

I have worked steadily since I was 16. I am now 51 and have only had to collect unemployment once in those 35 years. I received my last unemployment check the first week in September [of this year]. I [look for] work every day. If I could just find a part-time job at 25 to 35 hours a week, I could get by. . . .

[Our families] have exhausted our retirement accounts just to keep [paying the bills]. Now we fear not being able to survive when retirement comes. So I do want to thank you and wish to stress the urgency in getting this bill passed. Do not give up on us hard-working American citizens.

A wife and mother in Fox River Grove wrote me and said:

I am a 59-year-old educated woman who lost my job in April 2008. I was just informed that my unemployment benefits will run out in [30 days]. I have been actively looking all this time but there is little out there for me.

I can't believe that people are going to be turned away for benefits when there is nothing out there for us to do. . . .

After years of working, putting two kids through college (MBA and [another master's degree]), we thought at last we could save for our retirement. I guess now keeping our house should be [a higher priority]. My 94-year-old mother has moved in with us because she lost her house so we are trying to [help her get along].

Please convince Congress to extend unemployment [benefits] until we can see a light at the end of the unemployment tunnel.

A young lady from Chicago wrote me:

I have been out of work since January 2009. I am currently collecting unemployment benefits, but am nearing the end [of eligibility for benefits].

I don't have crazy outstanding bills, actually, I have no debt other than a \$300 credit card that has fallen into arrears. I'm just trying to get by living in the city of Chicago. I have \$12.58 in my checking account and \$5.81 in my savings account.

I don't have a mortgage. I don't eat out. I don't even have cable. No kids in school. No health club membership. I also don't have insurance. I know you're working on that for us now, and I appreciate that. But this unemployment bill needs to pass quickly because as I understand it, 20,000 Illinois residents will lose their benefits in the next few months and I am one of [them].

I spend 10 [or more] hours a day dividing my time between job searching and trying to drum up business for a small business I am trying to get started. . . .

Senator, please, please, please pass this bill. If not for me whose credit has been ruined by nonpayment of a \$300 bill, then for the 20,000 other Illinois residents who have much larger bills, mortgages and families counting on them.

How are we supposed to justify to the people we represent across America that we cannot take up and pass this extension of unemployment benefits? These unemployment benefits are paid from a fund that is collected from workers and their employers during the course of their work career. We put a little bit of money away each week on the chance that someone facing unemployment will need that money to get by.

These people are asking for an extension of their benefits from a fund into which they paid. It is deeply troubling to me that we can't help these people and thousands like them.

The Senator from Kentucky, Mr. MCCONNELL, the Republican leader,

came earlier and said the reason we can't do this is because we need to consider a few amendments to it.

Last week, the No. 2 man in the Republican leadership, Senator Jon Kyl of Arizona, said his side, the Republican side, wanted amendments to the unemployment compensation bill on "stuff that pertains to the subject—how do you pay for it, for example."

I will tell you that the list of amendments given to us to add to the unemployment bill go far beyond what the Senator from Arizona said. For example, there is a group of Senators over there who want to get into a debate about immigration. This is an important issue, don't get me wrong, and it is one we should take up and will take up, probably not this year but the beginning of next year. But to hold up unemployment benefits for these hard-working Americans whose citizenship has never been questioned so we can debate immigration? I don't believe that meets the test Senator KYL said we had to meet: that he would want amendments that pertain "to the subject—how you pay for it, for example."

Secondly, the Senator from Louisiana wants to offer an amendment about an organization called ACORN. You remember ACORN. Those are the folks who were caught on the videotapes counseling people on conduct that if it is not criminal should be criminal. Those employees of ACORN have been dismissed. I am sure they are being investigated, and they should be. What we saw on those tapes is not only troubling but could be actionable. I am not saying hold back at all with regard to ACORN.

In response to that, I offered an amendment calling for the GAO to do an investigation of all the Federal expenditures related to this agency. I want to find out if there is any other wrongdoing, whether we should cancel work that is being done, investigate payments that are being made. I want to get to the bottom of this. The House went further to cut off ACORN from any business with the Federal Government. They voted for that.

So to say this organization has been ignored is wrong. There is a lot that has been said and done about ACORN. The Obama administration cut them off on work on the census, and they are investigating their work in a lot of other areas. But to hold up this bill on unemployment benefits so we can again debate ACORN, how do you explain that to people in Louisiana and Illinois, folks who have lost their unemployment benefits? You have to say: Just hang on. We sure would like to send a check to take care of your family, but first we have to revisit the ACORN debate and go through all this all over again at some new level.

That, to me, is irresponsible. It is wrong for us to deny basic benefits that people need when they are out of work so that people can come to the floor of the Senate and argue about issues that have nothing to do with

these poor unemployed people and the struggles they are going through.

There are literally six unemployed people in America for every open job. It is no wonder they are having a hard time finding employment. It is starting to turn around ever so slightly, and I hope it turns around quickly. That is the reality.

In the meantime, could we not come to agreement, Democrats and Republicans, that this safety net is critically important; that the people affected by it couldn't care less what our party labels are, couldn't care less about another debate about ACORN? All they want to do is get by another day, week, or month in the hope they can find that job.

Time and again the Democratic leader has offered our Republican friends an alternative coming forward: doing this bill, passing it quickly, and sending it out so we can extend up to 20 weeks coverage of unemployment benefits in some of the States hit hardest by unemployment. But time and again the Republicans on the other side of the aisle have said no, as they have on so many other issues.

They don't have an alternative to paying unemployment benefits. They know we have to do it. We should do it. But they want to debate other issues. They don't have an alternative to health care reform. They don't like what we are proposing, but they don't have an alternative. They basically want to stay with the current system in America, which is not good for us in the long run.

What we need is more positive efforts toward cooperation, and I hope we will achieve it. For the people and families in Illinois, they have my assurance that I will continue to work to extend unemployment benefits so more and more Americans, not only in my State but across the Nation, will have the peace of mind knowing they can get through this tough recession.

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

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

The assistant legislative clerk proceeded to call the roll.

Mr. CORNYN. I ask unanimous consent that the order for the quorum call be rescinded.

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

Mr. CORNYN. I ask unanimous consent to speak for up to 15 minutes.

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

THE PUBLIC OPTION

Mr. CORNYN. Mr. President, I listened to the majority leader, Senator REID, talk about his melded bill, the combination of the Finance Committee bill and the HELP Committee bill that he has now completed merging behind closed doors. He said he is going to

send it to the Congressional Budget Office to get a score or a cost estimate. My hope is we will all be able to see it soon. We have not been able to participate in the process since it has been a process taking place between the majority leader and presumably Senators DODD and BAUCUS, the chairmen of the two committees, without Republicans being present. So we don't know what is in it, and we don't know how much it costs. Certainly those are two critical questions the American people are asking and those of us who will be required to vote on this legislation at some point would like the answers to. When will we be able to see it? When will the American people be able to see it? How much will the bill cost?

Today, I wish to focus on another question: Why is it that some people in this country think another government-run health care plan is the answer? A government-run plan goes by a lot of different names. It is an attempt, in part, to obfuscate what people are trying to do. Sometimes people like to call it the public option because it sounds innocuous. Who could be against a choice, an option, if it is not mandatory? Others say they are not for a public option unless it has a trigger. Others talk about opting in, and we heard the majority leader talk about a bill he intends to introduce that provides an opt out for the States. The reality remains the same. We are talking about a brandnew entitlement program, a brandnew government-run health care program run out of Washington, DC, based on the fundamental and misguided belief that one size fits all for a nation of 300 million people.

Some of my colleagues believe a government plan is gaining momentum. I appeared yesterday on a Sunday television show with Senator SCHUMER, the distinguished Senator from New York, who said he thought Congress was right on the cusp of a public option or government-run plan. The more the American people find out about what is meant by the public option, the less they like it.

Last week, we saw the Washington Post-ABC News poll that supposedly said that support for a government-run plan was growing. In fact, support has fallen by 5 points since June. These numbers can be misleading. As the Presiding Officer knows, in politics and public opinion polling, he or she who gets to ask the questions or frame the questions, he or she who gets to decide what the sample is can have a dramatic impact on the answers given to a poll. It is absolutely the case that support for the so-called public option drops dramatically when we explain to people what it would actually do.

ABC News polling director Gary Langer wrote about this dynamic in June. He noted that while 62 percent initially favored a so-called public option, that number dropped from 62 percent to 37 percent once it was explained to people that it would put many private insurers out of business because

they couldn't compete with the Federal Government and the so-called government plan.

In other words, support dropped when people realized they would not be able to keep what they have now—which is one of the President's promises—because many insurers would simply be driven out of business. Thus that promise President Obama has made time and time again would not be possible under the public option or government plan.

Today in the Washington Post, Fred Hiatt explained why a government plan would end up breaking President Obama's promise: A government plan would work like Medicare and Medicaid—those are two government plans—and they would, as Medicare and Medicaid do, pay providers at low rates.

As a matter of fact, last week we had a vote on a bill—actually, on a cloture motion on a motion to proceed—a technical vote but one that would have taken us to a bill to basically reverse the cuts in Medicare reimbursement rates to Medicare providers. But it was not paid for. It would have added \$300 billion to the national debt. So 13 Democrats joined with Republicans to defeat that. Hopefully, we will go back to the drawing board and come up with a bill that will be paid for.

But the point is, any new government plan, as Fred Hiatt pointed out, would work like Medicare and Medicaid and pay providers much less than they could get under private insurers. So providers would, as they do now, make up the difference by charging private plans more for the same services. This is a so-called cost-shifting phenomenon. Then private insurance premiums—if you have private coverage now—would increase for people who have health insurance coverage now. Ultimately, some of them would be forced to drop their private insurance because it would be more expensive, not less, which is what I thought the object of this exercise was about: how to bring down costs, not how to drive them up, and the cycle would continue until all private insurers would go out of business, and all Americans would find themselves on a single-payer, government-run health care plan. So much for the option in the public option.

So the fact is, the government plan would not be just a competitor; it would, in fact, act as a predator by calling the shots. Even as it takes the field, the government plan would undercut the private market and create another Washington monopoly.

Some people have described the so-called public option as a Trojan horse. I have used that phrase myself. But the person who actually devised the public option said this—his name is Jacob Hacker, and he is a professor at Berkeley—he put it this way last year:

Someone once said to me, "This is a Trojan horse for single payer," and I said, "Well, it's not a Trojan horse, right? It's just right there."

Professor Hacker said:

I'm telling you, we're going to get there, over time, slowly.

The truth is, we should not be creating another government plan when the ones we have now are not working very well at all.

As Robert Samuelson wrote in today's Washington Post:

Why would a plan tied to Medicare control health [care] spending, when Medicare hasn't?

He noted that from 1970 until 2007, Medicare spending had risen by 9.2 percent annually. Let me say that again. From 1970 to 2007, Medicare spending had risen by 9.2 percent annually. He says this is just one reason the so-called public option is what he called a "mirage."

We know there are current entitlement programs that have major unfunded liabilities. Medicare has a \$38 trillion unfunded liability and will effectively go bankrupt in 2017. Yet this bill, at least the Finance Committee bill—I presume the bill coming out of Senator REID's office will do the same—takes \$500 billion from Medicare to create a new entitlement plan, a new government-run health care plan, when Medicare itself has \$38 trillion in unfunded liabilities. It just does not seem to make any sense.

Medicaid, which, of course, primarily helps pay health care costs for the poor, reduces access to health care in many communities because reimbursement rates are so low that many providers simply cannot take new patients. As "60 Minutes" reported just last night, fraud and abuse in government health care programs cost taxpayers about \$90 billion a year. Does this sound like a model we want to hold out—a new government-run plan—when the ones we have now are broken and need fixing?

On the Medicare fraud and abuse, according to FBI special agent Brian Waterman, Medicare fraud is a bigger problem in South Florida than the drug trade. He said:

There are entire groups and entire organizations of people that are dedicated to nothing but committing fraud, finding a better way to steal from Medicare.

One former Federal judge looked at his Medicare statement and found that someone had billed the government for two artificial limbs on his behalf even though he still has the ones God gave him. In other words, he did not need any artificial limbs, but somebody charged them to Medicare on his bill without his knowledge.

I agree with our colleague, Senator LANDRIEU from Louisiana, that a government plan would just replicate the same kinds of problems we have seen in Medicare and Medicaid. As she said:

Why don't we fix the two public options we have now instead of creating a [new] one?

Well, supporters of a government plan say we need to have more competition and give consumers more choice. I could not agree more. But this

is not—this is not—the way to do it. Competition occurs when we have more private insurance companies competing in marketplaces, which would happen under some proposals made by our side of the aisle—if we would simply create a system where individuals could buy health insurance in any State across the Nation and were not just confined to buying health insurance in their own State. Competition increases when we get more insurance carriers to enter the market, not by creating a government plan that will drive them out of it.

We have proposed ways, as I have said, to increase the number of private insurance options in every State. We think if that is the goal, certainly we ought to be able to come together in a bipartisan way to accomplish that goal. But I do not know why in the world we would settle for a health care proposal that would ultimately drive people to a single-payer, government-run health care plan, would raise taxes on the middle class, raise premiums on those who have insurance now and depress the wages of those who have that health insurance now, and would cut, as I mentioned a moment ago, \$500 billion from a Medicare Program that is scheduled to go bankrupt in 2017. Why would we settle for something that would make things worse instead of better for more than 100 million Americans? Why would we vote to spend \$1 trillion or more on a new entitlement program without fixing the ones we have now?

Well, it is not just me saying that this so-called public option with the opt-out the majority leader has now proposed—which he admits does not have 60 votes, and the one Republican, Senator SNOWE, who said she would vote for the bill said she would not vote for a bill with a public option. So I am not sure why, with one Republican supporting the Finance Committee bill, they have now apparently rejected Senator SNOWE's support and opted for a strictly partisan proposal coming out of Senator REID's conference room.

But I also checked, and another health care expert whom I respect shares some of my views about the dangers of the so-called public option.

Secretary Mike Leavitt, who is the former Secretary of the Department of Health and Human Services, said:

Advocates for a public health-care plan continue to look for a way to give political cover to moderates while advancing their goal of implementing a government-run health-care system.

He said:

[Ultimately,] it is designed to undercut private insurance.

He said it is "dangerous for three reasons." He said:

One, it would be cheaper for employers to stop offering private [coverage to their employees and to] funnel their employees into the government-run plan. Employers, not employees, would get to make that choice.

Secondly, he said:

[A] government-run plan would use the coercive force of government to dictate the prices that [are going to be] charged by others—by doctors, nurses, and hospitals—in a way that private entities cannot.

Third, he said this proposal is dangerous because a "government-run plan would be subsidized by American taxpayers, while private plans are not." In other words, he says, if, in fact, States will be given a chance to opt out of the so-called public option, they would not have a chance to opt out of the tax dollars their taxpayers would spend in order to subsidize the so-called public plan.

As he concludes, he says:

The state "opt-in" is a transparently false choice. It is just another gimmick to try to find votes for an unwise policy that would increase the federal government's control over health care.

We can do better. We must do better. I urge my colleagues not to take the bait on this so-called public option, whether it has an opt-out or not, because it is just another disguised way to try to end up with a single-payer, government-run health care system out of Washington, DC.

Mr. President, I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from Oklahoma.

Mr. INHOFE. Mr. President, first of all, let me say to my friend from Texas, the wake-up call is out there. People are fully aware of what is going on right now—the fact that you have a government option; you have a form of socialized medicine; you have something that has proven not to work in areas such as Canada and Great Britain and elsewhere. It is kind of interesting to me that we see those countries trying to emulate something we are doing at the same time we are edging over in their direction. I do not think that is going to work.

CAP-AND-TRADE

Mr. INHOFE. Mr. President, I will tell you something else I do not think is going to work. During the August recess, people were upset mostly about—because it was the most visible issue at the time—the prospect of socialized medicine for America. But at the same time, as a close second, there was another issue that was very much of concern; that is, a cap-and-trade bill.

Just to refresh your memory, this goes all the way back almost 10 years when we had the Kyoto Treaty. That was back during the Clinton administration, and we were supposed to be ratifying the Kyoto Treaty, which would have been a big, massive cap-and-trade or tax increase. In fact, the analysis of that was done by the Wharton Econometric Survey, from the Wharton School of Economics.

The question put to them was, What would it cost if we ratified the Kyoto Treaty and lived by its emissions standards? The answer was it would be somewhere between \$300 billion and \$330 billion a year. I always go back,

when I am trying to figure out what that would mean to individual families, and I recall that the Clinton-Gore tax increase of 1993 was the largest tax increase in three decades, increasing marginal rates, capital gains, inheritance taxes, and all other taxes. That was a \$32 billion tax increase. So that would be 10 times larger. That was the Kyoto Treaty. We did not ratify it.

Then along came the McCain-Lieberman bill in 2003 and then again the McCain-Lieberman bill of 2005, and the same thing was true. Other universities' analyses came in and tried to determine what the cost would be. I remember MIT came in and did an analysis of those bills, and it was somewhere in excess of \$300 billion a year. Then along came the Warner-Lieberman bill—not the current Senator WARNER but the past Senator Warner—and that was essentially the same.

What I am saying is, it does not really matter whether we are talking about Waxman-Markey or what we are going to be voting on sometime in the near future, I would assume, that is going to be a form of Waxman-Markey. By the way, I say that because when several Senators were trying to get information to analyze what it is we are going to be starting to have hearings on tomorrow and then ultimately marking up, they said the bill is a lot like Waxman-Markey, so just go look at the analysis of Waxman-Markey. If you want to do that, at least we now know there is a target out there. We have something we can talk about.

While I have serious problems with EPA's analysis of Waxman-Markey and its 38-page "meta-analysis" of Kerry-Boxer—that is 38 pages of a 923-page bill—the latter is not entirely EPA's fault. It is a drive to ram the Kerry-Boxer bill through the legislative process before people really know what it is. Now we know what it is because it is essentially the same thing we had in the Waxman-Markey bill that went through the House of Representatives.

It is kind of interesting. This massive tax increase called the Waxman-Markey bill passed the House after very little debate because it came up—in fact, they finished it at 3 o'clock in the morning the day they voted on it, so people had not had a chance to read any of it. So it passed by 219 votes in the House of Representatives. That is barely a majority. It is one that was—interestingly enough, the last time they had a massive energy tax increase such as this, it was called the Btu tax of 1994. That passed the House by 219 votes, the same margin. Obviously, that was killed later on in the Senate, as I believe this will be.

I come to the floor now to talk about this because tomorrow we start hearings, exhaustive hearings, on Tuesday, Wednesday, and Thursday. They are not going to be talking about the specifics of the bill; it will just be more propaganda. The main thing we want to do is make sure everybody knows it