibles are increasing as well. Imagine getting a $600-a-month increase in premiums. That is $7,200 a year. How on Earth is a working family, a middle-class family in this country supposed to be able to afford that?

The President would like you to believe that these Americans' updated, more expensive health plans are far superior to what they had before. But, in fact, many of these plans were as good or better than what these families are getting now. Many of these plans are falling short of people's expectations because they have higher deductibles. Of course, with all of the mandated coverages that are in many of these plans, there are all kinds of things that people who are subscribing, trying to get on the exchanges, are finding they do not need. I have had people in my State of South Dakota who are in their fifties and sixties who are asking why they need to have things such as maternity coverage.

You see that as these letters and emails and phone calls are coming into your office and people are finding out about the specifics—the details, if you will—of these various plans, they are rejecting them not only because they have higher premiums, but they are also plans that are not sufficient or adequate compared to what they are currently experiencing with the plans they had before. Now thousands of families around the country are going to be struggling to pay huge premium increases without receiving any additional benefit.

The situation is no better on the exchanges. While there are certainly plans with low premiums on the exchanges, many of those plans have deductibles that are so high that, barring some catastrophic illness or injury, the family might as well not have insurance at all. A family without insurance who typically pays $8,000 a year in health care costs may see no benefit at all from an insurance plan with a $12,000 deductible. In fact, they may spend more on health care because now they have to pay high insurance premiums as well. So you have higher insurance premiums, higher deductibles, meaning in many cases that they are not going to reach the threshold that would trigger a payment from their plan, and so they are getting no additional benefit, but they are paying way more for the same or worse coverage.

In addition to promising a new era of affordable health care, the President also promised that nothing would change for people who liked the health care they had. He repeated many times—we have all seen the videos of this—that if you like your health care plan, you can keep it. He even went so far as to say ''You can keep it, period'' to make it even more emphatic. ''If you like your doctors, you can keep your doctor, period.'' But Americans are now finding out that was not even close to being true. Millions of Americans have seen the health care plans that they liked canceled by insurance companies in response to new ObamaCare regulations. So far, more than 5 million Americans have lost their health care plans as a direct result of ObamaCare. In fact, today, millions more Americans have lost health care than have gained it under the President's signature law.

Millions of Americans are also realizing that they cannot keep their doctors or their hospitals. ObamaCare put in place scores of new regulations on insurance companies and the plans they offer. To meet all of the ObamaCare requirements while still getting their plans approved, insurance companies have been forced to drastically shrink their networks of doctors and hospitals. As a consequence, many families are finding that their new health care plans force them to give up doctors they have been seeing literally for years.

That may not sound so terrible to some of us if we do not have a close relationship with our doctors, but what if you are a cancer patient who relies on your network of doctors and oncologists to coordinate your life-saving care?

More than one cancer patient has spoken openly in the press about the struggle to find a replacement health care plan after having their original plan canceled as a result of ObamaCare, a plan that covers all of the doctors and the medicines they are currently using.

Joan Carrico, a nurse from Michigan and a cancer patient, published a heartbreaking column on CNBC yesterday updating readers on her struggles to find a health care plan that covers all of her care. I will let her words speak for her and the other Americans in her position:

> I can't begin to describe how devastated I am. Many people like me, who are in a difficult health crisis and fighting to regain good health, are finding it very difficult—if not impossible—to make sure that we can keep our doctors and receive the chemotherapy and other treatments and medicines that are keeping us alive. . . . I'm scared and wondering what surprises are around the corner.

Well, Ms. Carrico brings up another thing people may lose under ObamaCare besides their doctors and their health care plans; that is, their medications.

Forbes published an article this week outlining the reasons ObamaCare may cause millions of Americans to lose access to the medications they are currently taking. The author points out that many exchange plans have steep cost-sharing requirements for prescription drugs. Purchasing a bronze plan, for example, the article points out, means you will likely be responsible for 40 percent of a drug's cost. That may not be so bad if we are talking about a common antibiotic, but that gets very expensive when we are talking about more sophisticated drugs, such as cancer drugs and other life-saving treatments.

The second reason patients may lose access to their medications, according to Forbes, is that some plans simply may not cover the prescription drugs that person has been taking. Out-of-pocket limits, the article notes, do not apply if the drug you are taking is not on your new insurance company's ''approved'' list of drugs. You may find yourself paying for a very expensive drug without any benefit at all from your new insurance plan.

In addition to higher costs and the loss of their doctor and health care plans, there is another reason Americans are rejecting ObamaCare. ObamaCare is not just bad for health care, it is bad for the economy. New health care regulations are discouraging businesses from hiring and expanding their businesses.

Earlier this week a CBS News article reported that ''nearly half of U.S. companies said they are reluctant to hire full-time employees because of the law.'' The Hill reported on a recent survey by the National Association of Manufacturers that found that 77 percent of manufacturers cite soaring health care costs as the biggest issue facing their business. The title of the Washington Post article on the health care law's impact on small businesses says it all: ''Health care law's aggregation rules pose a compliance nightmare for small businesses.'' That is the headline of the Washington Post.

Small businesses are responsible for a majority of the job creation in this country. If we look at some States around the country, my State of South Dakota being a good example, most of the jobs, a huge proportion of the jobs created in States like mine are created by small businesses, but the health care law is discouraging them from hiring, drowning them in regulations, and promising stiff new requirements if they have 50 or more employees. I can't tell you how many times, when I am traveling in my State of South Dakota—or, for that matter, traveling outside my State but specifically in my State of South Dakota—when I am talking to businesses, to people who are creating jobs, investors, the uncertainty associated with this health care law and the new costs because of its mandates and its requirements are making it more difficult and more expensive for them to create jobs.

So what are we seeing as a result of that? We are seeing a slower, much more sluggish economy; chronic high unemployment; and fewer jobs, particularly for people who are coming out of college. Younger Americans in particular are paying a dear price because of the slow economy. When businesses do not hire, the economy suffers. Every American who has spent weeks, months, or years struggling to find a job suffers too.

I know my Democratic colleagues here in the Senate know all of this. That is why some of them are starting to run away from ObamaCare too. Democrats in Congress may have supported the law, but now that they have

seen how it looks in reality, some of them—particularly those running for reelection—are eager to distance themselves from it. No one running for reelection wants to be too closely associated with the law that is raising Americans' health care costs, taking away their health care choices, and hurting an already struggling economy.

The American people have spoken. They do not like ObamaCare. They do not want ObamaCare. They cannot afford ObamaCare. It is time for Democrats in Congress to start listening. I always think it is never too late to do the right thing. I hope that as more Americans start to weigh in and start to engage in the discussion about how this is impacting them personally, that will have such a profound impact on Members of Congress here in Washington, DC, that they will come to the conclusion that many of us reached a long time ago; that is, this is a bad, flawed bill, built upon a faulty foundation that is destined to fail, and that the best thing we can do is pull it out by the roots and start over in a way that makes sense for the American people, that addresses the challenges we have in our health care system in America today but does it in a way that does not require the government to take over literally one-sixth of the American economy and create political control—command and control from here in Washington, DC, over literally one-sixth of the American economy.

One out of every six dollars in our economy today is spent on health care. Think about that. There are very few areas where you can say that complete, total government intervention impacts that big of a swath of our economy. Unfortunately, government intervention is impacting way too much of our economy. As a consequence, we are paying a price in the form of fewer jobs, chronic high unemployment, and a slower, sluggish, anemic economy, which is making it more difficult for people to find jobs and more difficult for us to get ourselves out of what is a very difficult economy.

My hope would be that before this is all said and done—and I do not know when this will happen; hopefully sooner rather than later because I think the sooner we make that adjustment and decide this was the wrong course and reverse course and go in a different direction, the less damage we will do to people's livelihoods, to their personal economic circumstances, and the less damage we will do to the overall economy in this country. I hope that realization comes sooner rather than later. But I think what will drive it—I have maintained all along that ultimately the only thing that can really change this is the American people because clearly we have a President of the United States for whom this is his signature achievement. Unless he starts hearing from the American people, he is unlikely to change.

We have a lot of people here in the Senate—every Democrat here today who was here in 2009 voted for this. Not a single Republican who was here in 2009 voted for it. That is probably one of the reasons this is such a failed policy. It did not have input or buy-in from the other side. It did not get some of the best ideas coming to the forefront.

There was a much better way to do this. Many of us who have been around here for very long have been proposing solutions to address health care challenges that have been rejected by Democrats here in Congress.

We have talked a lot over the years about allowing people to buy insurance across State lines. Why wouldn't we create interstate competition? Competition in a free market economy generally, as a matter of principle and as a matter of practice, drives down price. If we create more competition and give people more choices, that tends to drive down prices. That is a fairly basic economic principle.

Why wouldn't we allow small businesses to join larger groups where they can get the benefit of group purchasing power and thereby put downward pressure on the cost of health care in this country?

Why wouldn't we allow for expanded opportunities for people to take care of their own health care circumstances by allowing for expanded, larger health savings accounts, opportunities for people to put money aside in an account, perhaps buy a catastrophic policy with a high deductible but tax free. They can put money aside that allows them to cover some of those health care costs that don't reach that catastrophic level.

What about finally doing something to reduce the cost of defensive medicine, which means we would have to reform our medical malpractice laws in this country and weed out a lot of the junk lawsuits that clog our legal system and make it so much more expensive to deliver health care. I talk to physicians all the time for whom concern about liability is a major issue. It creates overutilization. You take all this great technology we have in America today, and you have physicians who are worried about being sued. Of course, they are probably going to run duplicative tests. Anybody who is involved in the delivery of health care in this country knows very well about the cost of practicing defensive medicine. There have been many studies done on it, all of which conclude that it adds significantly to the cost of delivering health care in this country. There are differences of opinion about how much that is, but there is no question that it is a factor in the high cost of health care.

There have been proposals. There are a number of my colleagues on this side of the aisle who have suggested allowing people to have their own personal, refundable tax credit for the purchase of health insurance and to create equity between the tax treatment of health care that people can get through their employer with that which they would be able to get in the individual marketplace.

Again, the principle is greater choice, greater competition, and therefore lower prices. It is a fairly straightforward and simple formula when it comes to a market-based approach to how we deal with the health care crisis we have in this country.

Clearly, we have programs such as Medicare and Medicaid where the government is fairly heavily involved in the delivery of health care in this country. That too is an area where we need to be looking at how we can reform and make those programs work more efficiently, more effectively, in a way that hopefully maximizes the return the taxpayers get on those particular programs.

If we look at programs such as Medicare, there was a good example a few years ago, which was Medicare Part D, which is the only program I can think of since I have been here—or, for that matter, since I have been following policies that have been put in place over time—that has actually cost less than what it was projected to cost. Why? Because it allowed for competition. It created a private component where private insurance companies would vie for, would bid for the business of senior citizens across this country when it comes to their medications. As a consequence of that, we have seen those costs come down to a reasonable level. It actually has cost less than what was anticipated.

That is a principle we could start to apply in other areas. There are a number of things that could be done to reduce the cost of delivery of health care when it comes to the component of it that the government is heavily involved with.

But the point, very simply, is that whenever we create more choices, when we create more competition, it has a downward impact on costs. It drives costs down. So why weren't a lot of these things considered or incorporated into ObamaCare when it was passed? Well, we all know the answer to that. It is because the majority party, which had the votes, decided to do it their way. They decided to go their own way, and as a consequence we ended up with a bill, a piece of legislation, and now a huge new program that has been an utter disaster.

I think any objective observer would come to that conclusion based upon the rollout of the Web site and everything subsequent to that that impacts costs; that impacts people's ability to keep the plan they have and the doctor they have; that impacts to the economy, which is overburdened with the cost of regulation in the new law; as well as the many—and I say ''many''—taxes that were included in the new law. There were many new taxes included, not to mention lots of cuts to Medicare, which, interestingly enough, were double-counted. That was allowed to be used as ''savings'' put in the Medicare

trust fund, therefore extending the lifespan of Medicare. At the same time, that was going to be spent on the new health care proposal.

Only in Washington, DC, could someone get away with an accounting convention that would allow someone to double-count revenue, which is essentially what happened. We raised that question many times, and eventually we had a letter from the Congressional Budget Office that said: Yes, this is double-counting revenue. You are spending the same money twice.

Yet the majority party had the votes. Around here, it is a function of math: If you have the votes, you can do pretty much whatever you want. And that is what they did. We are paying a dear price for that, but the people who are really paying the biggest price are the American people, who are seeing these increased premium costs, increased deductibles, fewer jobs, slower economy, and lower take-home pay. That is the bottom line.

It boils down to basic economic terms. What we are talking about is a slower, more sluggish, anemic economy, chronic high unemployment, and lower take-home pay for middle-class America. In fact, if we look at average household income, which is something we use as a metric to measure people's overall economic situations, the average household income in this country, since 2009 when the President took office, has decreased by about $3,700 per family. There are a lot of things, obviously, that contribute to that, but I don't think it is any surprise that when you drive up the costs of something that everybody needs in this country—and by that, I mean health care—in the form of higher premiums and higher deductibles, it is inevitable that you are going to see a lot of people's household incomes impacted by that. Then you couple and layer on top of that the impact it has on the economy. When you have a sluggish economy creating fewer jobs, that, too, has a very devastating impact on people's personal economic circumstances and livelihood. So average household income, since the President took office, has gone down by about $3,700—lower take-home pay. That is another of the results and the outcomes and the ultimate impacts, if you will, of policies created in Washington, DC, that make it more expensive and more difficult to create jobs in this country.

As I said earlier, I think ultimately what will get us to where we really can change this, change course, change direction, take this thing which is headed for the cliff and turn it around and move it in the other direction, is going to be the American people. If every Senator, every Member of Congress, if the White House is hearing what I am hearing from people in South Dakota, perhaps there is some hope that we can persuade enough people in Congress that we have to change the direction we are heading.

I would like to share a few things that I heard from people in my State of South Dakota.

A male constituent from Sioux Falls, SD, wrote and said:

> I just received notice that our health insurance will go up almost 60 percent due to the ACA, from $718 per month to $1146 per month. We will also lose our prescription drug benefit and office co-pay benefit until each of us reaches a $5,000 deductible. We have maternity benefits now and pediatric dental and vision care, although I am 64 and my wife is 59. This will cost us an additional $5,000 per year.

For somebody who is trying to make ends meet in this country, trying to get the mortgage paid, trying to put a little aside for their kids' education, $5,000 is real money. That is a tangible impact of this law on the economic circumstances, the standard of living, the quality of life this particular couple is experiencing in America today.

ObamaCare is sticking hard-working Americans with higher costs for unnecessary coverage. Families were denied the ability to keep their plans—the plans that best fit their needs, lifestyles, and budgets.

The following is a letter we received from a female constituent from Wilmot, SD:

> My husband and I have four small children and purchase our own health care. My husband runs his own small business and I am privileged to stay at home. We are very healthy, so we have always purchased a plan with a large deductible, so we can afford a reasonable premium.
>
> Today we received our letter from our health insurance provider letting us know that next month our premium will be jumping 232 percent! That's over $500 more a month—and we barely use our health insurance.
>
> We currently live in an 1,800 square foot house and have been trying to find something bigger. This jump in our monthly health care premium could prevent us from being able to afford any kind of monthly house payment.

ObamaCare is cutting into the carefully planned budgets of American families, holding them back from the futures for which they have carefully budgeted. This is an example of a family who is trying to get by—four small kids—and they buy their own health care in the individual marketplace. The husband is self-employed, runs his own business, and the mom has been able to stay home and care for those four kids. They work very hard staying healthy and very rarely use their health insurance policy. They are going to see a 232-percent increase, over $500 more a month. They live in a 1,800-square-foot house. They had hoped to be able to find something a little bit bigger, and they aren't going to be able to because of the consequences of ObamaCare.

A female constituent from Spencer, SD, writes:

> Thanks to ObamaCare, my monthly premium will increase over 100 percent, which equals 45 percent of my monthly income. My daughter lost her insurance, as well. The ACA is not affordable, and if I could tell the President so, I would. My private insurance did change.

The Obama administration has broken its promise that Americans who wanted to keep their plans could. We are also learning that this law simply isn't affordable for many middle-class families, such as this lady from Spencer, SD, whom the Obama administration said it would protect when they said: ''If you like your insurance plan, you can keep it, period.'' A lot of Americans took that to the bank. Clearly, they should have known better. The double talk coming out of Washington, DC, is not only frustrating a lot of Americans, it is creating cynicism and a lack of trust and confidence, which is going to make it difficult to do big things in the future.

A male constituent from Rapid City, SD, wrote:

> I know you did not vote for this—
>
> Thank you—
>
> but I wanted to tell you. My health care premium went from $640 a month to $1080 a month. My deductible went from $3600 to $5000. I feel like the federal government has stolen over $5000 a year from me.

Americans feel betrayed by this law, likening the increased rates to theft by their own government. That is the level of frustration people across this country are feeling. They are frustrated, they are discouraged, they are despondent, and they want something to give. They want something to change. They know we can't continue down this path and expect that any of these families are going to be able to provide a better standard of living and a better quality of life for their children and grandchildren. The family has over a $400 increase in their monthly premium and a $1,400 increase in their deductible. That is the effect on this constituent in Rapid City, SD.

A constituent family from Watertown, SD, writes:

> You need to know how ObamaCare is harming my life and health care. We were one of the families that lost their health care plan. We heard President Obama say, ''if you like your health care, you can keep it.'' That was a lie. Our new health care plan is going to cost our family $21,600 a year compared to the health care plan of 2013 which cost us $7,335.96. That is a 300-plus percent increase. We are a healthy family of six people. We are outraged and upset.

Madam President, these letters and calls to my office echo similar complaints from American families back home in my State of South Dakota and all across the country. ObamaCare is costing this family more money and denying them the plan they want. That is the real life, real world impact.

If you think about it, this is really pretty staggering. This new health care plan is going to cost this family over $21,000 a year compared to $7,335 today. A 300-plus percent increase for a healthy family of six. You can't blame them when they say they are upset and outraged. Who wouldn't be. Who wouldn't be.

This is from a small business owner from Brookings, SD, who writes:

> In the mail today was a letter from my health care insurance provider . . . and, well,

guess what? Thanks to the great ObamaCare plan, my monthly premium almost doubled, and my deductible doubled. I'm a small business owner, and I would like to hire an employee next spring. . . . Well, that's not going to happen. When will those we elect to Washington ever do something to help people and small businesses?

Madam President, ObamaCare is not only slamming individuals, it is hitting the small businesses, the job creators that Washington needs to be protecting. ObamaCare is stopping employers from expanding their workforce.

In a bigger place, in a big city, this may not have the same domino effect or the ripple effect that it does in a small State such as South Dakota where you have a small business owner, such as this gentleman from Brookings, SD, who wants to expand his business, wants to hire another employee but is saying that is not going to happen, and the reason it is not going to happen is because of this huge increase in their monthly premiums—almost doubling the monthly premium, and doubling the deductible.

I don't know how an employer in this country today, who is trying to grow a business, expand the business and provide for themselves and their families, perhaps put a little aside to use for the kids' college education or perhaps put a little aside for retirement, deals with the doubling of probably one of their biggest costs of doing business, and that is the cost of health care. You double your premiums; you double your deductible.

This is from a mother in Garretson, SD, who writes:

Next year, our insurance is changing, and I will lose my family practice doctor of 22 years—the doctor that delivered all my children and that has cared for our teenage children all their lives. We will also lose all the backup doctors our family has seen when we couldn't see our regular doctor. I was happy with my insurance, and now I have to lose my doctor.

This is more testimony from people losing their plans and doctors, which the Obama administration—President Obama himself—repeatedly, over and over, told the American people they could keep. Families are losing their trusted doctors.

Whether it is a doctor, a hospital, or prescription drug coverage, these are all real life examples, real world examples of the impacts of ObamaCare that point to just one thing, and that is this law, No. 1, doesn't work, and No. 2, it can't be fixed. There is no way we will be able to address what most people care about when it comes to their health care—and that is the cost—when we require the people who provide that health care coverage to deal with more mandates, more requirements, higher taxes, all of which are going to get passed on and paid for by the very people in this country who are just trying to make ends meet and make a living and provide for their families.

Those are seven examples from my State of South Dakota. I could go on, because there are many more examples. There are examples from people all across the country. But I think the point that needs to be made here—and can't be made often enough—is that these are real world economic impacts that are affecting every day Americans in a way that is making it more difficult for them, making their economic circumstances more complicated and more difficult.

What, if anything, should we here in Washington take away from this? First off, as I said earlier, this doesn't work. Let's start over. Let's do this the right way. It is not too late to do that. It is never too late to do the right thing. We could, if we decided to pull this thing out by the roots and start over, come up with a whole series of reforms that would move us in a step-by-step direction toward the ultimate goal, and that is to address the health care challenge we face in America today; that is, the cost.

I don't think there is any American family, any individual, as they think about having to purchase health care—and particularly if you are a young healthy person, obviously, you don't want to pay a lot for it because you are probably not going to use a lot. Yet those are the people who will get hit the hardest. I can't tell you, if you are in your 20s, how much more you are going to have to pay to get health care coverage in this country, simply because the law requires what they call the community rating band be narrow so that people who are healthier and younger are going to pay much more to cover people who are less healthy. That is a reality in the legislation and it is a reality now in terms of the way it is being applied and being implemented.

So we are looking at a lot of people in this country—for sure younger Americans, but Americans of all ages as well—who are looking at higher cost because of these regulations and mandates and requirements that are being imposed upon the insurance companies and health care providers in this country. The new taxes, which I mentioned a little bit earlier, are also something that ultimately get passed on.

When we were debating this, the Democrats argued that we would have $½ trillion in tax increases and $½ trillion in Medicare cuts and that was how this was to be financed. It turns out when it is fully implemented the cost is much higher. What they did is they front-end loaded some of the revenues and back-end loaded the costs. When the Congressional Budget Office looked at it, in a 10-year window, they said there will be about a $1 trillion cost.

When it is fully implemented, and we see the full impact of the cost and the revenues together, the 10-year cost is more like $2½ trillion. So it was a massive expansion of the Federal Government—literally the largest expansion of the government in 50 years. It was literally a takeover of one-sixth of the American economy. That is what health care represents in this country.

So if we think about that in those terms, how much this thing is going to cost—and at the time they said: Don't worry, it is all paid for. It will not add to the deficit—we are finding out now more and more information, with more and more analysis being done, and it is coming to light that, in fact, it is going to cost way more than what was initially expected. I think this is the tip of the iceberg, the tip of the iceberg in terms of the cost to the American taxpayers. Again, this is financed by higher taxes, all of which get passed on to the very people in this country this is supposed to help.

The Medicare cuts that were proposed to help pay for this, many of us said at the time were cutting hospitals, cutting home health agencies, cutting nursing homes, cutting hospices—which is what this did. This was all designed to take $½ trillion. But again, when it is fully implemented, it isn't $½ trillion, it is $1 trillion, when you look at the full 10-year implementation. But taking this out of Medicare was, No. 1, going to help pay for all the new benefits that would happen under ObamaCare; and No. 2, somehow—somehow, don't ask me how—it was going to be credited to the Medicare trust fund, thereby extending the life of Medicare.

How do you do that? How do you, with a straight face, say we are going to take—let's just use the conservative number used by the Democrats on the floor—$½ trillion out of Medicare, use it to finance a new entitlement benefit and somehow be able to say we are going to credit the Medicare trust fund and that this is actually going to prolong the lifespan of Medicare? It was absolutely stunning at the time that we were having this debate and we raised these issues. But people would say: The CBO says this, the CBO says this. That is because CBO uses some pretty strange accounting conventions that aren't used anywhere else in the world. Anyplace else in the world you would be in jail for doing something like that, for double counting revenue—spending the same money twice. But that is essentially what happened.

Many of us at the time, as I said, raised this issue on the floor and tried to point out we are spending the same money twice. At that time it fell on deaf ears. To me, that is again a symptom of a process that is geared to get a result with a majority vote driven through here, jammed through here, forced through here on Christmas Eve. We all had that vote Christmas Eve morning, and all I can say, as someone who was here and observed that entire process, we tried our best to warn the American people about what was going to happen.

It is too bad we didn't at the time decide, as we usually do when we do major legislation—major legislation that has enormous consequence for the American people—to do it in a bipartisan way that incorporates the best

ideas of both sides of the aisle and perhaps gets a big bipartisan vote. Usually, when you pass major legislation around here, you are sort of hoping for 70 to 75 votes, perhaps even more, because you have the buy-in, everybody has been involved in helping shape and formulate that legislation. But that wasn't the case when this passed.

Again, I understand. This becomes a function of math. You have the votes or you don't. That is the way this place operates. At that particular time, 60 votes was something the majority had the luxury of and didn't seem to care a whole lot about what Republicans had to say. The President was bent on getting his initiative through and getting it his way. Today, that is the reason, in my view at least, we are where we are, with a piece of legislation the impacts of which are now being fully felt by the American people, and their conclusion is what I think their conclusion should be: This is a really raw deal.

I can't tell you, as I think about the broader context, beyond just the world and the space of health care when it comes to public policy, how these decisions that are made here, major policy decisions, impact the broader economy. There is no question, there is no debate about the impact this is having on the economy.

If you talk to any small business person in this country, anybody who has the responsibility of providing health insurance for their employees, who has the responsibility for hiring and employing people and, hopefully, paying them a living wage and benefits that go with it, there is no question this is having a detrimental impact on the overall economy, which continues to sputter along at a 1 to 2 percent growth rate. The best thing we could do, if we want to really help the American people and really improve the standard of living and the quality of life for people in this country, is to first get people unemployed back to work; but, secondly, get the economy expanding at a faster rate.

We are growing at 1 to 2 percent a year instead of 3 to 4 percent, and that has a profound impact in not only the number of jobs created but also the wealth that is created. When we think about an economy that is growing at 3 to 4 percent versus an economy that is growing at 1 to 2 percent, the difference in the gross domestic product, the difference in the total economic output is substantial. In fact, it is dramatic.

What does that mean? It means a lot, not the least of which is that government revenues are a lot lower than they otherwise would be. If you had a more robust economy, growing at a faster rate, people are working, people are investing, they are making money and they are paying taxes.

We have this debate around here like it occurs in some sort of vacuum or static environment. Republicans come in here, those of us who believe in limited government, and we talk about doing what we can to make government more efficient and make it cost less.

Democrats believe that we ought to have more revenue, more taxes; and the problem isn't that we spend too much, it is that we tax too little. That is a fundamental philosophical debate that we have here on a regular basis. One of the reasons, by the way, why it is so hard to reach a significant budget agreement: There is a profound difference in the way we view the world and how we get our country on a more sustainable fiscal path.

There are those of us who believe in spending reforms, lower spending, a more limited role for the government and think that is what we ought to be doing. Democrats by and large believe that we just need a little more tax revenue. If we just raise taxes a little bit more, we could do more here in Washington for the American people. I happen to be of the view that the American people can do just fine for themselves if you allow them to keep more of what they earn.

The reality is that there is a third way, and that is to grow the economy. We can reduce spending, we can raise taxes. We ought to reduce spending. We ought to reform spending in a way that changes this fiscal trajectory which we are on today, which becomes increasingly problematic the farther we get down the road in the future.

But in addition to reducing and reforming our spending programs in this country, we also ought to be looking at growing the economy and actually making the pie bigger. Because that is a surefire way, a certain way of getting the kind of growth in the economy which would allow Federal revenues to go up rather than down.

We have seen this over time historically. If history is any sort of guide and we go back to the 1920s under Coolidge or to the 1960s under Kennedy, a Democratic President who understood the importance of reducing marginal income tax rates or Reagan in the 1980s or more recently in the last decade President George W. Bush, when you reduce taxes on income and investment, you don't get less revenue. You get more because it changes the behavior of the American people. People have an incentive then to invest, to go to work. That generates not less revenue but more and puts us in a situation where we are much better off, not only in terms of our economy and the opportunities it provides the American people but also to the fiscal track we are on as a Nation.

I see my colleague from Kentucky is here. I know he has some observations on this issue of ObamaCare, the economy generally, and other matters before us. But certainly one of the reasons we are here is because we have this rush to approve all of these nominees to these various agencies of government—many agencies which are guilty of the very overreach which has contributed to where we are with regard to ObamaCare. We have too many regulatory agencies with way too much power and are circumventing the will in many cases of the Congress to accomplish an agenda that is very contrary to the very things I just talked about, which are economic growth and job creation.

But through the Chair, I yield the floor for the Senator from Kentucky. I believe Senator PAUL is here to take up the measure.

The PRESIDING OFFICER (Ms. WARREN). The Senator from Kentucky.

Mr. PAUL. Madam President, as we enter into the Christmas season, I think it is a good time to talk about stories to describe sort of pastorally where the Senate is. So I have a story today I would like to tell about how the Senate works—or doesn't work.

So it came to pass that the filibuster was dismembered, dishonored, and indefinitely detained.

With the end of the filibuster came the end of any semblance of comity and compromise on Capitol Hill. The party that never cared much for the rule of law broke the rules of the Senate to change the rules.

Senate rules for nearly 2 centuries allowed the filibuster. The filibuster was simply a requirement that 60 percent of Senators must approve nominations and legislation. This super majority requirement actually fostered more centrist solutions and compromises.

In order to change the rules, though, and kill the filibuster, it required a two-thirds majority to change the rules. However, the party which doesn't and hasn't concerned themselves with the rule of law simply broke the rules.

When the Chair said: That is against the rules, they said: We don't care if it's against the rules. The rules are whatever we say the rules are.

The best way to put this in perspective: You are watching a tennis match. The ball is clearly a foot out of bounds. The umpire says, ''Out of bounds.'' Instead of going by the rules, you have everyone vote. So the audience at Wimbledon votes that it was in bounds when it was really out of bounds.

That is what we have here: We have no more rules and we have no more comity. We have no more compromise. What we have is poison—poison that has been given to us by people who have no concern for the rules.

Historically, it has always required two thirds of the Senate to change the rules. But, for the first time, we break the rules to change the rules. So when the parliamentarian rules to Senate Democrats that: You're breaking the rules, they say: No, it really wasn't out of bounds. It was in bounds or we don't care that it was out of bounds. We don't care what the rules say. We want our way. We are impatient. We want our nominations, and we want them now. We don't care about the history of the Senate. We don't care about the history of the Congress. We want our way or we will pick up our toys and we

will go home. We want it now. We want it now. We want all of it. We don't want to talk with the other side. We don't want compromise. We don't want discussion. We don't want negotiation. We want our way or the highway.

The rules, it seems, aren't binding upon the Senate Democrats. To them, the rules are living, breathing, evolving, and apparently optional.

We shouldn't be surprised, though. We shouldn't be surprised that a party that believes in a living, breathing, ever-evolving, whatever-you-want-it-to-be Constitution, might not think the rules of the Senate are important.

We shouldn't be surprised that the party that believes that morality is unfixed, unhinged, unchanged, unchained to any constants, that all ethics are a situation that this party might break the rules—we shouldn't be surprised.

Is anyone really surprised that such a party with no apparent concern for the burden of debt they are placing on every American family would break the rules to get their way?

We are told they are upset because the Senate just takes too long. They want their way, and they want it now. They want their people confirmed. They don't want to talk to the other side. They won the election. They want their way.

So now they have it. They have bullied and brayed, and they have won the day. The iron-fisted rule of the rule-breakers has now begun.

There will be no return. Are they going to return to the rules halfway, partway? No. I predict they will only go further. If they don't get their way, if they don't get it quickly enough, I predict they will break the rules further.

What passed for gridlock before this will pale in comparison to the poison that seeps from the hands of those who are careless and reckless with the law.

Where the filibuster once created conversation, the iron-fisted rule of the rule-breakers will stifle it. For you see, contrary to popular belief, the filibuster actually fostered compromise, dialogue, and often results. In exchange for the release of nominations, in exchange for the cooperation of the minority party with the majority party, often there were votes on legislation that not everybody wanted. There were discussions, there were amendments, there was dialogue, because we were forced to talk to each other because one side couldn't always get what they wanted. They couldn't slam their fists down in angry tantrum and say: My way or the highway. We want what we want. We don't care what 50 percent of America wants or what 47 percent of America wants. We want our way, and we want it now.

The tantrum used to not work. But now we will live in an era where the iron-fisted rule-breakers will throw their tantrum and they will get whatever they want.

Contrary to popular belief, the filibuster led to dialogue. Every week, the majority party talked to the minority party. There was a meeting each week in which the agenda for the week was set through dialogue and discussion and compromise, behind the scenes, not always out in public. But there was discussion and compromise every week, because the majority party could not rule with an iron fist.

But now, in the era of the iron fist, in the era of the iron-fisted rule-breakers, why will there be any discussion? Why not just roll over the opposition? Why allow debate? Why have debate? Why have discussion? Why have dialogue? Why have votes? It has been getting less and less—as the grip gets tighter and tighter, there is less debate. There is less voting. There are less amendments. I don't think the American public likes that. I think the American public disavows this place and is unhappy with Congress in general because of a lack of dialogue. But that is where we are headed. We are headed towards less dialogue, not more.

In the past, Republicans and Democrats would come together. They would agree to votes. They would schedule them for the week. They would agree to dialogue; they would agree to nominations; and they would agree to quick and easy votes for noncontroversial nominees.

But if there is to be no rules, what incentive is there for cooperation? If it is to be my way or the highway—if the majority party is simply to roll over, if they are to beat their iron fists upon the table and say: My way or the highway; we don't need you; we don't care that half the country disagrees with our policy, it is our way or the highway; that is the way it is going to be, then I think there will be less dialogue and less compromise.

Historically, the filibuster encouraged a reluctant President to cooperate with oversight from the Congress. This isn't a Republican or Democrat thing. This is about the separation of powers. This is about the checks and balances to power. This is about a President who might say—or not say—whether or not he would kill Americans with a drone.

This is about using the filibuster to get information from a reluctant President. This is about a filibuster that allowed Congress to get information and to force a President to say: I will not kill Americans with drones.

This is about a reluctant President being asked: Will you detain Americans? Can you put an American in jail without a trial? Can you send an American to Guantanamo Bay?

How do we get those answers from a President who is reluctant to answer? Through the filibuster.

The filibuster is an empowerment of Congress. It really isn't Republican versus Democrat. The filibuster is about Congress having power to counterbalance a Presidency. Information about malfeasance or transparency can be pried from a President in exchange for nominations.

Quite typically, holds on nominations were used to get information, were used to force people to testify. Recently, I had questions for the nominee for Homeland Security. I asked him: Does the Fourth Amendment apply to third-party records? This is a big constitutional question, and there are answers. I might not have agreed with his answer. He said he had no legal opinion on the Fourth Amendment.

I asked him: Can one warrant from a secret court apply to all telephone records? Can every American who has their records with a phone company have their records looked at through one warrant? Is that consistent with the Fourth Amendment?

And this nominee said: I really don't have an opinion on the Fourth Amendment. I really haven't thought that much about the Constitution. But he is going to lead one of the largest agencies in our government that may well have to do with spying on Americans, and yet has no opinion on the Fourth Amendment.

So what would the filibuster do? Historically, the filibuster would stop his nomination. What would a hold do? Would it be petulant? Maybe at times. But for the most part, holds were placed on nominees who wouldn't answer questions. So if you wanted answers from nominees and you didn't want them to get up there and say I don't recall, 49 times, I can't remember, I don't have an opinion today, sir, on the Constitution; then you would hold their nomination. You would hold their feet to the fire.

The filibuster, holds, about slowing things down—this is about the separation of powers. This is about the checks and balances. Currently we have a President who apparently thinks he is more than a President. He thinks he has a few monarchial powers. He believes more he is a monarch than he is a President because he thinks he can amend legislation. More than 20 times ObamaCare has been amended after the fact. They do not come back to Congress. So what would the filibuster do? What would a hold do? It would say to that President: You will obey the Constitution. We have no way to get him in court on these matters. It is very difficult to prove or disprove the constitutionality by a challenge. The beauty of our Founding Fathers is they separated the powers. One of the powers of Congress is the filibuster. It is placing holds. By doing that we check a rebellious or an adventurous President who thinks he can take this power upon himself.

Montesquieu, who is one of the people we look to about the separation of powers, once wrote: When you allow the legislative power to gravitate to the President, when you allow the President to take this power and he can legislate or do whatever he wants, you are allowing a tyranny. That is why Montesquieu wrote you have to separate these powers so no one body of people, no one grouping within government would assume or absorb too much power. That is what is happening here,

by giving up our power for petty partisan reasons.

Let's be very frank with each other. The Senate Democrats have, for petty partisan reasons, taken away the power of Congress, taken away one of the checks and balances on a rogue Presidency. These checks and balances are not something we should stoop to the level of petty partisanship over. By allowing us to do so, what has happened is we have allowed ourselves to give up one of the great checks and balances that was one of the beauties of our Constitution.

The loss of the filibuster truly weakens Congress and it makes the executive, regardless of party, more powerful and less likely to be transparent and less likely to compromise. In short, when you give power to the party in the minority, when you have that power in the party that is in the minority, it works to coax compromise out of people.

In the era of filibusters and holds, someone such as myself who is new to the Senate could place a hold on the Federal Reserve Chairman and release it in exchange for a vote auditing the Fed. Auditing the Fed passed through years ago in the House. It is a transparency bill. We should know what decision happened. Congress created the Fed. People are getting personally wealthy off the policies of the Fed. There is a revolving door between the Fed and the Treasury and the people who sell the Treasury bonds. There are Treasury Secretaries who leave employment in government and make $160 million a year buying and selling the securities that are bought from a bank that we are not overseeing properly.

There are all kinds of reasons why we should audit the Fed. Every Republican in the House voted for it, 100 Democrats voted for it. You rarely have a bill that 350 out of 435 Representatives voted to audit the Fed. It has been over here for 3 years. It has been held hostage by the Senate majority. The only way the minority party ever gets any votes on anything is by using their leverage, by using the leverage of the filibuster, by using the leverage of a hold—I think often to get something good. There are a lot of things that need to be discussed that are never discussed in this body.

Whether your phone calls, the records of your phone calls, the records of your e-mail should be looked at by your government without a warrant, without an individualized warrant, is something that should have a debate here. We are, in the next week, supposed to go back on the Defense authorization bill. The Defense authorization bill, in 2011, allowed for the first time in our history an American citizen to be held indefinitely. It allowed for the first time an American citizen to be sent from America to Guantanamo Bay and held in a foreign prison in a foreign land, forever, without charge, without trial, without lawyer, without accusation.

When I had the debate on the floor with another Senator over this in 2011, I said, incredulously, you mean an American citizen could be sent to Guantanamo Bay without a jury trial, without a trial by a jury of his peers? He said, yes, if they are dangerous.

Who gets to decide who is dangerous and who is not? Are these questions we would want debated on the floor? One year ago we voted to get rid of indefinite detention; 67 Senators voted to get rid of indefinite detention. Then, secretly in conference committee, it was stripped out by a minority of one or two Senators. So this year we have been prepared for 6 months to have a vote on whether an American can be detained in prison without a trial. We will get no vote because of the iron-fisted rule of the rule breakers. The rule breakers have decided no debate, no dialog, no compromise, no discussion of questions until we tell you it is time—and it never seems to be time.

You have to think about this because there have been times in our history when we have detained Americans unjustly. You have to think about how important a jury trial is for everyone and you do not have to go far back in our history to see times when we made mistakes. Remember Richard Jewel, falsely accused, unfairly accused of being the Olympic bomber in Atlanta about a decade ago. If he had been a Black man in 1920 in the South, he might not have survived a day. Fortunately, he lived in an era when we believed in trial by jury, when we believed that no one should be detained without a trial by jury, no one should be kept in prison without a trial. For goodness' sake, can there be anything more American than that? Yet the law of the land says that is no longer true.

Anybody in our society who ever thinks they have been treated unfairly, whether one is an African American or Japanese American who can remember what happened to the Japanese Americans in World War II, should be horrified that our current law says an individual, an American citizen, can be detained.

The President says: I am a good man and I will never use it. He signs into law the authority for all Presidents for all time to indefinitely detain American citizens without a trial. Yet he says: I am not going to do it. That is not a lot of comfort to those of us who believe in the law. I believe the appropriateness or the ability for us to get to dialog and discussion is important; that the American people want it and that the filibuster actually aided that. I think it aided it. It forced us to have discussion. Without the filibuster, I do not think there will be discussion. I do not think compromise will occur. It was infrequent before. I don't think it is going to occur without the threat of filibuster. The Senate will now be run with an iron fist, a fist clenched so tightly, a power wound so closely that dissent will no longer be heard. Debate will be stifled and amendments to legislation will become nonexistent. They are already rare.

Washington described the Senate as the saucer that cools the tea that boils over from the cup of the House of Representatives. The Senate was that saucer that cooled the tea, deliberating, gave review and time for calmer minds to prevail. The Senate was one of those items that our Founders established to separate our Republic from the whims of an unrestrained majority, from the headlong dash of an unrestrained mobocracy. I think the public will be burned more often as the Senate becomes less saucer and more boiling caldron. The loss of the filibuster will lead to more enmity and less compromise. The death of the filibuster is the death of negotiation. Why negotiate if you do not have to? Through brute force and a disregard for the rule of law, Senate Democrats have found temporary victory—but at what cost?

We will now become the other House of Representatives. Will debate and amendment then become a thing of the past? Will an iron fist smash the saucer that once cooled the tea? Make no mistake about it, the death of the filibuster is the death of dialog. All power that is taken from the minority party is a leverage that is taken from possible compromise. One day I believe those who have seen fit to break the rules to change the rules will regret their actions. The question is, When cooler heads prevail, will there be anybody left with the spirit of compromise?

All one has to do, to see what happens when there is no debate, when there is no dialog, when there is no compromise—all one has to do is look at the health care fiasco. It was passed without any discussion with Republicans—no input, zero input from Republicans. Why? Because at the time, even though we still had the filibuster, Senate Democrats were 60 and Republicans were 40. They did not have to talk to us.

When the majority party does not have to talk to the minority party, they will not. So with ObamaCare, with the unaffordable health care plan he has given us, there was no discussion, no debate—60 Democrats, 40 Republicans. We got a bill that is completely and entirely their baby—no compromise.

The same thing in the House. It passed by brute force by a majority of Democrats and no Republicans.

What we have now is something that is completely unworkable and does not represent the American people. I will be the first to admit we are divided. Not everybody is Republican, not everybody is a Democrat. But the interesting thing is it is about 50–50. It is not 80–20. It is not that everybody or the vast majority in the country want it one way or the other, it is almost 50–50. But instead of having 50–50 solutions come out of here, what is coming out of here is my way or the highway.

You look back, about 1 month ago when the government was shut down,

we were trying to open the government. Every day we tried to open the government. We said what about just delaying ObamaCare a little bit? What about delaying just the individual mandate? No way. We will not negotiate with a gun to our head, the President said. The President bellowed: I will not negotiate. You can't make me negotiate. I will not compromise.

Immediately after the government opened back up he did exactly the same thing we were asking for, he delayed the individual mandate. Of course he did it unconstitutionally and illegally because he did it without the approval of Congress. That is the way it has been from the beginning. This is something that we as Americans should be extremely worried about. This is the stuff of kings, this is the stuff of monarchs, and this is the stuff of tyrants because he thinks he can do the legislation by himself.

But if there is no recourse to come back to Congress, what happens? ObamaCare is a story of favoritism, it is a story of dispensing favors to your contributors, your friends. Should not we have a government where your campaign contribution buys you a different sort of scrutiny? It is no longer equal protection under the law, it is protection based on contribution history.

We have given waiver after waiver to special interest groups. You can see them with a big smile plastered on their face when they come out of the White House. There are special interest groups that have been to the White House hundreds of times. Meanwhile, the Secretary in charge of putting up ObamaCare and getting it started was there once. But hundreds of times special interests came. They paid first. They gave their campaign contributions. They paid, they got access to the White House, and they got a waiver.

Why would McDonald's get a waiver and not Burger King? Why would one business get a waiver and not another? Why would a union get a waiver and not another business that is not union? Is that equal protection under the law? Is that the way we are going to live? That is the way you will live if you allow all the power to gravitate to one person who has no checks and balances.

That is why we are supposed to have a separation of powers. That is why we are supposed to live under a rule of law. Legislation is messy and it takes a while. They no longer have the 60 votes to have his way or the highway. They cannot get everything they want so they do it by executive fiat. But realize that an executive can dictate for good and for harm or does one person always know what is best for the country? So we have been dictated to, all of these changes with ObamaCare, but the bottom line is more people are now losing their health insurance than are gaining it. Those who are gaining it, those who have been forced into ObamaCare, will recognize a few things. They are losing their freedom of choice and they are being forced to pay more.

There are two things that are irrefutable about ObamaCare: You have lost your freedom of choice and you are being dictated four plans. Where there was once hundreds of plans you could purchase for insurance, there are four plans left in America you can choose from, and they are more expensive. Why? Because you are told your kids have to have pediatric dental coverage. What if you don't have any kids? You are being told you have to have infertility coverage. What if you are not married? You are told you have to have pregnancy coverage. What if you are not married? The thing is that what has been outlawed is cheaper insurance policies.

Let's think back to the original problem. Eighty-five percent of Americans had health insurance, right? Fifteen percent of Americans didn't. Of the 15 percent who didn't have health insurance, one-third of them were eligible for Medicaid, and we could have helped them by fixing some eligibility with Medicaid or actually trying to help people sign up. One-third of the 15 percent who were uninsured, some reports said, were not here in the country legally, and then one-third of the 15 percent made between $50,000 and $75,000, but they did not buy insurance because they were young and healthy and decided to roll the dice and they perceived health insurance as being too expensive.

The main impediment to the body of people we could have gotten insured was expense. What have we done to help them? We made health insurance more expensive for them. If you are young and healthy, you should want a high deductible with few mandates. That is very cheap. What does ObamaCare give you? It gives you a high deductible and gives you a million and one things you don't need or don't want and it is very expensive. Really what we have done is taken away freedom of choice and given you something you don't want and made it more expensive.

This is the danger of having one-sided, one-party rule. There is no debate and no discussion. And that is what happened with ObamaCare—a lopsided result, a misbegotten legislation that doesn't work, can't work, and is leading to disaster.

Some have said: How can we fix it? Can we make ObamaCare less bad? I am not positive we can. Some are saying—and the President came back unilaterally and said: OK, I will give you another year. Look at it from the perspective of the insurance company. They can offer the cheaper policies for 1 more year. What incentive do they have? You are being told that within a year you have to buy more expensive insurance. Does the insurance company have any incentive to sell insurance that is less expensive again? If you are mandated to buy something more expensive, why would they do something less expensive? Now everybody in the country will be forced to buy something more expensive.

A lot of young people will say: Well, it is more expensive, and the penalty is not that bad for my income. Maybe I would be better off without insurance. Besides, now I can buy it anytime I get sick.

Other than the penalty—there is no incentive to buy health insurance when you are healthy other than the penalty.

Many people may say: I will just wait until I have chest pain, when I am rolling into the emergency room, or until I get in an auto accident, and then I will buy my insurance.

This is about choice versus coercion. We have one party that has decided they know what is best for you. They feel you are not smart enough to take care of yourself. They feel they should be—in a benevolent way—your parents. So you have a party that has decided they will take care of you from cradle to grave, but don't worry, it is free. No big deal. It is free. We are going to give you free health care.

Mark my words. There is nothing free about this. You will pay for this. If you had insurance before, you will pay for this with more expensive insurance premiums. If you didn't have insurance before, you will pay for this with more expensive insurance than you could have bought before.

The question is, How do you make it work? It only works now—if it is going to work at all—through coercion. You are forced to buy something. To me, that is antithetical to what the American Republic was founded upon. We were founded upon freedom of choice. You have freedom of choice every day in the things you purchase. Why is the one thing you are not allowed to have is the freedom of choosing your health insurance?

Realize what this stems from. This stems from allowing government to get so completely in one hand that there are no checks and balances. There are checks and balances between the branches of government, and there are checks and balances between the parties. If you let one party get too strong of a hold in Congress, you will get something that is not the product of compromise and not the product of discussion.

Also, if you weaken the body of the Senate—which was intended to slow down legislation—by taking away the ability to filibuster or to place holds on nominees, once you do that, you are going to get away from compromise.

I think it is important that people know, when they look at this and say: Well, that is just obstruction; Republicans with their filibusters and holds are just obstructing the process, if the process is to run headlong away from the Constitution or to run head over heels and trample the Bill of Rights, you would want things to cool off. You would want that saucer the Senate was that allowed the tea to boil over and cool off.

So the question we really have is, Do we want checks and balances? That is a

big question. We have gotten to the point in our history where so much power has gravitated to the President—not just this President; Republican Presidents also. This is not a 4- or 8-year evolution; this is a 100-year evolution toward a stronger Presidency. We have now allowed Presidents to go to war without congressional authority. We have allowed them to trample over civil liberties without congressional authority.

We now allow regulatory regimes to write so many rules that your elected officials have little to say over what laws you live under. For example, we complained that ObamaCare was 2,000 pages. The Democratic leader in the House of Representatives said: Don't worry; you can read about it after we pass it. That was a mistake, and that is why so many people still don't understand this piece of legislation.

To top it off, this was a 2,000-page bill, but then 20,000 pages of rules were written. Unelected bureaucrats are writing most of the rules. For example, when ObamaCare passed, believe it or not, I think the original legislation would have let you keep your doctor, period. There was a regulation written 3 months after the bill was passed that changed it and said: You can keep your doctor, but you have to pay more, and it has to obey this rule.

Let's just say you can maybe keep your doctor if President Obama likes your doctor. This rule was not written by Congress. It wasn't part of the legislation. This is a rule that was written afterward.

About 3 months later, as they are writing 20,000 pages of rules, a rule comes up that says: If your insurance ever changes, it is not grandfathered in and you will lose your insurance. It will be canceled. You will be forced to be canceled.

The reason millions of people are having their insurance canceled is because the President authorized this through his bureaucracy without the permission of the Senate.

However, it gets more interesting. Occasionally, when a regulation is passed, we can try to stop it. So 3 months after ObamaCare was passed, they passed this regulation that says: You will be canceled. Millions of people were being canceled because President Obama and his team wrote this regulation.

One Republican Senator, Mr. ENZI from Wyoming, stood up and said: No, we will vote on this. We will vote on whether your policy can be canceled. So what happened? It came back. And guess what. The regulation that says your policy can be canceled if it ever changed—the regulation that is allowing millions of people to be canceled—every Democrat in the body voted for it, including a few of them who are running headlong away from the President. They can't get away from the President fast enough. They are running headlong away from the President and saying: Oh, I didn't know that rule was going to be there. I really thought you could keep your doctor.

Bunk. They all knew it. They all voted directly on it. Not only did they vote for ObamaCare, 3 months later they voted for the rule that is allowing millions of people to have their insurance canceled.

So these Senators who are saying: Mr. President, we might need to fix this, and I have a solution, all voted for the rule. We had a direct vote in the Senate on the rule that says: If you like your doctor, you can't keep your doctor. The whole idea when the President said: If you like your doctor, you can keep him, period—which we have now found to be false—we had a chance to fix it. We had a vote in this body. Every Senate Democrat voted to allow your insurance to be canceled. So if you are one of the millions of Americans who have had your insurance canceled, you can thank the Senate Democrats. Every Senate Republican voted to say you should not have your insurance canceled. Every Senate Democrat voted to allow your insurance to be canceled if it ever changes.

While some people have been wondering how many people are going to lose their insurance because of ObamaCare, the answer is everyone because insurance changes gradually over time. So within a few years everybody's insurance policy will change and you will be canceled. Everyone in America will lose their insurance. They will be canceled eventually, and they will have to buy ObamaCare. So people went from having hundreds of choices for insurance to having four choices in America.

Really what this debate is about is whether you believe in freedom of choice, whether you think you are smart enough to rule over your own destiny or whether you want a paternalistic government that makes these decisions for you. Are we so insecure as a people that we need the nanny state? Do we need the nanny state to take care of us? Do we not want choice? Why don't we extend it to all things? Health care is important, but so is food. Why don't we have the government decide what type of food we eat? Why don't we have the government decide how much we can charge? God forbid we charge too much for food. Shouldn't food be cheap and economical and affordable?

Maybe the government should own the farms. If the government can distribute health care and health care is so important, so is food and water. How can we let anybody in the private marketplace determine water? How can we let private people control water? Shouldn't we let the government be in charge of everything?

The bottom line is this: We shouldn't let the government be in charge of anything that can't be handled by the private marketplace, which means very little should be handled by the government. The reason you want minimal government is that government is not very good at stuff. I tell people that it is not that government is inherently stupid—although that is a debatable point—it is that the government doesn't get the same signals we get.

In the private marketplace, you get signals. You have to make a profit or you have to meet a payroll. So there are different signals that come. As far as health care and the government running it, there is no signal. They get no feedback. Right now they have a Web site that would have sent any private business into bankruptcy. This would have been a failed initiation, and the company would have gone bankrupt. No company could roll out something as bad as this, but no private company would. The private company is influenced by the marketplace, and they have to make good decisions. The government doesn't make good decisions because it is not required to. That is why when you have a choice on whether something should be done by government or the private marketplace, you want the private marketplace.

Milton Friedman often talked about this. This is a truism of all government: Nobody spends somebody else's money as wisely as they spend their own. The private marketplace will inevitably make better decisions because it is a cruel master. In the marketplace, you have to please consumers all the time, every day. They vote. You have heard the term ''democratic capitalism.'' There is nothing more democratic than consumer and capitalism voting every day, and the people who are rewarded are those who give a product that people want to buy, and they do it in an efficient manner, so people are forced to be efficient. They are forced to have good consumer service.

The consumer is king only in the private marketplace. The consumer is treated as a stepchild if it is government. You are treated with reckless abandon by government. As a physician, I dealt with the government for decades and decades. You know what. It takes at least an hour to get someone on the phone. When you get them on the phone, they tell you they can only answer two questions. If they are not in a good mood, you have to call again. You have to get on the phone again and wait an hour to talk to another bureaucrat who may be surly and may have had a bad day and will probably get a bonus anyway.

If you want government to take over your health care, think of the case of Jonathan Beal. He worked for the EPA for 11 years. He told his boss that he was a spy and that he worked for the CIA. He took 6 months off at a time for years and years. He always got bonuses for good employment, good behavior, and good productivity for 11 years. This is what goes in government. Would that happen for a week or 2 weeks in a private industry? No way would that happen. The government is so big and vast, they have no idea who all is even working in government. We are going to turn that over, our health care system. The bottom line is it will

not be efficient, it will not try to save money; it will try to spend money, and it will not lead to us having lower premiums, it will lead to having higher premiums.

Thomas Payne said that government is a necessary evil, and he was right. That sounds kind of harsh, but the thing is we need to have government, but because government is inefficient, we should keep what government does to a minimum. There are certain things we probably can't have private industry do, including a national defense, an Army, a Navy, an Air Force. Government needs to be in place for that. We have decided with most of our infrastructure to have government involved. We have some private entities involved as well. But do we want government involved in every one of our affairs? Do we think government is going to be distributing goods very well?

Think of it this way: Tomorrow we nationalize grocery shopping. We nationalize and everybody gets insurance and it will be subsidized. When people go to Walmart, they will just pay a $20 copay. Do my colleagues think they will buy less or more there? People will empty the shelves.

The other day—my colleagues may have heard that food stamp cards stopped working and they didn't have any limits; people just kept loading up thousands and thousands of dollars' worth of stuff. They trashed the whole place, carts were everywhere, and then someone turned the cards back on and there were limits and people had to leave the store. When there are no limits, people will spend without limit. The same goes with health care. So when government gives us something for free, the tendency is to use it. So what we find, for example, with Medicaid—a big part of ObamaCare is the expansion of Medicaid. I wish to help people who can't help themselves. There are a lot of people who are missing both legs and on dialysis and they have $10,000-a-month insurance. I think we can find a way to help these people. But we have now added able-bodied people to this, generation after generation of able-bodied people, so instead of a temporary hand up, a helping hand, we have turned it into something permanent.

But it is also the most rapidly rising cost in State governments, so State governments, I believe, will ultimately succumb to this burden. In our State it will be a 50-percent increase in Medicaid. In fact, for most of the people signing up around the country, three-fourths of them in my State are signing up for prehealth care. It is not truly free. We are going to pay for it. Anybody who is working will pay for it. But the thing is that what they are signing up for is free.

I think if we expand our safety net beyond sort of those who are not able-bodied or we expand it to make it permanent for people, what it becomes is a drag on the economy and a drag on everything and it disallows or prevents us from growing as an economy.

We have been having this debate for a while. The President has decided that people who are working just have too much money and he has to take from those who are working to give to those who aren't working. That is not how we get more jobs; that is how we make the pie smaller. If we keep dividing up the pie and shifting the pie from those working to those nonworking, it doesn't help anybody. It divides the pie smaller. There have been times in our country where we have greatly grown the pie, but we have to get beyond these petty things.

The President preaches fear and envy, class warfare. He preaches that if your neighbor has three cars, send me and I will take one of their cars. I will get some of your neighbor's stuff and I will give it to you. The problem is it doesn't make us rich as a nation.

There has been a discussion for thousands of years about whether it is good or bad to spend time coveting your neighbor's wealth. It isn't healthy personally or spiritually for our country. If I labor my whole day saying my neighbor has a Mercedes and I don't—I should instead be saying maybe my son or daughter will be working at the Mercedes dealer selling to somebody who is buying a Mercedes. Instead of feeling jealous and envious of others, I should be saying we are all interconnected and we want more people to rise and be part of the top 1 percent. Instead of taking a meat-ax to those who are successful in our society and trying to drive them down, we should try—in the 1920s, Coolidge took the top rate from 70 percent down to 23 percent. We had a boom. Employment thrived. He balanced the budget. We did it again under Kennedy in the 1960s. Unemployment was once again cut in half. By the time we get to Reagan, the rates had risen to 70 percent again, and Reagan said our economy will boom if we lower rates on everybody, and he did. He lowered rates from 70 percent at the top rate—the top 1 percent. He lowered their rates. He didn't raise their rates. He didn't say covet thy neighbor. He didn't say I will get you one of your neighbor's cars. He said lower the rates and the economy will boom, and it did. We lowered the rates from 70 on the wealthy to 50 to 28 and we had a decade-long boom with millions of jobs created.

We have to have this debate as a country. We can't say the debate is over. If we say the debate is over and that what we need to do is just divide it up, pass the money around, we are going to be talking about a shrinking pie that we pass around.

We also have a pie right now that has millions of people unemployed. So how are we going to grow this economy? Are we going to grow our economy by saying let's tax people more? It is exactly the opposite.

I was in Detroit last week talking about how we could help Detroit. We can't send money from Houston to Detroit and bail them out. It doesn't work. One, because it is just like when the President did his government stimulus. When the President chose to pick winners and losers, he wound up with a bunch of losers because no central planner knows who is going to win and who is going to lose. Nine out of ten businesses fail. That is why we don't want government choosing the winners and losers.

When they do that, they choose people such as Solyndra. One, it was a little bit unfair on the face of it. The guy who ran the company was the 20th richest man in the country. What business does the middle class—that the President says he is so proud of—what business does the middle class have giving money to the 20th richest man in the country? It turned out people didn't want his solar panels.

But that is the government picking winners and losers, many times based on campaign history and based on environmental politics. It is picking winners and losers and it doesn't work. Why? Because the marketplace, when it winnows out and finds who will be successful in business, who is a harsh task master, but it asks all of you—it asks 300 million Americans every day to vote on which businesses will succeed. So you get to vote every day. So there is a big difference between reducing taxes for those who are in business and trying to stimulate the economy and taxing people in Houston, bringing it up here, and then passing it out to people I think might be good at business in Detroit. No one knows that. No one has that knowledge. Only the marketplace can decide who is a good risk and who is a bad risk.

Banks are part of that, but the consumer votes every day on which businesses are good and should receive more money.

So my plan is basically economic freedom zones. Let's lower the taxes in impoverished areas. Let's don't tax Houston and bring a bunch of money up to Detroit and say: Here, you are going to succeed. The same thing will happen to that money that happened to the last 50 years' worth of money; that is, it was stolen, some of it was misappropriated, some of it was given to the wrong people.

But if we are to lower the taxes for the people in Detroit, I think we could truly help them. My plan would lower the personal income tax to 5 percent for everybody in Detroit. It would lower the corporate tax to 5 percent. We might find people in the suburbs who want to move back into Detroit if their income tax is 5 percent. That is a good thing. People would pay those taxes. Instead of being envious of these people, instead of saying they might buy another car, I might be saying they might buy that car from somebody selling it in Detroit.

The thing is that economic freedom zones and reducing taxes I think would help spur the economy.

There are 20 counties in eastern Kentucky that have unemployment 1.5 times the national rate. A large degree of our unemployment is due to the President and his war on coal. He always talks about a balanced solution, but he doesn't balance his hatred for the coal industry with jobs. He doesn't balance his so-called like for the environment with jobs. When we look at regulations, we should preserve the environment, and we have many Federal regulations that I do agree with on the environment. We shouldn't be able to dump chemicals in a stream. I agree completely with that. The Clean Water Act says you cannot discharge pollutants into navigable waters of the United States. I agree completely. But do we know what they have done over the last 30 years? They have taken that commonsense regulation, which we can probably all agree to, and they now say dirt is a pollutant and your backyard is a navigable stream.

So we have actually put people in prison for putting clean dirt on dry land. As a consequence, I think we spend less time protecting the Ohio River and more time meddling with some property owner. We have gone crazy with regulations because they are now written by unelected bureaucrats. They are not written by people we can unelect; they are written by bureaucrats.

We have to get back to some common sense with these issues. We have to look at how injurious this is. Even things that are well-intended, we think, well, gosh we have to protect the bald eagle and we have to have endangered species protected. I agree. I have two bald eagles in my backyard. They have come for the second year and they are fascinating. They live on the pond behind my house and it is fascinating to see them. But what we have done in the name of protection for the environment and protection for certain species is we have gone nuts with it.

In my State, we are protecting the Indiana bat. I had a guy come up to me and he said: The Indiana bat? They came up to my property and they took a survey and they found one bat. It was already tagged as a brown bat. The scientists had a big fight. Two of them said it was an Indiana bat and the other two said a brown bat, but did they tell me I had to do anything to help the bat? No. They just charged me money to cut down trees on my own land. So it isn't about the bat; it is about money. They charge $2,400 per acre to chop down your own trees.

Another city in my State, Grand Rivers, when it rained, the sewage was flowing into the river overflowing and they were overcapacity and wanted to have a new sewage plant. They couldn't do it because the EPA was saying we need to know how many pocketbook muscles there are. Are we going to stop the building on the planet? No. What it does is cause hundreds of thousands of dollars to be spent looking at this.

The bottom line is, remember, separation of powers is important, and the loss of the filibuster I think is leading toward a one-sided party rule and leaning toward less power here and more power in the executive branch, I think all to the detriment of the voter.

At this point, I see my colleague from Oklahoma has arrived, and I yield the floor.

Mr. INHOFE. I thank my good friend from Kentucky.

The PRESIDING OFFICER. The Senator from Oklahoma.

Mr. INHOFE. Since he was talking about the EPA, the overregulations there, I happen to have been privileged when we were in the majority to be the chairman of the committee called the Environment and Public Works Committee. It does a lot of very important things in terms of highways and roads and infrastructure. What the Senator from Kentucky was talking about is all the overregulations that come from that. I am very sensitive to that.

That is not why I am here tonight. In fact, I wish to talk a little bit about the nuclear option, about how this has changed things around here, and it is somewhat of a crisis level we have arrived at. Before I do, I wish to share something on ObamaCare. A lot of things have been said on this floor about the problems with ObamaCare. I wish to elaborate a little bit about that in a minute but not right now. I only wish to say that 2 months ago, when my good friend from Texas, Senator CRUZ, and 11 of us were concerned about trying to do something to stop ObamaCare and we took some pretty drastic steps—he actually stayed up and spoke all night—I did not, but I spoke during the evening and again in the morning. But I told a story at that time. It puts it into a context that people don't understand.

The story was this: Keep in mind this was 2 months ago. I said it has been admitted by Obama and by many of the leaders—even the leader of the Senate—that the ultimate goal of ObamaCare would be the single-payer health care system, very much like what was talked about back in the early 1990s when Bill Clinton was President and Hillary had her Hillary health care and at that time I think it was ultimately going to be a single-payer system. As my colleagues well know, a single-payer system by definition is socialized medicine, and that was what it was going to be at that time. I remember talking—and we ultimately did defeat it, but at that time I asked the question, I said: Wait a minute. You are talking about socialized medicine. It doesn't work in Denmark or Sweden or Canada or in the UK. Why do you think it would work if you were doing it? They never tell us this, but they say it may not work somewhere else, but if I were running it, it would work. We defeated that back in the 1990s.

Now, some time has gone by, and we have very much the same situation. We have a system that is edging into socialized medicine, a single-payer system. This is what they want. This is what liberals normally do want. They somehow think that government can run things better than people can.

So I told this story, I say to my good friend in the Chair. Keep in mind, this was 2 months ago. It had been less than a year before that when something happened to my wife—and my wife is just a year younger than I am—something happened, and all of a sudden she found out she had to have emergency open-heart surgery. It was a valve that was the problem at that time. We did some research. She immediately had open-heart surgery. It was successful. She is great now. They replaced the valve, and she is in really good shape.

But the point I am making is that if this had happened and we had been citizens of Canada—we went and checked—someone that age with that kind of an emergency would have to wait 6 months before they could determine whether they were going to allow them to have that operation. If it were in the UK, it would be 2 months. She would not have lasted that long.

That was to let people know that when it hits close to home, it really means lot more, instead of just talking about how many people are not happy with the enrollment and all this stuff.

Well, ironically, what happened to me 5 weeks ago was exactly the same thing. I ended up having to have emergency surgery. I had four heart bypasses. I got to thinking. Just a few weeks before, I had been talking about my wife. I would not be here now. That is how serious this is. Because those individuals who are talking about ObamaCare, they really want a system that the government is running, and it has not worked anywhere else in the world. In cases like mine, I would be on the waiting list and I probably would not have made it this far and would not have been here today.

I only say that—and I want to elaborate a little bit on that shortly, but I need to get in something very significant that is going to take place.

First of all, I do not like the idea of what is going on right now. I am very much upset that we had the nuclear option. I think most people—and it has been said over and over on the floor—constitutionally, we have a system that is set up that puts the Senate in a position where there has to be a supermajority that will ratify the various treaties and will confirm nominees. Well, the nominees who are confirmed are confirmed with a supermajority. Consequently, that would preclude one party from being able to control the confirmation of nominees.

Well, the makeup of the Senate today and for the next year is going to be 53 Democrats dominating, which means, of course, they can always get the 53 votes for confirmation but not any more, not enough to reach 60. So they changed all that, and that is wrong. They should not have done it.

So now we are going through this operation, and I decided that rather than to stay here during this Christmas season for the next few days just voting no

on judges, I am going to say right now that I am going to vote against all the judges, but I am not going to be around here to do it. I will say this though.

JAMES NOMINATION

There is one vote that is coming up, and I am going to appeal to the leadership that I hope the confirmation of Deborah Lee James to be Secretary of the Air Force does not come up until this next week because I want to be here for that, and I would hope it could be postponed until Monday. The reason for that is I think that is a great appointment. I do not remember in the years I have been here—and I am the ranking member on the Senate Armed Services Committee—I do not remember anytime when we have had someone who is as qualified at the outset as she is. She has an incredible background for this position. I have met her. I have talked to her. I have talked to her about the concerns about the readiness, which is very serious right now. Our readiness capabilities are lower than they have ever been since World War II. I know she is the right person to be at the helm to take care of that.

It was not long ago that through the sequestration or preparing for sequestration they made a decision to ground one-third of the combat-coded Active squadrons. Now, let's keep in mind that she is nominated to be Secretary of the Air Force, so this is something she would directly be interested in and concerned about.

What they did was, in order to—I suppose at that time the motivation was to try to save money. They grounded one-third of the combat-coded Active squadrons. That was in April of this year. It was not until 3 months later that they decided this is not good because you have the idle airplanes, the idle pilots. Pilots were resigning; they were upset because they were not being used. So they reinstated the squadrons that had been closed.

General Welsh, a great general, the commander of the Air Force, made the statement, and made it in a very articulate way, that it is going to cost us more to reinstate and to requalify the pilots and to make sure the planes are back in flying order than just the amount of money that was saved during that 3-month period.

That is really quite a statement. It is very serious. He said it could cut the flying hours by 15 percent in the months to come—and it has—as a result of that closure.

Well, I have to say to Ms. James that I am convinced you are going to be confirmed as Secretary of the Air Force. I will do all I can to make sure you are confirmed. But you are walking into a hornet's nest. It is a real serious problem there. The things that are happening to our military, which I am going to talk about in just a minute, are very serious.

She has a background. She served with a technical defense contractor in Virginia. It was the SAIC Technical and Engineering Sector. She was the executive vice president for communications and government affairs and the senior vice president for homeland security. Prior to that, she served as vice president for international operations marketing at United Technologies. That was all the way from 1998 to 2000. She served as Assistant Secretary of Defense for Reserve Affairs from 1993 to 1998, overseeing all matters pertaining to the Guard and Reserve forces. So she has probably as much preparation, background, expertise, education, and knowledge as anyone who has ever been nominated to be Secretary of the Air Force.

I hope we will be able to have that vote maybe on Monday as opposed to some time in the next few hours since I want to be here. I want to be one of the first to congratulate her.

(Mr. COONS assumed the Chair.)

THE BUDGET

Mr. INHOFE. Let me say something about the budget. I try to think of things other people have not talked about. I do not even know right now whether I am going to be for or against this budget, but I had looked, and I was very alarmed. The minority staff on Armed Services did some research, and it came out that there are some parts of this act that we did not know were there. It would include an annual adjustment for retired pay and retainer pay for retired members of the Armed Forces under age 62. This penalizes current and future military members who have served our Nation for over 20 years.

Now, keep in mind, people go into the military quite young sometimes, knowing that the time they would serve would be for 20 years—many of them longer but most of the time 20 years. That is kind of a given. They do this predicated on the assumption that retirement benefits and all these things are going to be there. They are making a career decision, I say to the Chair, and that is very significant.

To come along with a bill that supposedly saves $6.2 billion—there are about 2 million retirees. Of those, just under half are under the age of 62. They would see a steady erosion of their retired pay, approaching 20 percent of their retirement pay by the time they reach age 62.

The 1-percent annual reduction to uniformed service retired pay cost-of-living adjustment—those are the COLAs—for those under age 62 will have a devastating, long-term impact for those who retire at the 20-year point. It implements an annual adjustment to retired pay of the ''Consumer Price Index −1%'' beginning in December of 2015. What that means in summary is that you could have a gunnery sergeant retiring at age 42, and by the time he is 62, this bill would cause him to receive in his retirement pay approximately $72,000 less than he would otherwise. So it is a big deal.

This has not been discussed on the floor, and I think that as we get into the discussion we are going to have on the budget, we have to keep these things in mind. Again, I have not decided yet because I know it is not an easy job. I know we had a Democrat and a Republican working very hard on it. But that is one thing that I believe can be changed. In fact, it would have to be changed before I would support it.

NATIONAL DEFENSE AUTHORIZATION ACT

Well, we went through something, and I want to talk a little bit about the National Defense Authorization Act. Every year we have a National Defense Authorization Act. That act is more important than anything else we do around here, in my opinion.

If you read the Constitution, it will say that providing for the Nation's defense is our major concern. This is what we are supposed to be doing. So we have always had—in fact, for 51 consecutive years we have passed an NDAA bill prior to January. It has always been that way. This is a budget that must take place.

This is very disturbing to me because the House passed an NDAA bill some time ago. We in the Senate Armed Services Committee, way back—was it May or June—we passed the NDAA out of our committee, not unanimously but almost unanimously, and it was bipartisan, had strong bipartisan support to come to the floor. Well, it never came up. And why it never came up is not that important right now. The fact is that we are now in a position where we have to do it and have to have one come up, and it has to be this coming week.

So, anyway, we put together a bill. There is something a lot of people do not understand because it is not very often used, but when the House and the Senate are not able to put something together, they go to the big four. They get the committee of jurisdiction—in this case, the Senate Armed Services Committee. So they had the chairman and the ranking member—the ranking member is the one who has the most rank from the minority, and that is me in the case of the Senate—and then the chairman of the House and the ranking member of the House. Four people. We sat together 10 days ago here in Washington and put together a bill, taking the best parts out of the House bill, the best parts out of the Senate bill, and put together this thing, and it is one that I think—when people understand it—it is one for which I do not know of anyone who would really oppose it.

The problem we are having is that the way it was done was not the way it should have been done. It should have been done as it has been done in the past; that is, to take about—in the last 10 years, it has taken 9 days on average to pass this bill, where we have all of the amendments processed and people come forth with amendments. Well, that did not happen this time. So what we did in this bill is we took 79 of the amendments that people had in the House and the Senate—Republicans and Democrats—we did 79; that is, 41

Republican amendments and 38 Democrat amendments. These are ones that had been submitted on the Senate floor, and we were able to go ahead and put these into the bill.

So we have a good bill. It is out there. We really need to do it. People are concerned about the process. I am concerned. We are going to get busy to make sure this does not happen in future years. We do not want it to happen. But we do not want our service people, who are in harm's way today, to be paying for the fact that we had a procedure that was wrong. We have a vehicle here. We have a bill. It will come up for consideration. It will come over from the House, and I anticipate in the first part of the week we will have this bill.

What does it do? First, it authorizes 37 special and incentive pays, including reenlistment bonuses and certain health bonuses. Here, we are talking about people who are considering reenlisting. Right now they are in the service.

I mentioned a minute ago some of the aviators. Well, this is mostly the Army and the Marines and the Navy. These people are making career decisions. They make career decisions predicated on what they anticipate is going to be out there, and what is going to be out there is what kind of a bonus they will get at the time. Of course, in the event this does not happen, they would not be entitled to these bonuses, if we do not pass this bill. That is how significant it is.

When you talk about certain health professional bonuses, they would expire also.

These health benefit bonuses are very significant, because these are the people who are the health providers for our Wounded Warriors, not just the ones that are in our hospitals today but also in hospice care. We cannot do that to them.

However, if we do not pass this bill, that is going to be a real serious problem. There has been a lot of talk about sexual assaults. We have two Senators, both Democrats, Senator GILLIBRAND and Senator MCCASKILL, who disagree with each other but who have amendments. So what we did is take parts of each one of those amendments—27 specific reforms to support victims and to encourage sexual assault reporting and an additional nine enhancements to the military justice system.

Arguably the one on the floor who knows most about this would be our friend Senator GRAHAM. I think he has looked at these and agrees that these provisions are really very significant, and things that are not going to be there otherwise. These would have been in the House bill and in the Senate bill in the regular procedure to pass these bills, but they will not be there if we do not pass this one bill. They are there.

Gitmo. I look around the Chamber, and it seems like there is such a diverse attitude toward what we have done in the past and will do in the future with Gitmo. That is Guantanamo Bay down in Cuba. I have often said from this podium that is one of the few good deals that we have. We have had Gitmo since the year 1904. It costs $4,000 a year. Half the time Castro does not collect it. So it is a pretty good deal which you do not often get in the government.

It is very expensive to house people there. But it does perform a function that cannot be performed anywhere else. So last year in the National Defense Authorization bill, we put a provision in there, fortunately at that time, that would restore the 1-year prohibition on transferring Gitmo detainees to the United States and to prohibit constructing any type of facility to house them if they are successful in doing that.

That was not good. It should have been forever. But it expires now. That means if we do not have this bill, we will cede that to the President. The President will have total control. If he wanted to take every one of these terrorists out of Gitmo and send them to Yemen or put them in the United States, he could do it. So that is probably one of the most significant parts of this bill.

So this restores the 1-year prohibition on transferring Gitmo detainees to the United States, and it prohibits the construction or modification of facilities in the United States to house Gitmo detainees.

Our training ranges. This bill provides DOD with access to millions of acres of Federal land. Keep in mind, it does not cost anything; it is Federal land—for military tests and training ranges that are really absolutely necessary for the readiness of our combat forces.

We have all heard about end strength. The Obama administration I have often said I think will go down in history as the most antidefense President ever. One of the things that we know is going to happen is the end strength will continue to reduce. This bill allows the Army and the Marine Corps' top people to make the decisions as to where this end strength is going to be reduced and by what amount. By doing this, they can accelerate the strength reduction and save a considerable amount of money. So they will have the flexibility to draw down faster, save money, do it quicker and do it better. Without this bill, they cannot do that.

Military construction. You know, no other military construction can take place. But what is worse than that is, on military construction that has already been started, that is new construction, they would have to stop that military construction. When you do that then you come back later and start it again, it costs millions and millions of dollars more, a lot more money.

Here is another good example of another area that would be a huge savings. Right now we are working on several aircraft carriers. One is CVN–78, the USS Ford. It is a huge project. It is 75 percent completed. We have already spent $12 billion on it. In the absence of this bill, that construction would have to stop. Now, I know that we would come to our senses and maybe in a few months come up with a CR that might have money that would go toward this.

But that is still—when you stop and then start up again, it would be millions, hundreds of millions of dollars of cost. That is corrected in this bill. Not to say anything about the number of people who would be immediately released: 4,300 ship builders who work directly on the ships, and about 1,500 who work indirectly. So it is an economic issue for a lot of people. That is important but not as important as the fact that it is going to cost hundreds of millions of dollars if we do not pass this bill.

The LCS. This allows the littoral combat ship construction to continue in the shipyards. That is in Alabama and Wisconsin. Again, it does not happen if this bill is not passed. That is not going to happen.

Special operations. I think we are all familiar with the special ops guys. I know the chair is very familiar with that. These are the ones who go out there in harm's way and take the risk and are specially trained. The commander there is Admiral McRaven. That is his No. 1 priority—the preservation of special operations forces and families after the 12 years of sustained combat by authorizing various human, resiliency and family care programs. In other words, these people, many of them have families. The families are cared for in a way that has been certainly well deserved by the fighter that they represent. Yet those programs would stop in the absence of this.

So I think that is very important. Just looking at the human end of it, the families, the mothers and the kids that are back there. They have special needs because of the sustained deployments that these great troops have. I would mention also, that in addition to some of the things that we have talked about in using some of the Federal land, this includes land use agreements to ensure special operations. That is what we were just talking about, so the special operations forces have sufficient access to training ranges, including the Chocolate Mountain Aerial Gunnery Range in California, which serves an indispensable role in training Navy seals.

In fact, when you go and you watch them, you see that you cannot train our Navy seals without this facility. So this takes care of that.

Lastly—I could mention a whole lot more—one of the significant things people are taking about is waste in the Pentagon. This provides for an audit of the Department of Defense. It requires a full audit of DOD no later than March 31, 2019. It will take a long time to do this. It has never been done before. This bill will call for the beginning of this process.

We all know about the nuclear triad. The nuclear triad gives us that nuclear capability in our bombers, ICBMs and our submarine-launched ballistic missiles. This bill prohibits the elimination of one of those three legs. We have seen a lot of programs. You could save so much money if you eliminate the submarine element of that.

But in order to adequately protect America, it is important that we have all three legs. So that nuclear triad—and remember that phrase. That is the one where one leg would be eliminated in the absence of this bill.

The prohibition on tech transfers with Russia. This would prohibit the transfer of some missile defense technology to Russia and strengthen the Congressional oversight of the administration's efforts with regard to the United States and Russia's missile defense cooperation.

You know, if we do not do it, the President is going to do it. I would hope that anyone who would be voting in this Chamber knows that is a key issue, and it should be a key issue. We recognize, if we do not continue to take control of that in the Congress, then that would automatically go to the President. I do not think we want that to happen. We all saw what happened in the first budget that the President had. I would never forget that, because I went over—I knew that he was going to be antimilitary, antidefense. So I went over to Afghanistan to respond to it, knowing full well that we were going to have to do something to let the American people know how bad that budget was on the military.

In that first budget of President Obama's, it was 4½ years ago, almost 5 years ago, he did away with our only 5th generation fighter, the F–22; did away with our new lift capacity, the C–17; did away with the Future Combat System, which is the only advancement we have had in about 30 years in our ground capability.

He did away with the ground-based interceptor in Poland. Now, let's keep in mind, the ground-based interceptor in Poland is one that we were putting there because we have currently 33 ground-based interceptors here in America, but they are on the west coast. That is where the threat was at that time. Now things have changed. We found out in the year 2007—it was not even classified. Our intelligence said that Iran is going to have the nuclear capability and a delivery system by 2015, and 2015 is just a little over a year away from right now.

So we knew that way back in 2007. We started building a ground-based interceptor in Poland, with a radar in the Czech Republic. I thought we were doing very well. We had to give them the assurance that we would not pull the rug out from under them if they would cooperate. Then that went out. That was withdrawn in the President's first budget 4½ years ago.

Now we are faced with that threat. Because if something comes into this country from Iran, it is going to come from the East. If there is a lucky shot from the west coast, that is fine. But I do not have that confidence that could happen. So I say that because it fits in with the missile defense. It directs the administration in this bill to make improvements and modernize the ground-based midcourse defense system. That is what we are talking about here.

Without this, that could probably—not probably, possibly—be the most significant thing that we have been talking about here, because now we are talking about an incoming missile to the United States.

The BRAC process, the Base Realignment and Closure Commission. We have had five of them since 1987. Whether you are for a base closure or not, that is not as significant as it is that we are at a time in history where we have the greatest need to put back some of the money that has been taken out by this administration into our defense system. As good as a lot of BRAC systems are, the fact is that the first 3 to 5 years of the BRAC, it costs money, it does not save money. That is what we cannot let happen. So we restrict the use of funds to conduct a round of base realignment and closures for the coming year, because people are talking about that.

Here is a big one too that means a lot. It means a lot to my son, Jimmy, who is real big time into Second Amendment rights. We are from Oklahoma. We actually believe that stuff. We believe in the Second Amendment to the Constitution, I say to my friend in the chair.

There is a treaty called the U.N. Arms Trade Treaty that the U.N. has. I am the wrong one to talk about this, because I have never seen anything good come out of the United Nations. But in this case it is worse than usual. The UN Arms Trade Treaty is one that our Secretary of State has already signed onto. But it has to be ratified by the Senate.

Well, in this bill, it restricts the funding to implement the U.N. Arms Trade Treaty without the Senate's advise and consent on the treaty. Well, that is important. In fact, it reminds me a little bit of what happened when we had the budget vote a few months ago. At that time, I am trying to remember now, but I think it was 5 o'clock in the morning. You would be surprised the kind of amendments you can get passed at 5 o'clock in the morning.

So at 5 o'clock in the morning, I had an amendment that said that we would not allow the United States to join—to be a part of the U.N. Arms Trade Treaty. That was good. But this reinforces that and says that—it restricts it. So if we were to do it, even if the Senate were to do it, it would restrict the funding so it cannot happen.

So I would say to all of my friends out there who believe in Second Amendment rights, who have been concerned that through a U.N. treaty you could lose the Second Amendment rights, do not worry about it because we would have it. If we pass this bill, you are going to be well taken care of.

So I feel very good about the provisions in this bill, I really believe that, when you stop and think about the fact that we actually had 79 amendments that were agreed to in this bill that we tried to pass before.

The Senate Armed Services Committee adopted its version of the NDAA by an overwhelming bipartisan majority in June, and yet we know what has happened. We know why it is necessary because this is the last shot we actually have at a bill.

The House, at 11 o'clock Friday morning, will go out of session. They will be adjourned for this year. The week after that the Senate will. That shows the time we have to get all of this done. That is why there are those individuals who say: You don't have to adopt a bill that the four of you put together. Even though it may be good, we want to have a lot of amendments and go through that process. Unfortunately, there is not time because if we did that it would have to go over to the House. They are already adjourned as of 11 o'clock Friday morning.

We are out of time and the only choice we have now is either to adopt this or not have a bill at all. As frustrated as I am about the process, we have a commitment to provide our military men and women the support that they require, and we have a bill that will do that. If we fail to pass the NDAA, it would send a terrible signal to all of our troops over there.

I have a card of some of the things that we would lose that I mentioned on that rather lengthy list may not happen until next year, may not happen until the first part of the year. Some of them would take place in February and some in March. What would happen is a question that was asked by our fine Senator FISCHER from Nebraska.

She said: What would happen at the end of this year on December 31. What provisions would we lose if we don't pass this bill?

The answer is there are several of them, and I will highlight a few of them. One would be the bonus for new officers in critical skills, the incentive bonus for conversion to military occupational specialty to ease personnel shortages. For those of us who have been in the military, that is called the MOSs.

The incentive bonuses for transfer between armed forces. Someone who is transferred from one area to the other, we have the obligation to pay his expenses and without those bonuses, we wouldn't be able to do it.

Aviator officer retention. I mentioned a minute ago that one-third of the combat squadrons were deactivated, they were grounded and the pilots with them. I talked about that and how General Welch gave us a good documentation. That endured for 3 months. At the end of the 3 months the

amount of that money that was saved by grounding that equipment was far offset by the amount to get people back up to the correct qualifications.

One of the things that would happen is the aviation officer retention bonus. This is to keep these pilots in the service, because it costs much less to retain a pilot than it does to retrain one and start from scratch. I know that. We have a couple of the Rangers in my State of Oklahoma in Vance Air Force Base where I will be tomorrow. That is one of the largest centers that we have training pilots.

Our problem is a pilot shortage. One of the reasons is because, as I just said, if they are grounding these airplanes these pilots finally say: If I can't fly, I am getting out of here.

There have been a lot of them who have left. The only thing that would hold them would be the existing aviation officer retention bonus. This gives a bonus for someone to re-up.

If anyone has been in the services, they will remember—as I do from the U.S. Army—that when they are trying to get people, to encourage people to re-up, it is a lot cheaper to retain someone than it is to retrain them. We give them bonuses. We did that when I was in the service. That is a bonus they would not get.

With already a serious problem with a shortage of pilots, we have to do something about that. That would abruptly stop December 31. That means the pilots making this decision may not even know this. They may decide they are going to do it and then they find out they don't have a retention bonus.

The assignment pay or special duty pay, this would be for transfers. This would be something you would not be able to do, as well as the hardship that would have to be borne by the military.

Healthcare professionals bonus. This is important. If we go out to Walter Reed and see the great job that is done by the professionals with our wounded warriors, it does impress people to see what is going on. I am very excited to see that program has been good. But these health care professionals operate on a bonus or special pay. That would stop December 31.

I know they are committed, they would stay as long as they could, but some of them couldn't afford to do that. This would stop on the January 31.

Reenlistment bonus for active members, that would stop also.

What I am saying is we are going to have to do this bill. It is absolutely necessary. I am not the only one who says that.

If we look at General Dempsey—talk about the deteriorating condition of our military now—keeping in mind that with this President over 4½ years ago, over this 10-year budget, he has taken over $487 billion out of the military, if we have Obama sequestration as it is designed now, that will be another $500 billion. That is a total of $1 trillion.

General Dempsey is the top military person in the military. He is the chairman of the Joint Chiefs of Staff.

He said:

> But I will tell you personally, if ever the force is so degraded and so unready, and then we're asked to use it, it would be immoral to use the force unless it's well-trained, well-led and well-equipped.

Admiral Winnefeld, the second in charge, the vice-chairman of the Joint Chiefs of Staff, said: ''There could be for the first time in my career instances where we may be asked to respond to a crisis and we will have to say that we cannot.''

Secretary Hagel, I opposed his confirmation when he was in. Actually, I think he has improved so much more than I thought he would since that time. He is not afraid to talk about these things. He said: ''If these abrupt cuts remain, we risk fielding a force that over the next few years is unprepared due to a lack of training, maintenance, and the latest equipment.''

It is America he is talking about. This is the Secretary of Defense.

Another thing General Dempsey said—in fact, I carry a card around with me because a lot of people don't believe this. General Dempsey at one time in February 2013, this year, told the Senate Armed Services Committee that: We are putting our military on a path where the force is so degraded and so unready that it would be immoral to use force.

General Odierno, the Commander of the Army, said: Additionally, it is unlikely that the Army would be able to defeat an adversary quickly and decisively should they be called upon to engage in a single, sustained major combat operation.

When we talk about a major combat operation, we are talking about one they used to call the combat operations where major contingencies are on a regional basis.

Our policy, since World War II, has been able to do this to defend America on two regional fronts. That has gone out the window and we are not able to do that anymore.

Secretary Hagel also said: ''If sequester-level cuts persist''—which is what we are talking about, the second half trillion that Obama would be taking out of the military—''we risk fielding a force that is unprepared.''

I can't imagine hearing that from our own Secretary of Defense, but it is there.

I wish to show us why our choices are down to only one choice.

On this chart if we look at December, today is the 12th. The House leaves at 11 o'clock Friday morning. They are gone, they are gone for the rest of the year. Anything we do that has to go to the House, they won't be there. It can't be done. We work for 1 more week starting the December 16, this coming Monday, and we go all the way through the week where we will be in session. Anything we would do or pass or amend could not go to the House, and that means we would go into December 31 without any kind of advance authorization. On that basis it is significant and that shows we actually have to do it.

I think I mentioned this. I have a chart, but I don't have it in front of me—show since 1970 we always have had our Defense authorization done before January. The only two exceptions to that were when they were vetoed by the President on two occasions and we had to override the veto. Nonetheless, that is why this month is the last chance we have to do it.

I would mention that there is such popular support for this around the country that we have extremes—not really extremes—but publications generally considered to be on the progressive or moderate side and some conservative.

This is one where both the Heritage Foundation and the Washington Post say let's pass the defense deal. It has to pass.

The Heritage Foundation has an extra paper that if there is time later on I may make some quotes from that.

The Washington Post says:

> With the end of 2013 rapidly approaching, Congress has an opportunity to rise above a year of massive dysfunction and prevent major disruptions in U.S. defense operations. The leaders of the Senate and the House armed services committees have managed to fashion a bipartisan version.

That is what we are talking about when I say the big four, so this is what we are talking about.

Continuing:

> It's a decent compromise that the leaders of both chambers ought to embrace and bring to a vote in the coming days.
>
> A failure to do so would be a new political low for this Congress. The NDAA has been passed 51 consecutive years, even when much of the rest of government had to make do with temporary authorities. But much more than political symbolism is at issue. Though defense funding ultimately must be provided by appropriators, the authorization bill extends vital Pentagon authorities and ultimately sanctions new operations.
>
> If no bill is approved by Jan. 1, combat pay and bonuses for U.S. troops in Afghanistan and elsewhere would be suspended; work on major weapons systems, including a new aircraft carrier, would be halted at considerable cost; and support for the Afghan army and the disposal of Syria's chemical weapons would be interrupted at a critical moment.
>
> The bill also contains important measures to combat sexual crimes in the military.

We talked about that, but this is being editorialized, not by me on the floor of the Senate, but by the Washington Post.

They talk about Guantanamo Bay and they say:

> . . . advance the closure of the Guantanamo Bay prison—

It could take place in the absence of this legislation.

Continuing:

> Though a proposal was favored by Sen. Kirsten Gillibrand (D-N.Y.), providing for the prosecution of sex crimes outside the military chain of command, it was not included—did not receive a Senate vote—some three dozen other reforms in legislation would make the punishment of these crimes

more likely while providing more protections to victims.

Let me conclude this editorial by reading the next-to-the-last paragraph. It says:

Other measures in the bill ought to attract broad bipartisan support. The effects on defense of the so-called sequester would be eased by transferring money to operations and training from less essential accounts, such as construction and staffing in office headquarters. The Pentagon is still vulnerable to a $50 billion sequester cut in January unless a separate budget deal can head it off. But passage of the authorization act would prevent the worst disruptions of ongoing operations.

It goes on to say that this is in the House and the House, very likely, is going to pass it, and send it over to the Senate, and they strongly support it.

We have letters from all of the Armed Services to us and to the leader, Senator HARRY REID. This one is from Martin Dempsey. He is urging us to pass this. It is not only me and a handful of Senators, this is the military speaking. He is the top military personnel.

He said:

I write to urge you to complete the National Defense Authorization Act this year. The authorities contained therein are critical to the Nation's defense and urgently needed to ensure we all keep faith with the men and women, military and civilian, selflessly serving in our Armed Forces.

He goes on to say, ''This is the most significant concern we have right now,'' that we may not be able to pass this bill.

We have a letter from General Welsh. General Welsh, if you remember, is the chief of the Air Force. He is the one who is so upset with the fact we had grounded some of our combat squadrons. He says:

The FY14 NDAA contains critical authorities that enable us to protect the American people while keeping promises to our active duty, Guard, Reserve and civilian Airmen. If this important legislation is not enacted I worry about significant impacts to Air Force operations that could jeopardize the missions we are tasked to perform.

He goes on to say how important that is; that it is a matter of life and death to many of the airmen who are out there.

We have the same thing from General Amos of the Marine Corps, who says:

. . . our hard-won gains on the Twentynine Palms land expansion will be threatened, and the construction of the next generation aircraft carrier, the USS Gerald R. Ford, will stop. Passage of the this vital legislation will prove to our Marines and Sailors our unwavering support.

That is what we are talking about because those are the guys who are out there.

I see my good friend from Arizona Senator MCCAIN, and I would say I have been talking about the degraded condition of our military right now and how much worse it is going to be if we are not able to do this bill that I have outlined in some detail. Hopefully, we will be successful in doing that.

The PRESIDING OFFICER. The Senator from Arizona.

Mr. MCCAIN. I ask unanimous consent to engage in a colloquy with my friend from Oklahoma.

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

Mr. MCCAIN. First, I thank the Senator from Oklahoma for his leadership and his dedication to getting this authorization bill passed. I think my friend from Oklahoma would agree with me there is no reason we are where we are today.

Is it not true this bill was passed out of the Armed Services Committee in May and here we are now in December just now contemplating bringing it to the floor of the Senate?

Mr. INHOFE. I would say to my friend that is true, but also, over in the House they did it the way it should be done. They passed it out of committee, they got it to the floor and passed it. Ours was passed by a huge bipartisan margin. We only had three or four vote against it, and that was way back in—I think it was the last of May or 1st of June. It should have been done back then instead of waiting until 1 week before we are out of here.

Mr. MCCAIN. With all due respect, one has to wonder about the priorities of the group and the leader who sets the agenda for the Senate. One of the real advantages of being in the majority is you set the agenda. So rather than take the bill to the floor, as we have for 51 years—for 51 years the Congress of the United States has taken up and passed a Defense authorization bill—we are now here in December, with the House of Representatives going out of session tomorrow, and we are faced with an unsavory parliamentary situation where we are having to maneuver in a way that a ''message''—and my friend from Oklahoma can correct me if I am wrong—a message that cannot be amended, otherwise it would have to go back to the other body, which is going out of session, which would then take us into January.

I ask my friend from Oklahoma: Isn't that where we are, and isn't that a commentary on the concern my friends on the other side of the aisle, the majority leader, has about the men and women who are serving in the military?

We will talk a little about what a failure to pass a Defense authorization bill is. But we are now in a situation which is a disservice not only to the men and women who are serving but to all of us—to every one of the 100 Senators—because every one of these Senators would want to have an amendment to make this bill better and that will impart to the rest of the body their knowledge, their expertise, and their priorities. So what are we doing? We are asking Members on this side of the aisle and the other side of the aisle to accept a piece of legislation without a single amendment to it. That, my friends, when we are talking about the defense of this Nation, is absolutely outrageous.

Would my friend from Oklahoma agree?

Mr. INHOFE. It is right up here. It shows the House, on Friday, at 11 o'clock, is out of here. They are gone. They are adjourned. If something should happen—we were to amend something—they are not there. So it can't be done. This is where we are now. We only have these 5 days that are left.

A lot of people have said—and I would ask my friend from Arizona if he agrees with this—well, we can come back in January and do this. But then look at this. We come back on the 6th of January, and the CR—the continuing resolution—is here. I can assure you, from past experience, that will dominate the floor. They are certainly not going to have time to do it. So the only shot we have is up here.

But also important, I read a list of things before my good friend came in, that expire on December 31, and those are things that are happening right now to all of our pilots. My colleague certainly knows about that. They have bailed out. They are gone now. They are so upset with what is happening with the grounding of our squadrons. If we take away their reenlistment incentive, are we going to have any pilots left?

Mr. MCCAIN. So we have established, by the calendar and by what has happened since May, that, obviously, the majority and the majority leader had a higher priority for whatever the hell it is we did rather than the defense of this Nation. That is a fact. I would challenge anyone on the other side of the aisle to come and argue differently. It is outrageous.

Now that we have established that, could I ask my friend what happens—and I know he has gone through it—what happens to the men and women in our military if we do wait until January, if we do wait until February or March or don't act at all?

For example, one of the best examples I have seen is that right now a married sergeant in the U.S. military who is serving as a helicopter crew chief in Afghanistan, beginning on the 1st of January—please correct me if I am wrong—will lose $890 a month; is that correct?

Mr. INHOFE. That is correct.

Mr. MCCAIN. So we send people into combat, and while we dither around here we are going to keep the men and women who are serving in harm's way from getting the benefits they have earned and deserve and are theirs by law. But we are not going to act, at least until January, perhaps.

I know the Senator from Oklahoma has gone on with a very long list about the completion of ships, about the health programs, and about a number of other issues, but I wish to focus for 1 minute on one area with my friend from Oklahoma.

I think all my colleagues are aware, and the American people are aware, there is a serious issue in the U.S. military. It is a very serious issue and it is the issue of sexual assaults. It is the

issue the Senator from Oklahoma has spent untold hours in discussions and debate and learning about this issue because it is a terrible thing that is going on in our military today.

Under the leadership of the Senator from Oklahoma and the distinguished chairman of the committee, Senator LEVIN, we have—and with the participation of every member of the committee, under their leadership—come up with a way to, at least to a significant degree, address this problem in the military.

There are still some controversial aspects of it that are not necessarily either side of the aisle but just a different viewpoint. But I would argue and ask my friend from Oklahoma, is it not true that we have made significant improvements in the Defense authorization bill on the issue of sexual assaults?

These changes, after hearings, after debate, after discussion were put into law and they were agreed to as being very necessary measures to try to bring this terrible situation of sexual assaults in the military under control. I ask my colleague from Oklahoma if this isn't, among many others, an issue that needs to be addressed.

Mr. INHOFE. I respond to my friend that it was addressed in the House bill and in the Senate bill, but the Senate bill didn't pass, so this is all that is left. Specifically, 10 days ago, we were meeting and putting this together—the big four, as they call it. It had 27 specific reforms in this area to support victims, to encourage sexual assault reporting, and, in addition, nine enhancements to the military justice system.

I mentioned our good friend from South Carolina, who is probably the expert in this area, and we consulted him, along with a lot of the other people, both Senator GILLIBRAND and Senator MCCASKILL had amendments and we have bits out of each one of those amendments they had. They are both better off than they were before. But without this, we got nothing—no changes at all.

So we have made great progress in this bill in the sexual assaults, as well as I mentioned Gitmo too which is a very controversial issue.

Mr. MCCAIN. Would the Senator agree that even though there is significant difference between Senator GILLIBRAND and Senator MCCASKILL, they were in agreement with the many provisions my colleague just pointed out, which, whether we address their disagreements or not, they were both agreed these are very important measures they both agree on, that the entire committee agreed on in addressing this issue of sexual assaults in the military.

Mr. INHOFE. That is exactly right. As you point out, they were apart on a lot of issues, but what we did was to take those areas that will improve the situation and adopted them, and they are a part of this bill. So the whole issue of sexual harassment will not be addressed at all in the absence of this legislation. Of two of the very significant provisions that are here, certainly that is one of them.

I mentioned a minute ago the other one. I know we have had differences of opinion between us on the whole Gitmo thing. Yet we have a provision in there now that I think satisfies us both until we all have time to sit down and work these things out.

The bottom line is this: We have things where it would cost huge amounts of money. If you just take the CVN–78, they would have to stop construction, after we have already spent $12 billion, and after it is 75 percent done. That cost would be tremendous, especially when we all know we will go back and reinstate it. But this wouldn't be just millions, it would be hundreds of millions of dollars. That is what is going to happen if we don't pass this bill.

Mr. MCCAIN. I know long ago both the Senator from Oklahoma and I served in the military, which is not too relevant anymore, but both of us keep track of the military. We visit our military installations, and we spend time with the men and women who are serving both here and overseas. We are in communication with them. It is part of our privileges as their representatives, whether they happen to be in our home State or serving overseas in harm's way. When you talk to these young people—and they are the bravest of the brave and we all know the best of America—they do not understand why, when they are serving in combat and they are entitled to some additional pay because of being in danger, that will not happen. They do not understand why the bonus of special duty and incentive pay will lapse. They don't understand why that should happen. They do not understand why we are not addressing the issue of sexual assaults in the military. Many of them are deeply concerned about that.

By the way, I would also add—and I think my friend from Oklahoma will agree—this issue impacts on recruiting the most highly qualified young Americans.

So here we are on December 12 and we have still not completed our duty, our obligation to the men and women who are serving. They rely on us. They rely on us to take care of them. They rely on us to provide them with the weapons and the capabilities and the pay and benefits and to take care of their families. They rely on us. I am getting feedback from them that they are now beginning to believe we don't care that much. Frankly, I can't argue with that because why are we here in December? Why are we here in December? The fiscal year ended on 1 October. They ask: Why is it that you in Congress can't act to provide us with the tools we need to carry out our mission of defending the Nation?

Frankly, I don't have a very good answer, but maybe the Senator from Oklahoma does.

Mr. INHOFE. My colleague is fully aware, because no one has spent more time over in these areas of hostility than my good friend from Arizona, that when you talk to these guys, and you sit in the mess hall with them, one of the things—and we know this is true because we have both had experience in the military—they are talking about is their careers.

They are talking about their careers. Right now our retention is as good as it has ever been. What is going to happen to our retention if all of a sudden we renege on the reenlistment bonuses that they all depend upon? They all talk to each other. About the time that stops on December 31, I have great fear over what is going to happen to our retention rate.

I talked about in the very beginning about what has happened in the military in the last 4½ years, and I read all of the statements from our commanders, from Dempsey, and actually even the Secretary of Defense, talking about what a crisis it is. They all said it is much more of a crisis if we don't pass this bill. This isn't going to help us like it should. We should be in much better shape than this even if we pass it. But we have to pass this or all those things we talked about which are going to be affecting our troops directly are going to take place.

Mr. MCCAIN. I finally say to my friend, I thank him for his leadership. I thank him for his willingness to really short circuit what should have been a 2- or 3-week exercise, where every Member of the Senate would have had the opportunity to propose amendments, to debate those amendments.

My colleague just mentioned the issue of detainees which is still something that deserves great scrutiny by this body. The issue of surveillance is clearly one that needs debate and discussion on the floor of the Senate. There are so many issues that we are not discussing in the slightest because we are now entrapped by a process which doesn't allow us to pass a single amendment to this absolutely vital piece of legislation.

I thank my friend from Oklahoma for understanding that even though we are placed in this incredibly unsavory situation where we are not able, every Member of the Senate who chooses to—and as the Senator from Oklahoma knows well, when we consider the Defense authorization bill, there are literally hundreds of amendments that we consider because of the interest and the commitment that all of our colleagues have. We are not going to be able to do that this time. But it seems to me too, at least we ought to get the bill passed so we can get our Defense Department and the men and women who are serving in it in the kind of condition they deserve.

Mr. INHOFE. I thank my friend from Arizona for coming down and showing what a traumatic situation we have right now. I hope two things come from this. First of all, that we go ahead and

pass the NDA bill and then make sure that next year we are there to make sure this doesn't happen again in the same way it has happened.

I ask unanimous consent to have some testimonials printed in the RECORD.

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

OKLAHOMANS ARE HIT HARD BY OBAMACARE

It took me three days to sign up for ObamaCare due to website glitches. When I finally got through, I saw my own premium rise 20% and my out of pocket costs go up. But this is nothing compared to what Oklahomans are experiencing. In just a week's time, I received more than 400 stories from my constituents impacted by ObamaCare.

Julia in Broken Arrow said that to keep her family's current plan, they will pay an additional $1,400 in premiums and another $4,000 out-of-pocket.

Lloyd, from Tecumseh, says he is dropping his current insurance and choosing to pay the penalty after learning his monthly premium will jump from $592 to $1,952.

Stacy, a mother of three in Oklahoma City, shared with me that her family's health insurance premiums will increase 20%, with an additional $6,000 in out of pocket costs per person, up to $18,000.

Joy of Oklahoma City said her family's deductible is increasing by $2,000 and they will have to pay out of pocket for prescriptions. This will create significant financial difficulties for them as her husband is battling cancer.

Greg and his family, who live in Oklahoma City, are worried about having to choose between making a monthly mortgage payment of $1,100 or an insurance payment of $1,197.

Jim, with employer coverage in Choctaw, is facing a deductible increase of $4,000.

Janice is currently on a COBRA plan in Sapulpa. On a new exchange plan, she will be paying $240 more each month.

Paul, who says he is in good health and rarely requires a visit to the doctor's office, will be paying $70 per month.

Ralph, who has employer-based insurance in Durant, will pay $80 more each month.

David from Owasso let me know his family's premium and deductible will increase by $318 a month and $500, respectively.

Linda in Pryor says ObamaCare has doubled her deductible and increased her out of pocket costs by 30%.

Darrell, who has a group plan in Cashion, is expecting his premiums to go up 40% and his deductible to double.

Ed, a widow in Oklahoma City, will be paying $250 more in premiums every month.

Linda, from Chelsea, says her family's deductible has increased $700.

Roger, who is on a fixed income in Comanche, says his premiums have doubled.

Peggy in Boise City said her deductible has increased 250%.

An employer in Tulsa says he must choose between a 128% premium increase or a 500% increase in deductible for his staff.

A small business owner in Oklahoma City reports that the cost of the insurance he provides to his employees has gone up 41% and will cost him $1,000 per month more. Because of the mandate to have insurance, more of his employees are now electing coverage, which will drive his costs up even more.

A family of four in Shawnee is facing a 20% increase in premiums and a $1,500 increase in deductible.

A single father of two and small business owner in Lawton says he will be paying 24% more in monthly premiums.

A family of three in Miami is choosing to go without insurance and pay the penalty rather than see their premium double and deductible increase by $3,200.

Nancy from Oklahoma City said she probably should be one to support Obamacare due to her income, but can't because ''it is not the right answer''. She believes the government doesn't have the right to tell her how to live or define what is ''affordable'' for her.

Sharon from Oklahoma City went onto the website. Despite entering in her full name, social security number and address, her identity was not able to be verified. She said she spent 5 weeks trying to get someone to assist her and at this rate she is ready to give up and pay the fine.

Erin from Beggs is a wife and a mother of three. She was dropped from her insurance company and instructed to enroll in Obamacare. She has tried to access the website since it was ''fixed'' and has not been able to get past the first step. She is repeatedly kicked off and has to re-enter her information every time she goes on the site.

Janice from Sapulpa spent over 40 hours attempting unsuccessfully to apply for insurance on Healthcare.gov. She finally asked for them to send her a paper application and when it arrived, it was in Spanish.

The OKC Chamber of Commerce can no longer offer insurance plans to its members since the plans don't meet mandated requirements, impacting 1,400 businesses.

A 50-year-old female from Chandler said she and her husband were dropped from their insurance plan. The plan offered to her now includes maternity care and pediatric dental care—neither of which she needs—and will cost over 200% more per month.

Cyndee of Suphur lost her family's insurance plan while she was still in a critical time frame for treating her cancer. She called this a ''scary'' experience. She had this plan for 10 years until ObamaCare deemed it unworthy. Cyndee wrote to me about her new plan under ObamaCare and said: ''No one wants affordable insurance more than me, but at $1,100 a month, just for me—one person—it's certainly not affordable.''

A married father of two from Muskogee was also dropped from his insurance plan. The plan offered to him as comparable in coverage would cost him and his family 46% more than what they used to pay.

Another male, from Edmond, was dropped from his employer sponsored health care. The plan he had through his employer provided him with a 75% employer subsidy on his deductible and covered 100% of his medical bills.

Rockey from Enid said he and his wife's hours were cut at work to 25 hours a week because of the employer mandate. Now that they work part time, they are no longer eligible for coverage through their employer and Obamacare is not affordable for them.

Jessie from Moore said her husband's employer is considering dropping spouse and dependent coverage due to the rising costs of health insurance.

Debbie of Frederick said she is fortunate enough to still have insurance through her employers, but because of mandates in the Act, their family doctor of 30 years has had to eliminate hospital visits from his services. Any time Debbie is in the hospital, the doctor who knows her health the best can no longer be on the front lines of helping make health decisions with her in the most crucial circumstances.

Donna from Elgin said not only have her insurance costs gone up, but two of her doctors have left their practice. She cannot afford the new health insurance, and is having troubling finding new doctors.

Roderick from Shawnee said within a three-month period, three of his doctors have chosen to retire. He is worried about finding new doctors his insurance will cover.

This is devastating. We absolutely need to bring the cost of healthcare down, but ObamaCare is clearly doing the opposite. My colleagues and I have supported commonsense ideas like purchasing insurances across state lines or enacting tort reform. We could have started here, but instead, President Obama forced America down a destructive path that will likely end in a single-payer option. We must repeal ObamaCare and put common sense healthcare reform in its place. I'll continue this fight to ensure Oklahomans have quality, affordable health care options.

Mr. INHOFE. I yield the floor.

The PRESIDING OFFICER. The Senator from South Dakota.

Mr. THUNE. Mr. President, as we consider some of the nominations before us, we are reminded that one of the reasons we have all these problems around the country associated with ObamaCare and all our constituents are being impacted in such a negative way by higher premiums, higher deductibles, higher taxes, and fewer jobs is because of the overreach of government.

This is a perfect opportunity for us to discuss the fact that overreaching government—in this case, government which has literally taken over one-sixth of our economy—is causing great harm to the American people and that there is a much better approach most of us here advocated when this was debated. Of course, at the time we didn't have the votes. This was passed in a party-line, partisan way and, as a consequence, we are seeing now the results and the impact on the American people, all of which are very harmful to their own economic circumstances.

I have a personal example from the emails and letters coming into my office of the adverse impact of ObamaCare. This comes from a female constituent of mine in Wilmot, SD. She writes:

My husband and I have four small children and purchase our own health care.

My husband runs his own business and I am privileged to stay at home.

We are very healthy, so we have always purchased a plan with a large deductible, so we can afford a reasonable premium.

Today we received our letter from our health insurance provider letting us know that next month our premium will be jumping 232 percent! That's over $500 more a month—and we barely use our health insurance.

We currently live in an 1,800 square foot house and have been trying to find something bigger. This jump in our monthly health care premium could prevent us from being able to afford any kind of monthly house payment.

. . . ObamaCare is cutting into the carefully-planned budgets of American families, holding them back from the futures for which they have carefully budgeted.

This is just one example of the harmful economic impact ObamaCare is having on countless Americans from my State of South Dakota.

The PRESIDING OFFICER. The Republican leader.

Mr. MCCONNELL. Mr. President, I realize Democrats want to deflect attention of the impact of ObamaCare from our constituents. That is one of

the reasons we are having these nominee votes. But our constituents have the right to be heard, so I wish to share some thoughts from a constituent of mine in Owensboro, Cheryl Russell. Here is what she wrote:

We got a letter from our insurance company saying our current policy will not meet the affordable care act, which means it will go away.

According to our insurance company, we will have to take pediatric dental and vision insurance, [even though] we don't have kids.

They said it was because of ObamaCare. . . .

She goes on:

Another plan . . . will cost us over $150.00 more a month plus our deductible goes up to $5700.

Please keep taking a stand against Obama Care . . . not only are we going to lose our insurance, but when we go to a different policy we have to pay more. . . .

We are 58 & 56 years old. We will have to work the rest of our lives just to pay for our insurance. . . .

This isn't fair and it isn't right.

The PRESIDING OFFICER. The Senator from Missouri.

Mr. BLUNT. Mr. President, I wish to share a couple letters I received just today.

I was talking earlier in the day on some of these situations and again what happens when one side thinks they can do whatever they want to do and the consequences of that.

This letter is from Paul from East Prairie, MO, in the Missouri bootheel:

Upon hearing the potential changes coming January 1st, I decided to investigate the stories I heard. I learned that in 2014 my family's premium would go from $597/mo with two $5000 deductibles to $1119/mo with two $4300 deductibles. My cheapest option is $1,085.00/mo with a $12,700 deductible.

Not only was this unaffordable, it was pointless to have insurance.

Certainly, I agree with that. If your deductible is $12,700 and you are paying over $1,000 every month to get insurance, what is that? It is certainly not affordable health care.

Here is a letter from Tom in St. Louis, who said:

My company is a great company to work for, but unfortunately our health insurance policy went from $490 to $690/month. That is $200/month that I can't put towards my kids' education. That is a lot of money for a working guy to come up with every month. My co-workers are struggling with this increase too. I will look into all the options available and hope we do not have doctor changes. We are familiar with the plan we had and we liked it.

A third one from Sherri in Holts Summit, MO. She had a preexisting condition and was in the high-risk pool. She said:

I saw the price, the co-pays and the deductibles and I can't afford it.

So it looks like I will suffer on and have even less money while having a policy I won't be able to afford to use.

We are getting those letters every hour of every day. I think it is not what the American people thought they were going to get.

The PRESIDING OFFICER (Mr. MARKEY). The Senator from Iowa.

Mr. GRASSLEY. Mr. President, there is more wrong with the Affordable Care Act than just the Web site not working. In fact, the Web site is just a symptom of bigger problems.

Similar to my colleagues, I wish to share the problems Iowans have with the Affordable Care Act. So I come to the floor today to share just one of hundreds of emails, letters, and phone calls from my constituents in Iowa expressing sticker shock about the Affordable Care Act.

A working mother in Decorah, IA, who lost her employer-sponsored coverage for her family because of rising costs, wrote to me and said the following:

. . . comparable plans do not seem to exist on the healthcare exchange. The closest we can come (and still see our own doctors) cost almost $1050 per month. This represents a 247% increase in cost over our prior employer provided plan—and with much higher deductibles!

My husband is a self-employed small business owner. We covered our family of 4 on my group health plan, which includes a 21 year old adult daughter in college, who is not a legal tax dependent. If we receive any 'subsidy', it will be insignificant in relation to the total jump in our out of pocket costs related to the so called ''Affordable Care Act''.

The general public seems to believe that anyone who does not qualify for premium subsidies can easily afford a premium increase—no matter how outrageous. Yet an increase of almost 250% in our personal cost of providing an inferior policy for our family—which represents an increase in costs of roughly 20% of our gross income—can only be described as an absolute disaster.

I think this email from a real person who is really living this train wreck of a health care law speaks for itself.

I yield the floor.

The PRESIDING OFFICER. The Senator from Kansas.

Mr. MORAN. Mr. President, part of our job as Members of the U.S. Senate is to help people who have problems. This has been a very difficult time for many Americans and difficult for me as somebody who wants to be able to help people with a problem.

As my colleagues have indicated, the letters, the phone calls, the conversations, the emails continue to come. The one I wish to highlight to my colleagues is from a person who describes herself as a 62-year-old female retired teacher from Wichita. She says she considers herself a middle-class American.

She indicates in her letter that her current health policy expires at the end of this year, less than a month away. Here is what she says in her letter:

When I inquired why, I was told the policy no longer meets the guidelines under ObamaCare.

Yet, in the previous 2 years, my premiums have increased 25% and 28% respectively to which the answer from [my insurer] was that it was to help pay for ObamaCare.

Now I can't even have that plan any longer.

It had a $500 deductible and $1,500 Max out of pocket expense per year, with a $300 premium per month.

After over 20 hours online, and multiple calls and online chats, I finally was able to see some numbers for healthcare costs from the Obamacare Marketplace, only to learn that the premium is 1.5 times what I currently pay, and the deductible is 4.5 times higher (and it's a different insurer).

A plan [from my current insurer] was double the premium.

I will not qualify for tax credits, as my projected income for 2014, which includes some tax free interest income and social security, places this middle class retired American, over the threshold of any kind of subsidy.

I'm sad that my well laid plan for retirement, now will redirect my earnings to pay for healthcare, much of which I will never use.

At 62 and having had a hysterectomy, prenatal care is NOT an issue I will face, nor will I ever need female reproductive disorder treatment, as those parts are gone, but I will have no discount for not needing those coverages.

So I'm paying a higher premium for other women to have them?

I'm very frustrated at these changes.

It's the middle class that will be hit the worst by this mandate, and I fear that many will opt for the government fine because now they truly won't be able to afford the cost of healthcare.

One more question, how will folks who can't even make the premium payment, ever be able to pay the outrageous deductible?

Honestly, $6,500 out of pocket expenses per person per year?

That's crazy, who will be able to pay that? And then who will end up paying it? This is NOT a solution for the Middle Class Americans!

Surely we can develop a policy, a program of caring for Americans without doing damage to people who already had insurance.

I yield the floor.

Mr. FLAKE. Mr. President, I am pleased to take the floor today and join my colleagues in opening the mailbag. All of us have received a lot of mail and email and faxes and texts from individuals who are being harmed by this law.

For example, Steve from Peoria, AZ, is looking at the premium for his policy through his employer going up in response to ObamaCare nearly 20 percent. In addition, his employers have told him to brace for more impacts like rising prices—all customers are going to get this—and falling salaries for new hires as well.

Leanne from Eager, AZ, is facing what she calls ''sky high'' rates now thanks to ObamaCare. If this is not bad enough, it looks as if she and her husband will have to put off buying their parents out of their family business. It looks likely that Leanne's parents are going to have to keep working for a while.

Cristian from Flagstaff, a young husband and father who has a young boy, says he might see his premiums actually decrease marginally. However, thanks to ObamaCare and thanks to changes his employer is making in response to ObamaCare, he is looking at higher copays, higher deductibles, and a decrease in the level of coverage. He is looking at ''a large increase in my

responsible portion of my medical bills.''

ObamaCare is far from ideal for those in the workplace, those looking to retire, and for new families.

With story after story like these, we clearly see that the Affordable Care Act is a misnomer.

I yield the floor.

The PRESIDING OFFICER. The Senator from Nebraska.

Mrs. FISCHER. Mr. President, I rise today to speak on behalf of nearly 7,000 Nebraskans who have contacted my office with concerns about ObamaCare. The sticker shock has hit Nebraskans hard.

A woman from Palmyra writes:

This is the first time I have ever written my Senators. We just received our insurance letter telling us that they no longer would have our health insurance policy and the closest policy under the ACA would up our monthly premium from $590.14 to $932.24 for our family of 6. How is this affordable?

A constituent from Holdrege writes:

I cannot believe the letter I got from Blue Cross today. It informs me that I have to switch my coverage, and my new selected plan will cost me $1,116.74, per month. That's a $571.58 per month increase than what I have now. That's almost double my mortgage payment.

Also, why am I forced to carry coverage that I don't need or want? At 58, my wife and I are not going to have any more kids. I don't believe I'm going to qualify for any government subsidies. Our planned budget includes our current health care policy. There is no way we can afford the suggested new policies.

This law is anything but affordable.

I yield the floor.

The PRESIDING OFFICER. The Senator from Indiana.

Mr. COATS. Mr. President, I join my colleagues as one who has received tweets and hits on the Web site, emails, phone calls ringing the phone off the hook, written letters, responses that I hear as I talk to people back in Indiana. These are not Republicans, Democrats, liberals, conservatives; they are all of the above. They are not writing to say: Stand with the Republican Party. Stand with this. Stand with that. They are writing to say: Wait a minute. The President promised that we would not have an increase in our premiums. He promised that if we liked our doctor, we could keep our doctor. He promised this would be affordable.

Tell that to Deborah from Logansport, who said that her increases in premiums will strain an already strained budget. I think she speaks for millions of Americans, tens of millions of Americans—a lot of Hoosiers, that is for sure.

Doug, a small business owner from Bloomington, told me that he expects his company health insurance to increase over 30 percent next year and, he said, ''this will preclude me from providing wage raises to our employees and will make hiring additional employees much less attractive, if not impossible.''

The President promised a lot. The worst thing you can do to your constituents, the people you represent, the people who put their trust in you, is overpromise and underperform. This could be the biggest gap between overpromising and underperforming of anything any President has said in the history of the United States. And he punctuated his statements with ''period,'' meaning ''take it to the bank. Count on it. Trust me. Your premiums won't increase.'' It is sad.

It is sad, but it can be corrected. We can work. We can repeal this now. We can work together on a bipartisan basis. We can fashion a reasonable, affordable solution to providing Americans who are uninsured with insurance, creating the kinds of products through an open market system, a competitive system that will deal with this problem. We do not have to keep swallowing this so-called Affordable Care Act. It simply will not go down.

The PRESIDING OFFICER. The Senator from Wisconsin.

Mr. JOHNSON of Wisconsin. Mr. President, last night I read a number of emails we received of the hundreds we received from constituents in Wisconsin specifically talking about the problems they have had in losing their coverage and certainly finding this law not being affordable.

They use words like ''scared,'' ''begging for help,'' feeling they were just collateral damage in this scheme that simply is not protecting patients or offering affordable care. They cannot fathom that this is actually happening to them because they knew it was not supposed to.

Today I rise to read an email received from Steve Walrath from Beloit. Steve writes: I am 54 years old, in good health and no prior conditions. I just received my health insurance renewal bill. I used to have affordable and user-friendly health care that cost about $290 a month with no copay. According to my renewal letter from Dean health care, my choices are now $854 a month with a 10-percent copay, up to $1,315 a month with a zero-percent copay.

Let me put that in perspective. He was paying $290 a month with no copay, so if he wants a similar plan he will now experience a 440-percent increase, up to $1,315. If he wants to pay a 10-percent copay, it will be a 285-percent increase. This was not supposed to happen. This is not what President Obama promised the American people, the citizens of Wisconsin.

Steve goes on to write:

Where is the promise of reduced insurance rates under the Affordable Care Act? What choices do you want me to make after January 1? Dental care or health insurance? An occasional night out or health care? Helping my kids get settled into home ownership or health care? What choice do you want me to make? This increase of over 300 percent is a betrayal of the laws you passed and promises you made. ''Can't be denied coverage'' doesn't mean we can afford it. Not when it's more than my mortgage payment. Which of the above choices do you want me to make after January 1?

That is just the sad fact. The Patient Protection and Affordable Care Act is not protecting patients, it is not providing affordable care, and it is not about choice. It is about coercion, and I am asking the President of the United States and I am asking our Democratic colleagues here in the Senate and the House to work with Republicans to start limiting the damage, to start repairing the harm that is being caused to citizens of Wisconsin and America.

I yield the floor.

The PRESIDING OFFICER. The Senator from Utah.

Mr. LEE. Mr. President, in Utah I have a program that I call the Mobile Office. It is a way for many of my constituents, many of whom live some distance from my two offices in the State, to meet with members of my staff in order to discuss various concerns they have with the Federal Government, concerns that arise from their interaction with any of various Federal programs and agencies. It allows us to help these constituents, and it provides vital information that I can use to better represent them back here in Washington.

At one meeting in Davis County, a man attended who wanted to tell us about his experience with ObamaCare. He owns two small food stores and a 7–Eleven. He is also an immigrant, having come to the United States just 12 years ago to seek a better life for himself and for his family. He gives back to his community. He contributes to his economy and provides jobs for people who live in his town. Now ObamaCare is threatening all of that. His insurance premiums for his family are going to be rising by $200 a month. This cost will destabilize his personal finances and may well force him to make cutbacks or to let some of his employees go.

These are the real human costs of ObamaCare. It is not what the President promised, and it is turning out to be an absolute, unmitigated disaster for families all across this country. It is time to start over and develop a health care system that works for everyone.

I yield the floor.

The PRESIDING OFFICER. The Senator from Georgia.

Mr. ISAKSON. Mr. President, the Affordable Care Act promised accessibility, affordability, and choice. As we heard from the stories told here tonight, it delivered on none of the above.

I join Senator LEE, Senator JOHNSON, and the others to call on Congress to come together. Let's fix this flawed program before it is too late and before we destroy health care in the United States of America.

I get constant communication from my State about the problems that are there. This one that I want to read from Beth Hatfield demonstrates the fear, confusion, and lack of accessibility the health care plan has at this time.

I have tried many times over the past few weeks to purchase a health insurance plan

for myself on the healthcare Web site. I finally was able to complete an application, but have not been able to choose a plan yet. Twice I asked questions on the ''live chat'' option, but they were not able to answer my questions, instead they [told me to make a long distance call to the help desk. I did, but I couldn't get an answer there either]. I was disappointed to find out that in order to ''compare plans'' you first needed to enroll. In what other shopping experience do you have to sign up before you actually shop?

Now I saw on the news that my personal information may be compromised from the Web site. This makes me angry, especially since it seems they knew all along [this problem existed].

Is anyone going to be able to do anything about protecting my information? I need health insurance. I am not working and my COBRA policy is expensive [and runs out soon].

I need someone to help me, and I need them to help me now.

Thank you for the opportunity to be heard.

I yield.

The PRESIDING OFFICER. The Senator from Wyoming.

Mr. BARRASSO. Mr. President, I just found out PolitiFact, which is a group who takes a look at what politicians say each year, just came out with what they are describing as the ''Lie of the Year.'' PolitiFact, ''Lie of the Year.'' It is none other than that of President Barack Obama, ''If you like your health care plan, you can keep it,'' called by PolitiFact the ''Lie of the Year.''

It is not surprising that those of us from around the country are getting letters, emails, and calls from folks at home who are finding out they cannot keep it. They listened to the President, they believed the President, who has now had his statement listed as being the ''Lie of the Year.''

I have a letter from Cody, WY, from a man who said:

Just got a quote from my insurance agent on a Obama care insurance. From $860 that I currently spend per month for my family of 4, to $2,400 per month.

He said:

All with the low deductible of $10,000 per person per year. I'm not sure what planet they think I live on, but there is no way I can spend more than ½ of my monthly income on insurance. For the first time in my adult life I will soon be without insurance. What does it matter if my two 18-year-old children can stay on an insurance plan if I can't afford to keep one? Also, all the airtime to preexisting conditions is meaningless if I can't afford to keep a plan.

I feel greatly blessed to have the good paying job that I have. It puts me above the pay level that would allow me to get any subsidies. By the way, with the system in place this year I wouldn't have needed subsidies.

Because he was paying something he could afford.

I have never needed them in the past and would like to continue to never get a hand out from my government.

This is what I expect to hear from the people of Wyoming—not looking for a handout from the government and able to take care of themselves. They are rugged individuals.

What this constituent has gotten from a Presidential promise turns out to be the lie of the year. He sees an increase in his health insurance from $860 a month to over $2,000 a month.

He said:

I employ 35 people with my company. When we first opened about a year and ½ ago we were talking about getting some sort of coverage. It became very clear that we will not be able to do this, and have stopped any of our plans to provide this in the future. We also know for sure that we can not afford to ever employ more than 50 people, so as we continue to grow, there is an upward limit on how many people we will hire.

Here is an individual who has a business and has hired 35 people. He is not going to provide insurance because the costs are too high. He says that he is never going to have more than 50 employees. The opportunities may be there—wanting to put people back to work—but, no, there is a cap at 50. Why? Because of the health care law that has been forced down the throats of the American people. It was voted along party lines by Democrats in the House and in the Senate. So here we are, hurting the economy and hurting people's health.

He goes on:

Simple economics, Obamacare is a job killer in Wyoming.

ObamaCare is a job killer not just in Wyoming but all across the country.

He said:

It has never been easy to be in business, that is part of the fun of being successful. It is discouraging when our federal government limits the American dream for everyone.

I am thankful for your efforts, but from my chair in Cody, it is already too late.

A failed Web site is just the tip of the iceberg. Web sites can be fixed, but what can't be fixed is the destruction this health care law is doing to the health of America in terms of canceled policies. We now have over 5 million policies that have been canceled across the country. Five million people have letters saying: We are sorry, but your policy is canceled. Why? Maybe they didn't have the type of insurance the President deemed good enough for them.

I received a letter from a lady who lives in Newcastle, WY. She is a rancher. I talked to her at our Farm Bureau meeting in Wyoming. She said: I lost my insurance because the President didn't deem my policy good enough because it didn't include maternity coverage. She knows me and knows I am a doctor. She said: Doc, I had a hysterectomy; I don't need maternity coverage. She knows whether she needs maternity coverage. The President of the United States doesn't have a clue. Yet he is the one who determines what kind of coverage she needs because it is the President who decided that he will be the one who will decide what the American people need, not them. She knew what worked for her and her family and what they could afford as far as a deductible.

There are people across my State who have absolute levels of anger and anxiety, and it is reflected in the letters I continue to get.

The front page of yesterday's Wall Street Journal talked about the amount of deductibles. The deductibles in the bronze policy are the cheapest and average over $5,000 per person. A husband and wife will have a $10,000 deductible before they even get to the insurance. Yet they have to buy expensive insurance with these huge deductibles in order to comply with the individual mandate the Democrats have forced on the American people, that you have to buy it whether you call it a fee, a fine, or a charge. Call it what you will—a tax.

So we have the fact that the costs are too high and, of course, the deductibles.

I am going to continue to come back. I will be back later this evening with more letters, but I appreciate your attention.

Mr. LEAHY. Mr. President, I commend the Senate for confirming Judge Patricia M. Wald to be a member of the Privacy and Civil Liberties Oversight Board, ''PCLOB''. The Senate previously confirmed Judge Wald to this post on August 2, 2012. The President renominated Judge Wald to this position in March, and the Judiciary Committee favorably reported the nomination without objection months ago. Like many other nominees, her confirmation has been held up on the floor for months by Senate Republicans.

During her tenure on this important oversight board, Judge Wald has served with great professionalism and dedication. And last month, she received the Presidential Medal of Freedom, the highest civilian honor that the President can bestow.

For the past several months, our Nation has been engaged in a national debate about the ever-growing need for limits on the government's surveillance powers. The House and the Senate are considering bipartisan legislation to rein in those expansive powers, in an effort to better protect Americans' privacy and to increase transparency and oversight. The PCLOB is also expected to issue an important report on the government's surveillance programs to the President and Congress.

Today's confirmation vote will ensure that the Privacy and Civil Liberties Oversight Board remains at full strength as the board continues this work to safeguard our constitutional rights. Democrats, Independents, and Republicans alike have supported the work of this non-partisan board. I commend the Senate for confirming this well qualified nominee, so that the PCLOB can continue to carry out its important responsibilities.

The PRESIDING OFFICER. All postcloture time has expired.

The question is, Will the Senate advise and consent to the nomination of Patricia M. Wald, of the District of Columbia, to be a Member of the Privacy and Civil Liberties Oversight Board for a term expiring January 29, 2019?

On this question, the yeas and nays have been ordered, and the clerk will call the roll.

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

Mr. CORNYN. The following Senators are necessarily absent: the Senator from Oklahoma (Mr. INHOFE) and the Senator from Illinois (Mr. KIRK).

The result was announced—yeas 57, nays 41, as follows:

[Rollcall Vote No. 264 Ex.]

YEAS—57

Baldwin	Hagan	Murphy
Baucus	Harkin	Murray
Begich	Heinrich	Nelson
Bennet	Heitkamp	Pryor
Blumenthal	Hirono	Reed
Booker	Johnson (SD)	Reid
Boxer	Kaine	Rockefeller
Brown	King	Sanders
Cantwell	Klobuchar	Schatz
Cardin	Landrieu	Schumer
Carper	Leahy	Shaheen
Casey	Levin	Stabenow
Collins	Manchin	Tester
Coons	Markey	Udall (CO)
Donnelly	McCaskill	Udall (NM)
Durbin	Menendez	Warner
Feinstein	Merkley	Warren
Franken	Mikulski	Whitehouse
Gillibrand	Murkowski	Wyden

NAYS—41

Alexander	Enzi	Moran
Ayotte	Fischer	Paul
Barrasso	Flake	Portman
Blunt	Graham	Risch
Boozman	Grassley	Roberts
Burr	Hatch	Rubio
Chambliss	Heller	Scott
Coats	Hoeven	Sessions
Coburn	Isakson	Shelby
Cochran	Johanns	Thune
Corker	Johnson (WI)	Toomey
Cornyn	Lee	Vitter
Crapo	McCain	Wicker
Cruz	McConnell	

NOT VOTING—2

Inhofe	Kirk

The nomination was confirmed.

CLOTURE MOTION

The PRESIDING OFFICER. Pursuant to rule XXII, the Chair lays before the Senate the pending cloture motion, which the clerk will state.

The bill clerk read as follows:

CLOTURE MOTION

We, the undersigned Senators, in accordance with the provisions of rule XXII of the Standing Rules of the Senate, hereby move to bring to a close debate on the nomination of Brian Morris, of Montana, to be United States District Judge for the District of Montana.

Harry Reid, Sherrod Brown, Richard J. Durbin, Christopher Murphy, Robert Menendez, Christopher A. Coons, Angus S. King, Jr., Martin Heinrich, Amy Klobuchar, Dianne Feinstein, Tom Udall, Kirsten E. Gillibrand, Michael F. Bennet, Bernard Sanders, Barbara Boxer, Brian Schatz, Robert P. Casey, Jr., Thomas R. Carper, Benjamin L. Cardin.

QUORUM CALL

The PRESIDING OFFICER. Pursuant to rule XXII, the Chair now directs the clerk to call the roll to ascertain the presence of a quorum.

The bill clerk proceeded to call the roll and the following Senators entered the Chamber and answered to their names:

[Quorum No. 9]

Alexander	Gillibrand	Murray
Ayotte	Graham	Nelson
Baldwin	Grassley	Paul
Baucus	Hagan	Portman
Begich	Harkin	Pryor
Bennet	Hatch	Reed
Blumenthal	Heinrich	Reid
Blunt	Heitkamp	Risch
Booker	Heller	Roberts
Boozman	Hirono	Rockefeller
Boxer	Hoeven	Rubio
Brown	Isakson	Sanders
Cantwell	Johanns	Schatz
Cardin	Johnson (SD)	Schumer
Casey	Johnson (WI)	Scott
Chambliss	Kaine	Sessions
Coats	King	Shaheen
Coburn	Klobuchar	Shelby
Cochran	Landrieu	Stabenow
Collins	Leahy	Tester
Coons	Lee	Thune
Corker	Levin	Toomey
Cornyn	Manchin	Udall (CO)
Crapo	Markey	Udall (NM)
Cruz	McCain	Vitter
Donnelly	McCaskill	Warner
Durbin	McConnell	Warren
Enzi	Menendez	Whitehouse
Feinstein	Merkley	Wicker
Fischer	Murkowski	Wyden
Franken	Murphy	

The PRESIDING OFFICER. A quorum is present.

The question is, Is it the sense of the Senate that debate on the nomination of Brian Morris, of Montana, to be United States District Judge for the District of Montana, shall be brought to a close?

The yeas and nays are mandatory under the rule.

The clerk will call the roll.

The bill clerk called the roll.

Mr. DURBIN. I announce that the Senator from New Mexico (Mr. HEINRICH) is necessarily absent.

Mr. CORNYN. The following Senators are necessarily absent: the Senator from Oklahoma (Mr. INHOFE) and the Senator from Illinois (Mr. KIRK).

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

The yeas and nays resulted—yeas 57, nays 40, as follows:

[Rollcall Vote No. 265 Ex.]

YEAS—57

Baldwin	Hagan	Murphy
Baucus	Harkin	Murray
Begich	Hatch	Nelson
Bennet	Heitkamp	Pryor
Blumenthal	Hirono	Reed
Booker	Johnson (SD)	Reid
Boxer	Kaine	Rockefeller
Brown	King	Sanders
Cantwell	Klobuchar	Schatz
Cardin	Landrieu	Schumer
Carper	Leahy	Shaheen
Casey	Levin	Stabenow
Collins	Manchin	Tester
Coons	Markey	Udall (CO)
Donnelly	McCaskill	Udall (NM)
Durbin	Menendez	Warner
Feinstein	Merkley	Warren
Franken	Mikulski	Whitehouse
Gillibrand	Murkowski	Wyden

NAYS—40

Alexander	Coburn	Flake
Ayotte	Cochran	Graham
Barrasso	Corker	Grassley
Blunt	Cornyn	Heller
Boozman	Crapo	Hoeven
Burr	Cruz	Isakson
Chambliss	Enzi	Johanns
Coats	Fischer	Johnson (WI)
Lee	Risch	Thune
McCain	Roberts	Toomey
McConnell	Rubio	Vitter
Moran	Scott	Wicker
Paul	Sessions	
Portman	Shelby	

NOT VOTING—3

Heinrich	Inhofe	Kirk

The PRESIDING OFFICER. On this vote the yeas are 57, the nays are 40. The motion is agreed to.

NOMINATION OF BRIAN MORRIS TO BE UNITED STATES DISTRICT JUDGE FOR THE DISTRICT OF MONTANA

The PRESIDING OFFICER. The clerk will report the nomination.

The bill clerk read the nomination of Brian Morris, of Montana, to be United States District Judge for the District of Montana.

The PRESIDING OFFICER. Pursuant to the provisions of S. Res. 15 of the 113th Congress, there will now be 2 hours of postcloture consideration of the nomination equally divided in the usual form.

The majority leader.

Mr. REID. Mr. President, it is my understanding there is 2 hours equally divided; is that right?

The PRESIDING OFFICER. The leader is correct.

Mr. REID. I yield back 59 minutes.

The PRESIDING OFFICER. The time is yielded back.

The Senator from Florida.

SPACE LAUNCH LIABILITY INDEMNIFICATION EXTENSION ACT

Mr. NELSON. Mr. President, as in legislative session, I ask unanimous consent that the Senate proceed to the immediate consideration of H.R. 3547, which is at the desk.

The PRESIDING OFFICER. The clerk will report the bill by title.

The bill clerk read as follows:

A bill (H.R. 3547) to extend the application of certain space launch liability provisions through 2014.

There being no objection, the Senate proceeded to consider the bill.

Mr. NELSON. Mr. President, today, I am asking for unanimous consent to pass H.R. 3547, as amended, a bill to extend government liability, subject to appropriation, for certain third-party claims arising from commercial space launches. The bill supports the competitiveness of the United States commercial space industry.

This industry, which grew in part out of the successes of NASA, is vital both to the economy and to national security. Our U.S. space companies offer us new opportunities to send astronauts into space on U.S.-built vehicles and to continue launching communications satellites and conducting important scientific research on the International Space Station.

This bill helps to ensure the strength of the space industry by continuing to provide Federal launch liability protection from third-party losses for commercial launches. Congress first established this indemnification regime in