

concerned about the direction of this calling out. I take it the Senator from Tennessee is suggesting this administration is “Nixifying” the White House; is that correct?

Mr. ALEXANDER. That is a word I had not thought of. What I am seeing is some of the same signs I saw as a young man in the early stages of the Nixon administration. I am seeing those same signs in the Obama White House, and I am suggesting that going down that road leads to no good end. “Nixifying” is an interesting way to describe it.

Mr. GREGG. I may have just made up that word. Hopefully, it will be added to the lexicon.

Mr. ALEXANDER. I think it will. That is good.

Mr. GREGG. Mr. President, I thank the Senator from Tennessee. He has made some valuable points on that issue.

HEALTH CARE REFORM

Mr. GREGG. Mr. President, I rise today to continue a discussion I have pursued on this floor a few times, and it deals with where our country is going and what we are passing on to our children.

I often quote the chairman of the Budget Committee, Senator CONRAD from North Dakota, because I have immense respect for him. He has said—and I agree with him and I think most Americans, when they think about it, agree with him—that the debt is the threat, the fact that we as a nation are running up this incredible debt which we are going to pass on to our children. To try to put it in context is very difficult because the numbers are so huge. I have talked about it numerous times here—the fact that we are running deficits at approximately \$1 trillion over the next 10 years under the President’s budget; that we are seeing 5 to 6 percent of GDP in deficits; that the public debt goes from about 38 percent of GDP up to well over 80 percent of GDP under the most recent estimates. But these numbers are incomprehensible to people because they are so big. We are talking trillions and trillions of dollars, and the implication of these numbers is staggering to our next generation—to our children and our children’s children—because it means they have to bear the burden of paying this debt that is going to be put on their backs.

Last week, the deficit for this last fiscal year was pegged at about \$1.4 trillion—an incredible amount. That is three times the largest debt in our history, in numeric terms. As a percentage of GDP, we haven’t had those types of numbers since World War II. Nobody is arguing that deficit is not an event and something we don’t like but that we probably have to tolerate because of the fact that we have been through this very difficult situation with the recession and the potential meltdown of our financial houses. It took a lot of money to try to stabilize the situation, and I

am not holding that against this Presidency at all.

The problem is, as we go forward we are seeing these deficits expand. There is no reason to maintain that type of deficit once we are past this recessionary period, once the financial situation has been settled down. For all intents and purposes, we are moving past that situation, so the deficits should start coming down. But they aren’t coming down. They aren’t coming down. And today we are about to see one of the reasons they aren’t coming down because today it is being proposed that we add another \$250 billion to the debt by doing something called the doctors fix and not paying for it.

It is not an extraordinarily complicated issue. Basically, we don’t reimburse doctors at a rate they should be reimbursed under Medicare because of a rule we passed back in the 1990s. It gets cut arbitrarily and in a way which has no relationship to what is a proper reimbursement rate. So every year since we passed that rule and it turned out it wasn’t going to work right, we have corrected that. We have reimbursed the doctors at a reasonable rate. But every year we have done that, we have paid for that change, so that the cost of reimbursing doctors fairly did not get passed on to our children. I mean, if you pass that cost on to our children, when somebody goes to get an eye exam, someone who is in their eighties or seventies or sixties and who is on Medicare, when they get the bill from the doctor, essentially we are saying: Oh, I am sorry, the government is not going to pay that—the government you are a part of today. We are going to take that bill and give it to a child who is not even born yet, and they are going to have to pay that bill. But it is an expense today, and it should be paid today by the government.

We are having this proposed today on this floor, by this administration: that we should spend \$250 billion to correct this doctors fix problem for the next 10 years, which is about what it will cost, but not pay for it, just simply take it and send the bill off to our kids. It is actually more than \$250 billion because that \$250 billion, when you put it on the debt, will generate interest responsibilities of about \$50 billion. So it is actually a \$300 billion item. That is not small change; that is a third of a trillion dollars. That is huge money. That is a tremendous burden to transfer over to our children.

Do you know why this is being done? It is being done for a very cynical reason. The health care reform package is being discussed somewhere in this building behind closed doors. It is being written in some office over on that side of the Capitol by three or four Members of the Senate and a lot of staff from the Democratic side, with no participation by Republican Members, no participation by the American people, and the press is totally locked out of the room. The bill is being rewritten over there, but we do know that within

the parameters of the bill is the representation that it won’t cost more than \$1 trillion over a 10-year period. So all sorts of games are being played to try to keep it under \$1 trillion.

The most significant and most cynical and most inappropriate game—though it is not a game, really—the most inappropriate action is this idea that they are going to take \$250 billion to fix the doctors reimbursement program, which is clearly part of health care, and move it entirely out of the health care system reform effort. They will move it over here somewhere and claim they don’t have to pay for it. They will just send the bill to the kids. Don’t worry about it, it is only \$250 billion. Just send the bill to the kids. Don’t worry about it. And then, voilà, they will have \$250 billion they can spend on health care reform that should have been used for the doctors fix.

But now, since they have claimed the doctors fix doesn’t matter—it is somewhere over here, out of sight, out of mind, being taken care of by our children and grandchildren—voilà, they can spend that \$250 billion on goodies, on initiatives within the new health care reform bill, which will cost the taxpayers \$250 billion in order to do it. And I presume it will get them a few constituencies to support them because they have just spent \$250 billion on them.

So the true cynicism of this is that it doubles up the doctors fix cost. Not only does the doctors fix not get paid for, but it will then create \$250 billion worth of new spending. So it is actually a doubling up of this whole exercise. It is a doubling down event here. You know, it is almost a Bernie Madoff—well, it is a Bernie Madoff approach to funding. I mean, basically, this is an entire scam. Unfortunately, in this instance—and obviously in the Bernie Madoff instance the people who invested with him were wiped out, but they made a choice to invest with him. Our children and grandchildren are going to get this bill without any rights. This \$250 billion bill is going to be sent to them, and then the spending is going to occur, which they are also going to have to pay for. It is going to be added on top of the health care bill. It is Bernie Madoff comes to Washington and does our budgeting for us, and it is inexcusable that we would do this to the next generation.

Some are suggesting: Well, let’s do a 1-year or a 2-year fix. This was the original plan of Senator BAUCUS with regard to his bill. Let’s just sort of ignore the fact that the doctor problem exists for the next 10 years even though we are doing a 10-year health care reform bill here. What is the effect of that? Well, yes, for at least 1 or 2 years you pay for it. That was the proposal in the original bill that came out of the Finance Committee—1 year, I believe, they paid for it, 9 years they didn’t pay for it. What did that mean? One year paid for was \$11 billion, I think. So we

know the cost of the whole thing for 10 years is \$250 billion. So what they got was \$239 billion to spend under the Baucus bill as it came out of the Finance Committee because they just simply ignored the concept that the doctors fix had to be done too. That also is a pretty cynical act—not as cynical as the idea you are going to pass the full \$250 billion fix and not pay for it, any of it, which is what we will be voting on later today, but still pretty cynical in that they would basically be spending \$239 billion which they know we don't have.

The PRESIDING OFFICER. The Senator's time has expired.

Mr. GREGG. I ask unanimous consent to speak for an additional 30 seconds.

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

Mr. GREGG. So they know we don't have the \$239 billion, but at least they admit it is there and they don't try to pass the whole bill off to our children.

So as we go forward in this health care debate, let's have no more sanctimonious claims that we are being fiscally responsible and producing bills that are in balance and that don't add to the deficit, not when we put a \$250 billion IOU on our children's backs. It is totally inappropriate.

Mr. President, I yield the floor.

The PRESIDING OFFICER. The Senator from Mississippi.

Mr. WICKER. Mr. President, I understand I am recognized for 10 minutes.

The PRESIDING OFFICER. The Senator is correct.

Mr. WICKER. Mr. President, in 10 minutes Senator LEMIEUX will make his maiden speech to the Senate, and I know Members are anxious to hear that speech, but in the meantime I would like to talk further about health care reform.

Earlier this month, the Senate Finance Committee voted to approve a deeply flawed bill that would raise taxes, cut Medicare, increase government spending, increase health care premiums, and actually drive the cost of health care up, not down. We know the Finance Committee's bill will not be the final product voted on by the Senate.

Three or four Members of one party, and one party only, without the press there, without the public looking in, without other Members of the Senate there, are meeting now behind closed doors to merge the Finance Committee bill with the HELP Committee's version. The secret nature of these meetings is all the more reason for the final version of the bill to be made available to the public prior to a final vote.

We have all heard the outcry from our constituents asking us to read the bills before we vote on them. I think we should go one step further than reading this health care bill ourselves: we should allow the public to read the bill themselves.

Just recently, eight of my friends on the other side of the aisle sent a letter

to the majority leader demanding—rightly—that this health care legislation be made available for 72 hours before the Senate proceeds with this bill. The letter from these eight conscientious Democrats says, among other things:

Without a doubt, reforming health care in America is one of the most monumental and far-reaching undertakings considered by this body in decades.

The letter goes on to ask four things of the majority leader: that the legislative text and complete budget scores from CBO on health care legislation to be considered on the Senate floor be made available 72 hours in advance; secondly, the letter asks that the legislative text and complete CBO score on health care legislation as amended be made available; and they make the same request as far as amendments to be filed and offered on the floor and the final conference report which might come from the House and Senate.

I congratulate these Members of the other party for making this request. I think the question on the minds of people around Washington, DC, and around the country watching this issue is, Will this request be ignored? Will these eight Members of the Democratic caucus be steamrolled by their leadership? Will this conscientious request be cast aside by the majority leader?

The people deserve to see the final product of the majority party. And we know the American people want to see it because as more Americans learn about the product, the less they like it. A survey released Monday found that a majority of Americans opposed the plans backed by the President and Democrats in Congress. This skepticism persists despite the best public relations ever of my Democratic colleagues and our President.

The bill approved by the Finance Committee essentially is still a partisan one. Numerous studies and estimates have highlighted how the bill's new mandates would actually raise insurance premiums for Americans, not lower them. A recent PricewaterhouseCoopers analysis of the bill found that by 2019, the average cost of a family's insurance policy would increase by \$4,000, more than it would if Congress simply does nothing at all. Of course, no one is suggesting Congress do nothing at all. The status quo is clearly inadequate, and there are many things we can do on a step-by-step basis to improve the health of Americans.

But back to this \$4,000 in extra costs for insurance, the driving factor behind that is the staggering tax hikes necessary to pay for this \$1 trillion new entitlement program. The Finance Committee's proposal raises taxes by hundreds of billions of dollars—on insurance plans, on medical device producers, on pharmaceuticals. We all know taxes will not lower the cost of these services. In fact, we can expect the opposite—these taxes will be paid by average Americans.

Former CBO Director Douglas Holtz-Eakin recently said: "These costs will

be passed on to consumers by either directly raising insurance premiums or by fueling higher health care costs that inevitably lead to higher premiums."

He went on to say the plan "would not only fail to reduce the cost burden on middle-class families, it would make that burden significantly worse."

In addition to failing to reduce the price of health care, the Finance plan carries a number of other serious flaws, particularly as it relates to Medicare and health care options for our seniors. The bill cuts Medicare by \$500 billion. Let me repeat that. The bill cuts \$500 billion from Medicare, despite the fact that the Medicare program is already insolvent and on the path to bankruptcy in the year 2017, unless we take action.

Billions of Medicare dollars would be cut from hospitals, from nursing homes, from hospice care under this Finance Committee proposal. It would also slash \$120 billion from Medicare Advantage, denying 11 million seniors the health care choices and options regular Medicare does not offer.

If these provisions were not bad enough, the bill's negative impact on State budgets is even more disturbing. Medicaid would be expanded to a level that threatens funding of essential State services such as education, such as law enforcement. In my State of Mississippi, Medicaid payments already make up 12 percent of our State's overall budget, and Governor Barbour has joined a growing chorus of Governors, both Republican and Democratic, in warning of the consequences of Congress forcing States to shoulder more of the Medicaid burden. In fact, if the finance bill is enacted, Medicaid's expansion would result in fully 25 percent of Americans being on this government-run health care system. We know it is now run so poorly that many physicians will not accept Medicaid patients. The bill proposes we put one-quarter of Americans on this very poorly run program.

After weeks of talk, we get a bill that is worse than the status quo. I fear this bill is only going to get worse when the majority leader emerges from his secret negotiations and tries to pass his version of a Federal health care takeover. I think we can do better. Raising taxes, increasing costs, and eliminating choice is hardly the type of health care reform the American people want, particularly during a time when unemployment levels are at a 25-year high. There are many common-sense reforms that could pass Congress quickly and with bipartisan support. This is not a choice between a Federal takeover and the status quo. A step-by-step approach can inject competition, increase choices, and use market principles to bring down prices. By allowing people to purchase health insurance across State lines, by implementing medical malpractice reform and allowing small businesses to join in association health plans, we can lower the cost of health care and increase choice without raising taxes or

increasing government spending or increasing the size and scope of government.

That is the kind of health care reform the American people deserve, and it is the direction the health care debate should take.

I yield the floor.

The PRESIDING OFFICER. Under the previous order, the Senator from Florida is recognized for 20 minutes.

NATIONAL DEBT AND FEDERAL DEFICIT

MR. LEMIEUX. Mr. President, it is an honor for me to stand on the floor of the Senate, on behalf of my State of Florida and before this Nation, to give my maiden speech. First, let me thank my wife Meike for her support. No one succeeds in life alone. That is certainly true for me. She is the strength of our growing family of five, soon to be six. I would not be here without her love and support.

It is humbling to think of those who have come before me and spoken before this body on the great issues of the day. I will not seek to match their skill in poetry or prose, but I will work to honor them with clear and straightforward language, passion to find solutions to the challenges that face us, and resolve to follow words with deeds. It is the tradition of this Chamber, as Senator Ted Kennedy stated in his maiden speech nearly 50 years ago, that “a freshman Senator should be seen, not heard; should learn, not teach.” But similar to Senator Kennedy, who asked for the dispensation of his colleagues to speak to the great cause of civil rights being debated at the time, I, too, seek the consideration of my colleagues to rise and speak at such a critical time in our Nation’s history.

During my first week here, the senior Senator from Ohio, Mr. Voinovich, told me that while my time in the Senate may be short, just 16 months, it might be the most important 16 months in modern history. My brief experience here has confirmed the wisdom of his insight.

The issue that commands the attention of this Congress is the health of our people and proposals that address the problem of those who cannot afford or simply do not have health insurance. We seek solutions to the rising costs of medical procedures and hospital stays. We are in search of ways to ensure that every American has access to affordable and quality health care. These are noble goals. Floridians and Americans are struggling with the high cost of health care. Premiums for family health care have risen 131 percent over the past 10 years. Working families are finding it harder and harder to make ends meet. Between the demands of taxes and insurance, families have less and less to save and spend on their own priorities.

Health care costs are burdensome on seniors as well, who, while covered by

Medicare, often buy additional insurance to supplement their needs. Rising costs for seniors living on fixed incomes prove more than difficult. Still more troubling are those who have no insurance at all—some 4 million Floridians and an estimated 45 million Americans nationwide. For many of the uninsured, a serious illness or an accident is all that may separate them from bankruptcy.

I believe the problem of health care must be addressed. No American should be denied access to quality health care. No American should be rendered destitute by illness. No American family should have to live paycheck-to-paycheck because they cannot find affordable health care. The problem is great, and it is one worthy of our full attention.

But before we can address health care and the cost of reform, we need to consider the broader state of affairs in which we as Americans find ourselves. We need to draw back the curtain, widen the lens. No issue, even one as important as health care, stands alone. We have responsibilities in other equally important areas such as national defense, education, and the economy.

Balanced equally with all these priorities must be our ability to afford them. Our Nation’s spending problem is not a topic that many like to discuss. It is, after all, more desirable to speak of new ideas and grand plans for the future, but that very future is at stake if we do not address the problem now.

Our national debt grows at an alarming rate of nearly \$4 billion a day. When I took office, just 5 weeks ago, our national debt was \$11.7 trillion. Today it is nearly \$12 trillion. During the time it will take for me to give this address, it will increase by another \$50 million.

Since the debate on health care began in March to the time it likely concludes at the end of this year, we will have amassed an additional \$1 trillion, near to the very amount we are discussing for this health care proposal. Instead of spending less to stem the tide, we learned last Friday that in the fiscal year we just completed, Congress amassed a record-setting \$1.4 trillion budget deficit—a larger single-year deficit than the deficits of the last 4 years combined.

Our Government spending is out of control and it is simply unsustainable. Why does it matter? What is the consequence of accumulating trillions of dollars in debt? What does it mean for us, for our children, and for our grandchildren? The consequences are a government hamstrung by its obligations and a people taxed beyond their ability to prosper. Last year, our Nation spent \$253 billion alone on the interest payments for our debts. That is a statement worth repeating. Last year, our country spent \$253 billion alone on interest payments, the third highest expenditure in the Federal budget. That is nearly \$700 million in taxpayer dollars spent on interest, every day—

money that could be spent on worthwhile programs or, better still, returned to the people because, after all, it is their money.

In 10 years, the White House projects our national debt will be a staggering \$23 trillion, surpassing the total value of goods and services made in the United States in 1 year. I have not been in Washington for long so it is hard for me to comprehend the idea of \$1 billion, let alone \$1 trillion. I think that is true for most Americans. So it is worth a moment to understand the enormity of these figures.

If you were to lay down single dollar bills, edge to edge, \$1 million would cover two football fields; \$1 billion would cover the city of Key West, FL, 3.7 square miles; and \$1 trillion, laid edge to edge, would cover the State of Rhode Island—twice.

Still more staggering, from the time our Government began in 1789, it took 167 years for the Federal Government to spend its first \$1 trillion. This year we will spend \$3 trillion. Increasing debt and increasing costs of entitlement spending and increasing interest payments mean we are on a path which is unsustainable. The American people know this and they are showing their frustration with Congress’s out-of-control spending. We need to learn from families in America. Families in America and across Florida deal with their budgets every day. They sit around the kitchen table. They look at what they make and what they spend and they try to make ends meet.

But the Federal Government is similar to that family with the credit card debt—every month the debt grows, the interest compounds. The family spends more and more just to make the minimum payment. Yet the balance due continues to grow. In order to get out of debt, the family has to do the right thing, it has to cut spending or mom or dad have to get another job. If the family does the right thing, pays off its debt, it can save a little, build a nest egg, and recover. If they do not, they reach that point where the debt grows out of control. They reach the point where they are too far gone.

The Federal Government has reached that moment in time. In the past 27 years, we have gone from \$1 trillion to \$12 trillion in December, and it is estimated that by the end of 10 years, we will be \$24 trillion in debt. The point of no return is upon us. We must recognize this simple truth: We cannot afford the Government we have, let alone the Government the majority in this Chamber wants. We ought to be cutting taxes, not raising them; we ought to be spending within our means, not increasing our debt; we ought to be fighting with the same vigor to cut waste, fraud, and abuse that some fight to create new entitlement programs we cannot afford.

It has also become clear that our policies of limitless spending threaten to devalue the dollar.