

state's ability to pull itself up by its bootstraps. Chief among these are Michigan's longtime status as a donor state for federal highway funding dollars and the relative lack of federal public works and defense investment in this state; and

Whereas, Congress could be of great assistance in our state's economic redevelopment efforts, in particular, temporarily suspending the federal match for highway infrastructure investment, improving the state's share of federal highway funding so Michigan is no longer a donor state, and giving greater weight to Michigan firms in contracting would provide an immediate stimulus to our stagnant state economy. Moreover, longer term efforts such as creating tax-free state economic recovery zones; reducing taxation on innovation, production, and investment; allowing states to designate certain areas of the state as exempt from federal corporate taxes capped at \$1 billion per year; enhancing investment tax credit availability; and targeting federal infrastructure investment to those states with the highest rates of unemployment would help provide economic stability where it is needed the most; now, therefore, be it

*Resolved by the Senate*, that we hereby memorialize the Congress of the United States to assist Michigan in rebuilding the state's economy, in light of unemployment and pressures on the state's Unemployment Trust Fund; and be it further

*Resolved*, That copies of this resolution be transmitted to the President of the United States Senate, the Speaker of the United States House of Representatives, and the members of the Michigan congressional delegation.

POM-9. A report from a law enforcement office relative to the Open Government Sunset Review Act; to the Committee on Finance.

#### REPORTS OF COMMITTEES

The following reports of committees were submitted:

By Ms. LANDRIEU, from the Committee on Small Business and Entrepreneurship, without amendment:

S. Res. 50. An original resolution authorizing expenditures by the Committee on Small Business and Entrepreneurship.

#### INTRODUCTION OF BILLS AND JOINT RESOLUTIONS

The following bills and joint resolutions were introduced, read the first and second times by unanimous consent, and referred as indicated:

By Mr. KERRY (for himself and Mr. GRASSLEY):

S. 434. A bill to amend title XIX of the Social Security Act to improve the State plan amendment option for providing home and community-based services under the Medicaid program, and for other purposes; to the Committee on Finance.

By Mr. CASEY (for himself and Ms. SNOWE):

S. 435. A bill to provide for evidence-based and promising practices related to juvenile delinquency and criminal street gang activity prevention and intervention to help build individual, family, and community strength and resiliency to ensure that youth lead productive, safe, health, gang-free, and law-abiding lives; to the Committee on the Judiciary.

By Mr. CORNYN:

S. 436. A bill to amend title 18, United States Code, to protect youth from exploi-

tation by adults using the Internet, and for other purposes; to the Committee on the Judiciary.

By Mr. SPECTER (for himself, Mr. GRAHAM, Mr. LEAHY, Mr. WYDEN, Mr. CRAPO, Mr. MARTINEZ, and Ms. LANDRIEU):

S. 437. A bill to amend the Internal Revenue Code of 1986 to allow the deduction of attorney-advanced expenses and court costs in contingency fee cases; to the Committee on Finance.

By Mr. WHITEHOUSE:

S. 438. A bill to provide for the voluntary development by States of qualifying best practices for health care and to encourage such voluntary development by amending titles XVIII and XIX of the Social Security Act to provide differential rates of payment favoring treatment provided consistent with qualifying best practices under the Medicare and Medicaid programs, and for other purposes; to the Committee on Finance.

By Mr. INOUE:

S. 439. A bill to provide for and promote the economic development of Indian tribes by furnishing the necessary capital, financial services, and technical assistance to Indian-owned business enterprises, to stimulate the development of the private sector of Indian tribal economies, and for other purposes; to the Committee on Indian Affairs.

By Mr. SPECTER (for himself and Mr. LEAHY):

S. 440. A bill to amend the Internal Revenue Code of 1986 to allow an above-the-line deduction for attorney fees and costs in connection with civil claim awards; to the Committee on Finance.

By Mr. WHITEHOUSE (for himself, Mr. FEINGOLD, Mr. LEAHY, Mr. SANDERS, Mr. TESTER, and Ms. STABENOW):

S. 441. A bill to encourage the development of coordinated quality reforms to improve health care delivery and reduce the cost of care in the health care system; to the Committee on Health, Education, Labor, and Pensions.

By Mr. DORGAN (for himself and Ms. SNOWE):

S. 442. A bill to impose a limitation on lifetime aggregate limits imposed by health plans; to the Committee on Health, Education, Labor, and Pensions.

By Mrs. MURRAY (for herself and Ms. CANTWELL):

S. 443. A bill to transfer certain land to the United States to be held in trust for the Hoh Indian Tribe, to place land into trust for the Hoh Indian Tribe, and for other purposes; to the Committee on Indian Affairs.

By Mr. WHITEHOUSE:

S. 444. A bill to provide for the establishment of a health information technology and privacy system; to the Committee on Health, Education, Labor, and Pensions.

By Mr. SPECTER (for himself, Ms. LANDRIEU, Mr. CARPER, Mr. KERRY, Mrs. McCASKILL, and Mr. COCHRAN):

S. 445. A bill to provide appropriate protection to attorney-client privileged communications and attorney work product; to the Committee on the Judiciary.

By Mr. SPECTER (for himself, Mr. GRASSLEY, Mr. DURBIN, Mr. SCHUMER, Mr. FEINGOLD, and Mr. CORNYN):

S. 446. A bill to permit the televising of Supreme Court proceedings; to the Committee on the Judiciary.

By Mr. LEVIN:

S. 447. A bill to amend the Commodity Exchange Act to prevent excessive price speculation with respect to energy and agricultural commodities, and for other purposes; to the Committee on Agriculture, Nutrition, and Forestry.

By Mr. SPECTER (for himself, Mr. SCHUMER, Mr. LUGAR, and Mr. GRAHAM):

S. 448. A bill to maintain the free flow of information to the public by providing conditions for the federally compelled disclosure of information by certain persons connected with the news media; to the Committee on the Judiciary.

By Mr. SPECTER (for himself, Mr. LIEBERMAN, and Mr. SCHUMER):

S. 449. A bill to protect free speech; to the Committee on the Judiciary.

By Mr. BAUCUS (for himself, Ms. STABENOW, Mr. TESTER, Mr. CONRAD, Mr. JOHNSON, and Mr. SCHUMER):

S. 450. A bill to understand and comprehensively address the oral health problems associated with methamphetamine use; to the Committee on Health, Education, Labor, and Pensions.

#### SUBMISSION OF CONCURRENT AND SENATE RESOLUTIONS

The following concurrent resolutions and Senate resolutions were read, and referred (or acted upon), as indicated:

By Mr. LUGAR:

S. Res. 49. A resolution to express the sense of the Senate regarding the importance of public diplomacy; to the Committee on Foreign Relations.

By Ms. LANDRIEU:

S. Res. 50. An original resolution authorizing expenditures by the Committee on Small Business and Entrepreneurship; from the Committee on Small Business and Entrepreneurship; to the Committee on Rules and Administration.

By Mrs. FEINSTEIN (for herself, Mrs. BOXER, Mr. DURBIN, and Mr. WHITEHOUSE):

S. Con. Res. 7. A concurrent resolution honoring and remembering the life of Lawrence "Larry" King; to the Committee on the Judiciary.

#### ADDITIONAL COSPONSORS

S. 144

At the request of Mr. KERRY, the name of the Senator from Mississippi (Mr. COCHRAN) was added as a cosponsor of S. 144, a bill to amend the Internal Revenue Code of 1986 to remove cell phones from listed property under section 280F.

S. 259

At the request of Mr. BOND, the name of the Senator from North Dakota (Mr. CONRAD) was added as a cosponsor of S. 259, a bill to establish a grant program to provide vision care to children, and for other purposes.

S. 311

At the request of Mrs. BOXER, the name of the Senator from Rhode Island (Mr. WHITEHOUSE) was added as a cosponsor of S. 311, a bill to prohibit the application of certain restrictive eligibility requirements to foreign non-governmental organizations with respect to the provision of assistance under part I of the Foreign Assistance Act of 1961.

S. 332

At the request of Mrs. FEINSTEIN, the names of the Senator from California (Mrs. BOXER) and the Senator from Louisiana (Mr. VITTER) were added as cosponsors of S. 332, a bill to establish a comprehensive interagency response to reduce lung cancer mortality in a timely manner.

S. 358

At the request of Mr. CORNYN, the names of the Senator from Georgia (Mr. CHAMBLISS), the Senator from Oregon (Mr. WYDEN) and the Senator from Pennsylvania (Mr. SPECTER) were added as cosponsors of S. 358, a bill to ensure the safety of members of the United States Armed Forces while using expeditionary facilities, infrastructure, and equipment supporting United States military operations overseas.

S. 421

At the request of Mr. SPECTER, the names of the Senator from Iowa (Mr. HARKIN), the Senator from Oregon (Mr. WYDEN), the Senator from Kansas (Mr. ROBERTS) and the Senator from West Virginia (Mr. ROCKEFELLER) were added as cosponsors of S. 421, a bill to impose a temporary moratorium on the phase out of the Medicare hospice budget neutrality adjustment factor.

S. 427

At the request of Mrs. LINCOLN, the name of the Senator from South Dakota (Mr. THUNE) was added as a cosponsor of S. 427, a bill to amend title XVI of the Social Security Act to clarify that the value of certain funeral and burial arrangements are not to be considered available resources under the supplemental security income program.

S. 433

At the request of Ms. KLOBUCHAR, her name was added as a cosponsor of S. 433, a bill to amend the Public Utility Regulatory Policies Act of 1978 to establish a renewable electricity standard, and for other purposes.

#### STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. KERRY (for himself and Mr. GRASSLEY):

S. 434. A bill to amend title XIX of the Social Security Act to improve the State plan amendment option for providing home and community-based services under the Medicaid program, and for other purposes; to the Committee on Finance.

Mr. KERRY. Mr. President, every day millions of Americans are faced with significant challenges when it comes to meeting their own personal needs or caring for a loved one who needs substantial support. Many elderly Americans and individuals of all ages with disabilities need long-term services and supports, such as assistance with dressing, bathing, preparing meals, and managing chronic conditions. They prefer to live and work in their community, and it is time that the Federal Government and states act as better partners to provide improved access to home and community-based long-term care services, HCBS.

The Medicaid program, administered by the States but jointly financed with the Federal Government, is our nation's largest payer for long-term care services. Medicaid spends about \$100

billion per year on long-term services. Despite recognizing that per person spending is much lower in community settings, and that people generally prefer community services, Medicaid still spends 61 percent of its long-term services spending in institutional settings. This disparity is due, in large part, to a strong access and payment bias in the program for institutional care.

Where Medicaid does offer HCBS, it is often in short supply, with more than 280,000 Medicaid beneficiaries on waiting lists for HCBS waiver services. Further, eligibility for HCBS waiver services requires beneficiaries to already have a very significant level of disability before gaining access, and they must meet a level of functional need that qualifies them for a nursing home. This not only contributes to the unmet needs of those in the community but it also prevents states from providing services that can help prevent beneficiaries from one day requiring high-cost institutional care. While institutionalized care may be an appropriate choice for some, it should be just that: a choice that individuals and families are allowed to make about the most appropriate setting for their own care.

The result of Medicaid's "institutional bias" is that, according to the Georgetown Health Policy Institute, "one in five persons living in the community with a need for assistance from others has unmet needs, endangering their health and demeaning their quality of life." This is simply unacceptable.

The lack of long-term care options available to families has a significant impact on their lives. Many of my constituents are affected, as are countless Americans across the country. Take the parents living in Newton who continue to wait for their physically disabled daughter, Julia, to have the opportunity to live independently. Julia is a young adult and instead of starting out on her own, she must watch as her peers move away and begin their independent lives—something she yearns to do as well. Growing up, Julia was able to attend Newton schools and keep a similar schedule to other children in the community but now has limited social interaction, as there is no other option but to live at home with her parents. Julia's parents are her full time caregivers and would like to see her able to live in an environment more conducive to both her needs and their own. Community-based care or home-based care in an apartment she could share with a roommate are options Julia and her parents would mutually benefit from. As the opportunities for the future grow for her peers, Julia's options continue to shrink because housing and home-based supports for adults with disabilities are limited at best. I have heard many stories similar to that of Julia, which emphasizes the urgency in which HCBS is needed. In addition to individual lives being put on hold, entire families must

deal with the consequences of inadequate services available to their family members.

Access to HCBS affects individuals in all stages of life, including Americans dealing with conditions such as Alzheimer's. Take Ann Bowers and Jay Sweatman for example. Without access to HCBS services, Jay, who suffers from early onset Alzheimer's, was forced to first move into assisted living and then a nursing home. By the time Jay was approved for HCBS it was too late and he was no longer able to live independently. Ann had worked tirelessly to coordinate her husband's care and get additional HCBS support but the process was so difficult that by the time help came, it was simply too late. This is just one case of many where early HCBS intervention would have not only saved time, money, and stress for family members, but would have made a significant impact on the quality of life and personal independence for Jay and Ann.

Today I am introducing, with my colleague from the Finance Committee, Senator GRASSLEY, the Empowered at Home Act, a bill that increases access to home and community-based services by giving states new tools and incentives to make these services more available to those in need. It has four basic parts.

First, it will improve the Medicaid HCBS State Plan Amendment Option by giving states more flexibility in determining eligibility for which services they can offer under the program, which will create greater options for individuals in need of long-term supports. In return we ask that states no longer cap enrollment and that services be offered throughout the entire state.

Second, the bill ensures that the same spousal impoverishment protections offered for new nursing home beneficiaries will be in place for those opting for home and community-based services. In addition, low-income recipients of home and community-based services will be able to keep more of their assets when they become eligible for Medicaid, allowing them to stay in their community as long as possible.

Third, the Empowered at Home Act addresses the financial needs of spouses and family members caring for a loved one by offering tax-related provisions to support family caregivers and promotes the purchase of meaningful private long-term care insurance.

Finally, the bill seeks to improve the overall quality of home and community-based services available by providing grants for states to invest in organizations and systems that can help to ensure a sufficient supply of high quality workers, promote health, and transform home and community-based care to be more consumer-centered.

I want to say a word about the Community Choice Act, legislation long-championed by Senator HARKIN that would make HCBS a mandatory benefit in Medicaid. I am a strong supporter