

My amendment is simple. If adopted, it would ensure that the implementation of the Democrat's health care bill shall be conditioned on the Secretary of Health and Human Services certifying to Congress that this legislation would not cause more than 1,000,000 Americans to see higher premiums as compared to projections under current law.

This amendment would ensure that this \$2.5 trillion tax-and-spend bill would not go into effect if the Secretary of Health and Human Services finds that it would actually raise health insurance premiums for more than 1 million Americans compared to projections under current law contrary to the promise made by President Obama that health care reform would result in average savings of \$2,500 per family.

One of the major reasons for enacting health care reform is to ensure that we control rising health care costs that continue to put increasing pressure on American families and small businesses. However, according to the non-partisan Congressional Budget Office, the premiums under this bill would actually rise for Americans purchasing insurance on their own by as much as 13 percent and will continue to rise at double the rate of inflation for both the small group and large group markets.

Spending \$2.5 trillion of hard-earned taxpayer dollars on a system that already spends almost \$2.2 trillion a year without any impact on controlling health care premiums should be unacceptable to every American.

Madam President, I also wish to speak to my amendment No. 3296 to H.R. 3590, the health care reform legislation. This amendment isn't complicated. It would prevent the provisions of the bill from taking effect in the event that it imposes unfunded mandates on the States. As we all know, this legislation imposes significant new burdens on the States and the proposed funding for this program is, in some cases, likely to fall short. Simply put, the Congress should not impose upon the States new Federal policy requirements without ensuring they are adequately reimbursed. In the event that Congress does not provide full funding for these programs, my amendment would ensure that none of the new mandates will be binding on the States.

#### MEDICAID PHARMACY REIMBURSEMENT

Mrs. LINCOLN. I would like to engage my colleague, the distinguished Senate Finance Committee chairman, in a short colloquy regarding the Medicaid pharmacy reimbursement provisions in the Senate health care reform bill.

Mr. BAUCUS. I would be happy to engage Senator LINCOLN in a colloquy. I commend her for all her leadership over the years on this issue, because she recognizes that it is important to reimburse pharmacies adequately for the generic medications they dispense to Medicaid patients. In rural States like ours, Medicaid patients need access to their community pharmacies to

obtain their medications. Sometimes community pharmacies are the only health care providers for many miles. So, it is important that we permanently fix in this health care reform bill the problems for pharmacies caused by the severe reimbursement cuts from the Deficit Reduction Act of 2005.

Mrs. LINCOLN. I thank my colleague and agree with him. That is why I ask him the purpose behind the language in the bill that would establish the Federal upper limit for generics at no less than 175 percent of the weighted-average average manufacturer price. I know this amount is less than the chairman originally proposed in the Medicaid Fair Drug Payment Act from last Congress, which I cosponsored. However, in what cases would it be the intent of the intent of the chairman that the Federal upper limit would be set at more than 175 percent? I am particularly concerned about my small independent pharmacies in Arkansas that fill a significant number of Medicaid prescriptions. Would it be the intent to set a higher rate for these pharmacies? Would it be the intent to set a higher rate for generics that might be in short supply or for which there are availability problems to encourage more manufacturers to make them?

Mr. BAUCUS. I would say to my colleague that the language indicating that the Secretary could set the Federal upper limit at no less than 175 percent the weighted average manufacturer price could be used in those types of circumstances. It would give the Secretary flexibility to set the Federal upper limits in cases where there is a need to provide states with a higher match in order to assure that appropriate payment is made to pharmacies to encourage the use of generic drugs.

Mrs. LINCOLN. I thank the chairman for his insights into this provision and his work on behalf of our Nation's community pharmacies.

#### WISCONSIN'S MEDICAID PROGRAM

Mr. KOHL. Madam President, I rise to discuss language in the Reid substitute amendment to H.R. 3590 that would have a dramatic effect on Wisconsin's Medicaid Program. I would like to converse about this with two of my distinguished colleagues—the other Senator from my home State of Wisconsin, Senator FEINGOLD, and Senator BAUCUS, chairman of the Senate Finance Committee.

I commend Senator BAUCUS's long and hard work in crafting this historical piece of legislation, and today, I seek clarification of one piece of this bill.

Mr. FEINGOLD. I also seek clarification of this piece of the Patient Protection and Affordable Care Act, specifically in section 2001, regarding the definition of individuals that would be considered newly eligible under Medicaid.

Mr. BAUCUS. I thank the Senator. I would be pleased to enter into a colloquy with the Senators from Wisconsin on this subject.

Mr. KOHL. I thank the Senator. Section 2001 of the legislation describes

which individuals in each State will be deemed "newly eligible" for Medicaid. It is my understanding that the Federal Government will provide 100 percent of the funds to cover this group of newly eligibles from 2014 to 2016 and that States will be provided with their current law FMAP rates, which are below 100 percent, for individuals already covered. Is this correct?

Mr. BAUCUS. I thank the Senator for the question. Yes, that is correct, and it is my understanding of the legislation as well.

Mr. FEINGOLD. I thank the Senator. As the Senator knows, to be considered "newly eligible" under this bill, individuals must not be eligible under the State plan or under a waiver of the plan for full benefits or for benchmark coverage as described in section 1937 of the Social Security Act. Two of the benefits that must be incorporated into benchmark coverage under section 1937 of the Social Security Act are mental health and substance use disorder services, and prescription drug coverage. If these two benefits are not offered at all, then the coverage will not count as benchmark coverage.

Mr. KOHL. As my two colleagues are aware, Wisconsin currently provides coverage for a number of individuals under a Medicaid waiver, but this coverage does not meet the requirements for benchmark or benchmark-equivalent coverage under the Social Security Act. The Centers for Medicare & Medicaid Services, the Federal agency that oversees Medicaid, has confirmed this for us. Senator FEINGOLD and I understand that, because of this, the individuals in Wisconsin who do not receive benchmark or benchmark-equivalent coverage will be considered newly eligible, and therefore Wisconsin will receive 100 percent Federal funds for those individuals in 2014, 2015, and 2016. Is this the Senator's understanding of the legislation as well?

Mr. BAUCUS. Yes. I thank the Senator.

#### RELIGIOUS CONSCIENCE EXEMPTION

Mr. CASEY. May I ask the Senator from Iowa to yield for a question about the managers' amendment, amendment 3276, to amendment 2786 to H.R. 3590?

Mr. HARKIN. Of course.

Mr. CASEY. Chairman HARKIN, the managers' amendment includes a religious conscience exemption from the individual requirement to maintain minimum essential coverage in section 1501. Is it the intent of the managers that this exemption apply to an individual who is a member of recognized religious sect described in Internal Revenue Code section 1402(g) regardless of employment status?

Mr. HARKIN. Yes, the intent of the religious exemption is to focus on an individual who is a member of a religion

sect described in 1402(g) and who is an adherent of the teachings of that sect notwithstanding his or her employment status.

Mr. CASEY. I thank the chairman. So, for example, an Amish person working in a factory or store for a non-Amish employer and meeting the 1402(g) requirements would not be required to obtain insurance coverage against his or her religious convictions?

Mr. HARKIN. The Senator is correct. The managers' amendment creates a clear bright line exemption for individuals described in 1402(g). This religious conscience exemption applies whether one is unemployed, a self-employed Amish person, an Amish person working for an Amish employer, or an Amish person working for a non-Amish employer.

Mr. CASEY. I thank the Senator for that clarification.

The PRESIDING OFFICER. The majority leader is recognized.

#### ORDERS FOR WEDNESDAY, DECEMBER 23, 2009

Mr. REID. Madam President, I ask unanimous consent that when the Senate completes its business today it adjourn until 9:45 a.m., Wednesday, December 23; that following the prayer and pledge, the Journal of proceedings be approved to date, the morning hour be deemed expired, the time for the two leaders be reserved for their use later in the day, and the Senate resume consideration of H.R. 3590, the health care reform legislation, with the time following any leader remarks and until 10 a.m. equally divided and controlled between the two leaders or their designees; that at 10 a.m. and until 2 p.m. the time be controlled in alternating 1-hour blocks of time, with the majority controlling the first hour; further that the remaining time until 2:13 p.m. be equally divided and controlled between the two leaders, with the majority leader controlling the final half.

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

#### PROGRAM

Mr. REID. Madam President, Senators should expect a series of rollcall votes, maybe as many as five, to begin at approximately 2:13 tomorrow afternoon.

#### ORDER FOR ADJOURNMENT

Mr. REID. Madam President, if there is no further business to come before the Senate, I ask unanimous consent that it adjourn under the previous order, following the remarks of Senator DODD of Connecticut.

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

Mr. DODD. Madam President, I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The bill clerk proceeded to call the roll.

Mr. DODD. Madam President, I ask unanimous consent that the order for the quorum call be rescinded.

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

#### HEALTH CARE REFORM

Mr. DODD. Madam President, I want to take a few minutes, if I may, this evening to speak about what this health care bill means to my constituents in Connecticut. I say to the Presiding Officer, the benefits to our States are very similar in many ways, but, obviously, we like to point out what this particularly means in our own respective jurisdictions that we represent.

But before doing so, I want to take a few minutes, if I could, because, again, tomorrow will be a short day, and then there are the votes, apparently, that we are going to have Thursday, and then we will be leaving the Senate for a number of weeks before we return in mid-January, and it might not be possible tomorrow or in the very early hours of Christmas Eve to say a special thanks to the people who work with our offices in this Chamber, both on the minority side and the majority side, who rarely get the kind of recognition they deserve.

I have tried periodically over the years to make sure that as to the consideration of every major bill we talk about the staff and what they have done. So I want to take a couple minutes and identify people with whom I have worked. This not an inclusive list. There are many more people who work for individual Senators who have done outstanding work. Our floor staff here, both on the majority side and the minority side, do a remarkable job and have great patience with all of us. I am very grateful to them, as well as for the jobs they perform.

I want to take a few minutes and recognize the people I have worked very closely with over the last—well, intensely—over the last almost year now on this issue.

Certainly in Senator REID's office, the majority leader's office, Kate Leone, Carolyn Gluck, Jacqueline Lampert and Randy Devalk deserve a great deal of credit. All of us know them and how much they have been involved in this issue.

And for those of us who serve in our caucus, we have listened to Kate Leone on numerous occasions go over the details of these bills, answer the questions Members have raised about the importance of the legislation. So to the members of Senator REID's staff—and, obviously, there are a lot more people in his office who deserve recognition—but I want to particularly recognize these four individuals with whom we have worked very closely.

Senator Kennedy, as we all know, was such a lion of this institution and cared so deeply about this issue. Over

the years, he attracted some wonderful people to work with him, as he fought year in and year out to bring us to the moment we are about to enjoy; and that is, to see some national health care legislation adopted for the very first time.

Michael Myers had worked on this issue for a number of years for Senator Kennedy, and still is here working with Senator HARKIN now as part of the Health, Education, Labor, and Pensions Committee.

Mark Childress, again, worked for the majority leader, worked for Tom Daschle, has worked for others in this body, and has just done a fantastic job. He stayed on at my request and the request of Leader REID to help us work on this issue. He was involved with the White House as well, and really understood the substance of this bill as well as the political navigation that was necessary to bring us to this moment.

I thank Pam Smith as well for her fine work for Senator HARKIN. Jenelle Krishnamoorthy made a wonderful contribution. She worked closely with Senator HARKIN, and I want to thank her. Connie Garner was responsible, for many years, working on the CLASS Act, which is a part of our bill. Portia Wu and David Bowen did a remarkable job. John McDonough and Topher Spiro, as well, are individuals who certainly made a significant contribution to our product her.

Senator BAUCUS's staff: Liz Fowler, Bill Dauster, Russ Sullivan, Cathy Koch, Yvette Fontenot, David Schwartz, Neleen Eisinger, Chris Dawe, Shawn Bishop, and Kelly Whitener—I want to thank them for their efforts as well.

Again, we could give separate remarks about each of these individuals and their contributions.

In my office, again, like others, I have been blessed with some wonderful people. Jim Fenton is my legislative director and has done a terrific job. Tamar Magarik Haro, who is sitting with me on the floor this evening—I know we are not supposed to recognize people other than Members—along with Jeremy Sharp, they have just done a wonderful, wonderful job, and I know all of my colleagues have gotten to know both of them because of their work.

Monica Feit, Joe Caldwell, Bryan DeAngelis, Andy Barr, Lia Lopez, Daniel Barlava, and Rachael Holt all have made wonderful contributions as well.

Senate legislative counsel, with special thanks to Bill Baird, who was present throughout the entire HELP Committee consideration, has gone way above and beyond. And legislative counsel never gets the kind of recognition they deserve.

They do a tremendous job in drafting the actual legislation. Once these ideas are developed, then they require legislative language to be written.

From the administration, Nancy Ann DeParle, whom all of us have gotten to know very well; Jeanne Lambrew—I