

for stem cell research, we find stem cell supporters and their biotech industry allies trying to pass a bill that would cross the line—not in some slippery-slope future, but right now.

Apologists for Greenwood will say: Science will march on anyway. Human cloning will be performed. Might as well give in and just regulate it, because a full ban will fail in any event.

Wrong. Very wrong. Why? Simple: You're a brilliant young scientist graduating from medical school. You have a glowing future in biotechnology, where peer recognition, publications, honors, financial rewards, maybe even a Nobel Prize await you. Where are you going to spend your life? Working on an outlawed procedure? If cloning is outlawed, procedure? If cloning is outlawed, will you devote yourself to research that cannot see the light of day, that will leave you ostracized and working in shadow, that will render you liable to arrest, prosecution and disgrace?

True, some will make that choice. Every generation has its Kevorkian. But they will be very small in number. And like Kevorkian, they will not be very bright.

The movies have it wrong. The mad scientists is no genius. Dr. Frankensteins invariably produce lousy science. What is Kevorkian's great contribution to science? A suicide machine that your average Hitler Youth could have turned out as a summer camp project.

Of course you cannot stop cloning completely. But make it illegal and you will have robbed it of its most important resource: great young minds. If we act now by passing Weldon, we can retard this monstrosity by decades. Enough time to regain our moral equilibrium—and the recognition that the human embryo, cloned or not, is not to be created for the sole purpose of being poked and prodded, strip-mined for parts and then destroyed.

If Weldon is stopped, the game is up. If Congress cannot pass the Weldon ban on cloning, then stem cell research itself must not be supported either—because then all the vaunted promises about not permitting the creation of human embryos solely for their exploitation and destruction will have been shown in advance to be a fraud.

TERRORISM RISK INSURANCE ACT OF 2002—Continued

The PRESIDING OFFICER. The Senator from Connecticut.

Mr. LIEBERMAN. I thank the Chair. Madam President, I rise to speak in favor of S. 2600, the Terrorism Risk Insurance Act of 2002. Before I get to the substance of the measure, I thank and praise my colleague and friend from Connecticut, Senator DODD, for his extraordinary work in drafting a practical, effective solution to the terror insurance crisis.

As we all know, this has been an arduous and, at times, frustrating process. Senator DODD has proven to be not only tenacious but almost divinely patient in pursuit of this legislation. I congratulate him and thank him for the success that I am confident this bill will enjoy when it is voted on a little more than an hour from now.

I wish to speak for a moment about why this is so important, perhaps as a summary as we approach the vote.

Property and casualty insurance is not an optional matter for businesses in our country. Nearly every business I

know of buys insurance to protect its equipment, its property, its stock, to guard against liability, and to safeguard its employees, for instance, under State workers compensation laws. Property and casualty insurance is required by investors and shareholders. Of course, it is required by banks that lend for construction of new buildings or other projects.

In the event property and casualty insurance for major causes of loss is not available or is prohibitively expensive, businesses face very painful choices and, in fact, will probably end up being paralyzed. Construction projects will come to a halt, and banks will not lend. If one multiplies this across an economy, the impact will be quite severe and particularly difficult and painful at this time as our economy remains uncertain and flat.

We are here today because the ability of businesses to continue buying insurance will be placed at severe risk if we fail to address the way life and risk have changed since the attacks on America of September 11. Underwriting an insurance policy obviously requires companies to assess that risk and to estimate damages in a way that is much more tangible than most of us have done, although we know our lives and our history were changed on September 11.

For those in business and in the business of insurance or reinsurance, this comes down to an attempt to evaluate that risk in terms of probabilities and ultimately dollars and cents.

In the case of claims for damages caused by terrorist attacks, there is obviously no easy way to do this. There are so many uncertainties, but one thing is certain, and that is that losses from terrorist attacks, as we have already painfully seen and felt, can cost tens of billions of dollars, and under worse case scenarios, possibly hundreds of billions of dollars.

Insurance is a very competitive industry, but what most Americans, although most have contact with some form of insurance, may not realize is that insurance companies need and buy their own insurance. In other words, they are dependent on so-called reinsurers that help them spread the risks that they assume when they sell insurance to us and cover their losses.

When reinsurers will not renew their contracts unless they contain terrorism exclusions or limitations, there are going to be an awful lot of insurance companies that will not be able to provide terrorism coverage, in most cases not at any cost but in other cases only at a prohibitive cost. That is not just a possibility today; that is a very real probability.

Across the country, insurers are in danger of losing their contracts with reinsurers because of the reinsurers' unwillingness to accept the risks of possible terrorist attacks. If this happens, and the insurers are not able to include terrorism exclusions or limitations, insurers may not be able to offer any policy at any price.

This is not a matter of speculation anymore. Notices have effectively gone out, discussions have occurred, letters have been exchanged between reinsurers and insurers and those who are insured, as we read in the paper today.

That uncertainty on the part of the insurance industry has now come to the point where it is haunting consumers and will hurt consumers, purchasers of insurance, developers, businesses, and real estate owners. American businesses will not be able to get the policies they need at a reasonable price. They will not be able to get the financial protection they require.

There is nothing we can do in Congress within the limits of our Constitution, as I read it, to require by law that insurance companies write policies that they do not want to write because of what they evaluate to be a market and financial factor, but we can and must avoid creating the conditions that force reinsurers to drop insurers and insurers to drop American businesses or charge such exorbitant rates that they may as well be dropping them off their rolls.

We have to intervene in this process to create a backup, to create enough security for reinsurers to reenter the market and for insurers to continue to insure American businesses and keep them going and growing hopefully at this stage in our economic history.

In recognition of this serious crisis, State regulators are already considering terrorism exclusions, as they must, consistent with their responsibilities to oversee the solvency of the insurance industry, but State laws will only patch the problems and leave businesses without the insurance they need to continue operating. They will not eliminate the crisis. It is clear, therefore, that we in Congress must act, and this sensible legislation is clearly the way to do it. This legislation will provide businessowners with the opportunity to buy insurance against terrorism claims and to do so in the private market as well. It would establish a temporary Federal backstop for insurance to cover against damages resulting from terrorist attacks, a program that would last for a year and gives the Secretary of the Treasury authority to extend the program for another year.

This temporary backstop is intended to provide the insurance industry with time to assess the dramatically changed risk of claims resulting from terrorist attacks.

As the industry determines how to price the risk and determine appropriate premium levels for terrorism insurance, hopefully the need for the Federal emergency backstop we are creating will lessen.

I do point out that what this legislation will accomplish is not unprecedented. In fact, the Federal Government has a history of partnering, if I can put it that way, with the insurance industry to provide coverage for risks that are just too big or unpredictable

or uninsurable, literally, for the industry to handle alone. I cite as examples the flood insurance programs, the crop insurance programs, or the nuclear liability insurance programs that the Federal Government is involved in as a supplement or assist or backstop to private insurance industries. Those risks are, in some ways, actually more insurable than terrorism, but in each case the Federal Government stepped in because we understood the very real risk of people having their policies dropped and being left without basic protection.

In the interest of economic security and in some sense of consistency, we now have to offer the American people a similar guarantee after September 11 that insurance coverage will be offered in the case of terrorism.

Again, I congratulate Senator DODD and all those who have worked with him, as well as members of the Banking Committee, and, not surprisingly, because of the suffering endured in New York in human and economic terms, our colleagues from New York, Senator SCHUMER and the occupant of the chair, Senator CLINTON. I thank them all for their leadership. I thank everyone for the ultimate spirit of accommodation that will, I am confident, allow this bill to pass. We need it to become law as soon as possible, and I am hopeful that today's action will be to exactly that result before it is literally too late.

The PRESIDING OFFICER. The Senator from Michigan.

Ms. STABENOW. Madam President, I ask unanimous consent that I be recognized to speak as in morning business.

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

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Ms. STABENOW. Madam President, I appreciate my colleague from Connecticut speaking about the bill that is before us, and I certainly share his beliefs about the need for terrorism insurance and hope we will be passing this bill shortly. I found, though, that as I was listening to him today, I was thinking about another kind of terror, and insurance we need to be providing, and that is the terror that too many of our citizens, particularly our seniors, experience when they find themselves in a situation with an illness and they cannot afford the medications they need to be well.

I think of the terror a breast cancer patient feels when she is told she needs tamoxifen and cannot afford the \$136 a month, which it is in Michigan, to purchase that tamoxifen. I think of the terror a family with a disabled child feels when they cannot get the medicine they need, or the terror of a small business man or woman when they see their health care premiums rise 30 to 40 percent this year. They know the majority of that is because of the explosion in the costs of prescription drugs. So there are a number of ways in which

we need to be addressing terror and fear in our country.

I rise today to urge my colleagues, on both sides of the aisle in the Senate, to come together and support a comprehensive Medicare prescription drug benefit, to support the bill that my colleagues, Senator GRAHAM and Senator MILLER, have introduced—I am pleased to be a cosponsor of that bill—as a comprehensive response to the terror our seniors are experiencing when they are not able to get the desperately needed medications they need to remain in their home, to remain healthy, to be able to continue to live their lives.

I was very concerned to see over the weekend and to read today about the actions the House Republicans are taking at this very moment. I was hoping, when we pointed out the inadequacies in the bills they have been talking about, they would make corrections so that we could move together on a comprehensive bill that is effective for our seniors and actually helps them.

I am very concerned, when I see the numbers, about what is happening. The bills that are being put forward by the Republicans appear to have very little positive effect and in some cases could even be argued to hurt the situation. Families USA has come up with an analysis, and I will quote from their analysis, about the percentage of out-of-pocket expenditures that seniors would have at various levels of their drug costs under the House Republican plan. For a senior who needed to spend \$1,000 a year, they would find they would still pay 81 percent of that \$1,000 under the House plan. If they had a \$2,000 bill per year, they would still pay about 65 percent. If they had a \$3,000 bill per year, they would pay about 77 percent out of their pocket. If they had a \$4,000 bill per year, they would be paying 83 percent of it. I cannot believe all of the effort by our colleagues in the House that is going into passing this kind of prescription drug legislation for our seniors. That is not good enough. We can do better.

I am so pleased our leader has made a personal commitment to make sure we bring this bill up in July and we vote on this bill for Medicare prescription drug coverage. I am very pleased our bill would in fact provide real coverage of 60 percent, 70 percent, of the bill. We would cover the majority of the prescription drug bill for our seniors.

So I am urging once again that our citizens across the country get engaged in this debate to make sure that what happens in the Congress is the right action. There are a number of consumer groups and senior groups that have come together across the country to form a Web site, fairdrugprices.org. I urge people to go to this Web site, log on, and sign the petition that they have set up calling on all of us to create a meaningful prescription drug benefit and lower prices for everyone: For the senior, for the farmer, the small

business, the large business, anyone who is paying the high prices of prescription drugs. If you go to fairdrugprices.org, you can get involved, sign a petition, communicate with us about what needs to be done. I urge everyone who is listening today to do that.

I am very concerned that as we are debating the priorities of the country—and last week we were debating whether or not to extend a tax cut that we know goes overwhelmingly to those at the very top in terms of the estate tax and the extension of the tax cut that was put into place for 10 years.

It bothers me when I see that in the year 2012, when this would be extended, the tax cut would cost \$229 billion, which is three times more than they want to dedicate in the House for prescription drug help, three times more than what they are willing to provide for our seniors and people who are disabled or families who have disabled children, three times more for a tax cut to the very wealthiest Americans who, it is my guess, are not worried about whether or not they can buy their medicine. They are not having to struggle and go into the pharmacy, look at the bill after they give their prescription, and walk away with the pills still sitting on the counter because they were not able to afford to pay for them.

My guess is that the folks who are being proposed for another tax cut are not deciding whether they are going to cut their pills in half or take them every other day or not at all.

I support efforts on tax relief, and I support our family-owned businesses and farmers not having to pay the estate tax, but I also know there is a way to set priorities that will make sure we are keeping the promise of Medicare that was set up in 1965.

In 1965, one of the great American success stories was passed by this Congress, and that was the promise of health care coverage for our seniors and the disabled. But because we have changed the way we provide health care today, people are not going into the hospital, probably not going in for an operation; instead, they have the ability—all of us do, and a blessed opportunity—to remain at home, to receive prescriptions rather than having an operation. But Medicare does not cover those outpatient prescriptions.

So the great American success story that was passed in 1965 is no longer providing the promise of health care. We are committed to making sure that we modernize Medicare, that we update it to cover the prescription drugs. I worry, as I see all of the effort going on in the other side of the building by our Republican colleagues, all of the effort of not only one committee but two committees, and two bills, and then we look at what they are providing, and we see that on average they are providing 20 percent of the costs of prescription drugs. That means 80 percent is being paid for out of the pockets of