

\$1,000 every year in premiums to help pay for those who don't have coverage. We will help remove that burden from all working families. We will provide stability and choice to families and businesses. We will return health care decisions back where they belong, in the hands of patients and doctors, not insurance company bureaucrats. Rumors and misinformation and scare tactics about Medicare should not prevent us from passing meaningful health insurance reform legislation this year.

I yield the floor.

#### RECOGNITION OF THE MINORITY LEADER

The ACTING PRESIDENT pro tempore. The Republican leader is recognized.

#### THE DEMOCRATIC PLAN

Mr. MCCONNELL. Mr. President, the latest trillion-dollar, 1,000-page Democrat plan raises some questions—questions such as: What happens to Medicare?

Tens of millions of American seniors want to know.

Here is what we can say for sure.

The Democrat plan is a trillion-dollar experiment that cuts Medicare, raises taxes, and threatens the health care choices that millions of Americans now enjoy.

We know the Democrat plan will make massive cuts to Medicare—\$500 billion worth—to fund more government spending.

We know Medicare Advantage benefits will be slashed almost in half, causing many of the 11 million seniors enrolled in it to lose benefits, such as hearing aid coverage and dental care.

We know it contains nearly \$120 billion in cuts to hospitals that care for seniors, more than \$40 billion from home health agencies, and nearly \$8 billion from hospices.

And we know this: Medicare is already on the path to bankruptcy. Yet instead of trying to fix it, the Democrat plan is to use it as a piggy bank to pay for new government-run health care programs.

Republicans have tried to protect Medicare throughout this debate. Our amendments to do so were rejected in committee. We proposed an amendment to prevent cuts to skilled nursing facilities, long-term care hospitals, inpatient rehabilitation, hospice care and home health care. They rejected it. We offered an amendment to strike cuts that wouldn't improve Medicare. They rejected it. We offered an amendment to eliminate an unaccountable commission that would have the power to decide payments to Medicare providers. They rejected it. This isn't reform, and America's seniors know it.

Americans are demanding that their voices are heard in this debate. They want their questions answered, particularly when it comes to Medicare. They don't want the status quo. But

they don't want what Democrats are pushing either: a trillion-dollar experiment that cuts Medicare, raises taxes, limits choices, and makes health care more expensive. Americans have questions. They are not getting the answers they deserve.

I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from Illinois is recognized.

Mr. DURBIN. Mr. President, will the minority leader yield for a question?

Mr. MCCONNELL. I say to my friend from Illinois, I have an appointment in my office. I am happy to yield the floor.

Mr. DURBIN. I was going to ask the minority leader for the Republican plan for health care reform. Unfortunately, there is not a Republican plan for health care reform. What we have is a litany of criticism, a litany of complaint. That is what we have received during the course of this debate.

Senator MAX BAUCUS, chairman of the Finance Committee, took three of the most likely Republicans—Senators GRASSLEY, ENZI, and SNOWE—sat with them literally for months saying: Let's do this on a bipartisan basis. Meanwhile, the rest of us were a little frustrated, if not upset. We wanted to get moving, get into the debate. Let's get into this. It is a big issue. Health care reform is important. But Senator BAUCUS said: I have to try everything I can to make this a bipartisan effort. And he did. He spent months at it, day after day after day. What does he have to show for it? In the end, two of the Republican Senators walked out saying: We are not interested. The other said: I will wait and see.

So when they come to the floor critical of this debate on health care reform, the obvious question I would ask the Republican leader is: What is your plan? The status quo? You want to continue health care as we have it in America today? Do you want to try to defend what is happening to the cost of health care?

I was with a businessman from Chicago last week, a good, conscientious businessman, a young man, a principled man who has made money in his life but understands that he owes at least the people around him and his employees to give back. He said: Do you know what is going to happen to health insurance premiums for my employees? They go up 18 percent in 1 year, 18 percent. He said: I don't know if I can keep doing this. Guess what? His situation is being repeated over and over again. Businesses across America are dropping health care coverage for their employees because they can't afford it. The cost is out of hand.

Did we hear one word from the Republican leader about dealing with this cost escalation? No. The Republicans have no plan to deal with this. We are trying. It isn't easy. This is one-sixth of the economy. I love it when Senators come to the floor and call this a \$1 trillion experiment. Let's put it in

perspective. A trillion dollars is an enormous, almost unimaginable sum of money. But what will the cost of America's health care system be, for all of our health care, over the next 10 years? It will be \$35 trillion. So \$1 trillion in reform over 10 years represents less than 3 percent of the amount we are going to already be spending if we don't change the health care system and make it better. One trillion out of thirty-five million dollars? In perspective, we understand that if we are going to bring about real reform, we do have to invest in it.

Where will the trillion dollars go? The trillion dollars will go to help businesses with tax breaks to pay for health insurance for their employees. It will go to lower income working families so they can afford to buy health insurance. That is where the money will go.

Ultimately, do you know where it goes? It means that more and more Americans have health insurance coverage. Today, this day, and every day in America, 14,000 people will lose health insurance coverage. Imagine waking up this morning, heading off to work and learning during the course of the day that you have lost your job. It is happening. But you are not only losing your job, you are losing your health insurance. You go home at night and say to your spouse: Bad news. I just got the pink slip. I will be laid off in 2 weeks. But even worse news, our sick child with diabetes is no longer going to have health insurance coverage.

That is the reality for 14,000 families a day. When I hear the Republican leader criticize our effort to expand coverage of health insurance to the millions of Americans who are unprotected, to slow down this cancellation of health insurance for 14,000 Americans a day, my obvious question to him is: What is your alternative? What do you want to do? The answer is, nothing. Nothing except criticize.

There is nothing wrong with being critical. That is what this Chamber is all about. Ideas are up for debate. People will disagree. They will come up with their own point of view. That is good. A good healthy debate is what our government is about, what our Nation is about, and what can generate in the end a solution to our problems. But when I hear some of the things that have just been said: a 1,000-page bill. Does that bring you up short? Can't breathe? Your heart skips a beat, 1,000 pages? What if I told you this bill is addressing our health care system which consumes \$1 out of every \$6 in the American economy? One sixth of our gross domestic product deals with health care. Would it take 1,000 pages to address this in a responsible way? I am surprised it didn't take more. And how are we going to measure a bill in terms of its value? That bill is just too long. It is 1,000 pages long. I am sorry, maybe God got it right with the Ten Commandments and their brevity, but

for most of the rest of us, we struggle to make sure we get it right. And to make certain we get it right, we have to add some provisions to cover options and contingencies. It is 1,000 pages? So what. If it were 100 pages or 2,000 pages, would that make it any worse or any better? I don't get it.

Let me also talk about Medicare. Medicare was a creation in the 1960s of President Lyndon Johnson and a Democratic Congress, and by and large it was opposed by the Republican Party. The Republican Party in some of their criticisms will sound familiar. They argued that Medicare was socialized medicine. Medicare was a government health insurance plan and the government was going to get it wrong. In the end, they argued it would cost too much money, and it wouldn't provide good health care. Turns out, after 45 years, we can say conclusively they were wrong. For the 40 million Americans protected by Medicare, the results have been spectacular.

Look at one basic yardstick. Senior citizens in America are living longer. That is a good thing. Life expectancy rates are better for seniors today. Does it have anything to do with Medicare? I think it does, because seniors have access to quality medical care. It gives to those at age 65 the peace of mind of knowing that an accident that occurs this afternoon or a diagnosis that occurs tomorrow morning won't wipe out their life savings. If you are not lucky enough to have good health insurance at age 65, Medicare is there to protect you, your health, and your life savings in the process. Those who called it socialized medicine, as they are calling health care reform now, mainly came from the other side of the aisle. That is why when I hear them saying they are going to defend Medicare today, I am glad they have converted to our side. It is a late-in-life conversion, but some of those work too.

Then listen to how they explain it. The Senator from Kentucky slipped up and used the term Medicare Advantage. That is what this is all about. Let me explain what Medicare Advantage is. Private health companies came to Republicans years ago and said: The government has it all wrong in Medicare. They are not handling it well. They are not administering it well. It costs too much money. Let us show you that if we use the private sector health insurance companies, we can provide Medicare benefits at a lower cost than the government and do a better job.

They were given a chance to do it. They did it under the title Medicare Advantage, private health insurance companies competing with the government to provide Medicare benefits to prove they could do better and more cheaply. Some did, but most did not. At the end of this experiment, we find it is going to cost 14 percent more for the private health insurance companies to provide the same benefits the government is already providing. What it means is, we are subsidizing insurance

companies to provide the same benefits the government already provides.

People across America under Medicare Advantage plans say: I kind of like this. Well, it turns out that the government is subsidizing more than Medicare. Who pays for the subsidy? Ultimately, the taxpayers but, in particular, the Medicare system. The money is taken out of the Medicare system to provide a subsidy to health insurance companies that failed to prove they could do this more economically.

This subsidy is something I think should end. I am prepared to phase it out in a reasonable way, but it should end. The private health insurance companies are being subsidized by our government to provide Medicare benefits which we can already provide at a lower cost. They have come to the floor criticizing this attempt to end the sweetheart deal with these private health insurance companies.

Make no mistake, the 800-pound gorilla in the room in this debate is the private health insurance companies. They don't want to see this change.

I quote my friend Dale Bumpers, a former Senator from Arkansas, who used to come to the floor and use this figure of speech. He said: They hate this like the devil hates holy water. They hate the idea of health care reform, health insurance companies do, because they are extremely profitable, when many other companies in America are failing. They do not want to rock the boat with anything like a not-for-profit health insurance plan that gives consumers a choice to leave private health insurance, if they personally choose. They do not want that to happen.

They certainly do not want to end this \$170 billion subsidy of private health insurance companies under the Medicare Advantage Program. They do not want us to tell them they have to change their ways and their practices, that they can no longer cut off people from coverage just because of a pre-existing condition, which they dream up or find buried in some application of 10 years ago.

We do not want them to be able to walk away from you when you need them, when somebody in your family is sick and needs care. We want them to be able to treat people fairly. We have to end this battle between doctors and insurance company clerks as to whether you are going to be hospitalized or receive a procedure.

These are things that go on every day. The health insurance companies hate these reforms that are part of this bill. The critics of the bill will not come to the floor and say this. They will talk about eviscerating Medicare.

Earlier, the Senator from Kentucky said we were going to cut \$120 billion from hospitals. Do you know what? We spend more money on health care in America by a factor of two than any other country on Earth. Hospital administrators, such as in my own home-

town of Springfield, IL, have said to me: Senator, if you can create a plan that provides everybody health insurance, and we don't have to provide charity care for people who come in without health insurance, that is going to dramatically cut our costs.

So can we save \$120 billion in the hospitals across America over the next 10 years if more Americans have health insurance? Yes, without compromising the revenues for the hospitals or the quality of care. That is obvious. So when the Senator comes to the floor and says: They are going to take \$120 billion from hospitals, he does not tell you the whole story. The rest of the story is: But if those 40 million Americans have health insurance, and the hospitals are getting paid through the health insurance, it is good for everyone. It is good for the people who are protected, it is good for the hospitals, and it is good for the rest of us who have health insurance and indirectly subsidize the care of the uninsured.

He talks about cuts—\$40 billion—in home health care. I refer the Senator to an article which I have quoted on the floor before. It is an article entitled "The Cost Conundrum," written by a surgeon in Boston, MA, named Atul Gawande, in the June 1 edition of *The New Yorker*. Please read it. Most Senators have. The President has. Most Members of the House have read it. It talks about McAllen, TX, where the cost of treating Medicare patients is one of the highest numbers in the Nation: \$15,000 a year.

Why? What about McAllen, TX, makes it so expensive? It turns out it is so expensive because, unfortunately, many of the providers there are heaping on the procedures and heaping on the costs because they take a profit from it. It does not have anything to do with the older folks in McAllen, TX, being sicker or needing special care. It is overutilization, overuse of the system, and one of the areas is home health care.

Read this article about what is happening with much of—at least in that area of the country—home health care services. There is collusion between doctors and these home health care agencies. It is nothing short of an abuse of Medicare. It does not provide quality care. It just takes more money out of the system for care that is duplicative or unnecessary.

How is that good for America? How can we defend that? Can we do better there? Yes. Can we do better to the tune of \$40 billion over 10 years? I think so. To argue this is somehow insidious and wrong is to ignore the obvious. We can find savings within the system that do not compromise quality.

Let me also say this. This notion that Medicare is, as the Senator said, our piggy bank that we are going to use to pay for health care reform is just plain wrong. We know we can save money through eliminating the subsidy to Medicare Advantage, phasing it out,

reducing it. But we also know we have a solemn obligation to those seniors on Medicare. They paid into it all their lives. They are counting on it. And they are counting on us.

The Democratic Party has been there for Medicare from its creation. We are not going to let seniors down. We are going to provide for them the basic care promised, and we hope more. I think, with a modest effort, we could close the doughnut hole in the prescription drug program under Medicare, and we should. That was something that never made any sense and creates a real disadvantage for seniors on limited income. I think we should close that. I also think preventive care for seniors makes sense—regular physical checkups, things that can enhance their lives and let them live independently as long as they want to and can, with our help.

I will tell you, this debate will continue. Now it gets into the part where the bill comes to the floor within the next week or so. We will entertain amendments from both sides. I hope, from the other side of the aisle, we have more than criticism. If they would step up and say: Here is our plan, it would be a much better debate. But so far they have not. They have decided to step to the sidelines and be critical of the game that is being played. That is their right to do under this democratic form of government, but it is a question of credibility.

If they are defending the status quo, if they want to continue with what we have in America, if they want to ignore the escalation in the cost of health care for businesses and individuals, families and governments, if they want to ignore the fact that 40 million Americans do not have health insurance, that 14,000 will lose their health insurance today, if they want to ignore the reality of all these people without insurance and the abuses heaped on them by health insurance companies for those who have insurance, then, frankly, that is not a constructive position in this debate.

We need to work together. We have tried to work together. We have invited the Republicans to come join us in this effort. But, unfortunately, they have taken the side of the insurance companies. They have taken the side of the status quo. They have not joined us.

I do not want to put people's insurance at risk by allowing insurance companies to continue to drop insurance when people need it the most. I do not think we should be in a position where we allow this to continue.

I hope, as part of health care reform, we can make a significant effort to change this, to bring real change to America. I am glad President Obama is leading us that way. I think together we can reach that goal. I know a lot of people are confused across this country trying to understand exactly what is going on in this debate. But a lot of people in good faith are trying to solve one of the biggest problems we have

ever faced. I hope my friends on the Republican side of the aisle will do more than criticize. I hope they will join us in an effort to make a difference.

Mr. President, I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from Tennessee is recognized.

#### HEALTH CARE REFORM

Mr. ALEXANDER. Mr. President, it is always a privilege to hear the assistant Democratic leader, who is one of the most skillful orators in the Senate. In this case, he needs to be because he is put in the awkward position of having to defend, as I heard him, 1,000-page bills and Medicare cuts, which is an awkward place for the assistant Democratic leader to be.

As far as the Republican plan, he has heard our plan many times. We want to reduce costs. Instead of 1,000-page bills and changing the whole system and adding to the debt and cutting Medicare and raising premiums for millions of Americans, we would like to say our goal is to reduce costs—costs to you when you buy your health insurance and the cost of your government. We would like to go step by step in the right direction, which we say is reducing costs and re-earning the trust of the American people, and then we can take some more steps. We have offered a number of proposals to do that, none of which have been seriously considered.

For example, small businesses should be able to pool their resources the way big businesses can. If they could, they could afford to offer insurance—it has been estimated by the Congressional Budget Office—to millions more Americans. We should make a serious effort to eliminate junk lawsuits against doctors, which everyone agrees adds costs to the insurance premiums we buy and to the cost of health care.

We could allow Americans to purchase insurance across State lines. We could create health insurance exchanges so if you are buying an individual policy, you could buy that more easily. We can go across party lines to encourage the use of more technology. Almost all Republicans and I imagine some Democrats would like to change the incentives behind health spending, so we take the money we are using to subsidize health insurance now and spread it more equitably among all the people and allow them to buy more of their own insurance.

Those are five or six steps we could take in the direction of cutting costs. Instead, what we are presented with is, yes, another 1,000-page bill. We have some questions about the bill because it appears—we know it will cut your Medicare, and I want to go back to that in a moment—half the bill will be paid for by Medicare cuts. Forty million seniors depend on Medicare. Are we going to cut grandma's Medicare? We are not even going to spend it on grandma. We are going to spend it on a

new program, at a time when the trustees of the Medicare Program have told us Medicare is going to go broke between 2015 and 2017. We are going to raise your taxes.

That is what the bill coming toward us would be. We are going to make it hard for your States to support colleges and education or raise your State taxes because we are sending the bill to them for a large Medicaid expansion. For millions of Americans, we are going to increase your premiums. We are going to make it more expensive for you to buy the same kind of policy you already have because the government is going to tell you exactly what kind of policy you should have. We are going to increase your Federal debt because the plan, as we hear about it, does not have any provision for paying doctors serving Medicare more over the next 10 years—which we always do—so that is another \$285 billion on your debt, just if we pay doctors 10 years from now what we pay them today for the government-run programs. We are going to spend another \$1 trillion. And, yes, it is a 1,000-page bill.

So we what we are saying is, we have had before this Senate for a long time a number of proposals we could use to reduce your cost when you buy health insurance and reduce the cost of your Federal Government, which is going broke because of health care expenses, but they are not being seriously considered. So we are saying, at least if you are going to come up with these 1,000-page bills to change our entire system, we want to read it and we want to know what it costs. Even the President has said we cannot add one dime to the deficit. How can we know we are not adding one dime to the deficit if we cannot read the bill and we do not know what it costs?

Senator BUNNING of Kentucky brought up that in the Finance Committee the other day, and the Democrats voted it down. They said you cannot even put the bill up for 72 hours—this 1,000-page bill—so we can find out if it cuts your Medicare, if it raises your taxes, if it bankrupts your State, if it increases your premium, if it increases the Federal debt. We cannot even find that out. They said: No, not even 72 hours.

Well, some Democratic Senators have taken a look at that and said—the Democrats who voted that down; and every vote against the 72-hour provision was a Democratic vote—they said: We do not agree with that. Eight Democrats have written Senator REID, and they said: The legislative text and the complete Congressional Budget Office scores of the health care legislation, as amended, should be made available to the public for 72 hours prior to the vote on the final passage of the bill in the Senate. Further, the legislative text of all amendments filed and offered for debate should be posted on a public Web site prior to beginning debate on the amendment on the Senate floor. The conference report ought to be as well.