

I have talked with the Republican leader about other things we wish to try to accomplish before we leave here during this spring period.

RECOGNITION OF THE MINORITY LEADER

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

GUANTANAMO BAY

Mr. McCONNELL. Mr. President, tomorrow night in Berlin, Attorney General Holder is scheduled to deliver a speech about the administration's plan to shut down the detention facility at Guantanamo Bay by the arbitrary deadline of January 2010.

Many Americans are skeptical of the administration's decision to close Guantanamo before it has a plan to deal with the 240 terrorists who are currently housed there. And Americans were rightly alarmed by recent news reports that the administration is considering releasing some Guantanamo detainees into the U.S.—not to detention facilities, but directly into our neighborhoods.

Aside from the question of why the Attorney General thinks a German audience should hear about the administration's plans for Guantanamo before the American people do, there are a number of questions about the administration's plan for releasing terrorists into the United States that I hope the Attorney General will address tomorrow night.

Question No. 1: What is the legal basis for bringing these terrorist-trained detainees to the United States, given that Federal law specifically forbids the entry of anyone who endorses or espouses terrorism, has received terrorist training, or belongs to a terrorist group? That is U.S. law.

Question No. 2: Can the administration guarantee the safety of the American people, particularly in the neighborhoods where these terror-trained detainees will live?

Question No. 3: Will the residents of the communities where these men will be released be made aware of it?

Question No. 4: Will these trained terrorists be allowed to travel freely anywhere in the United States?

Question No. 5: What will their status be? Will they be allowed to stay here permanently? Will they be eligible for citizenship? Will they receive or be eligible to receive taxpayer funding? Why did no other country agree to accept them? What threat do these men pose of returning to terrorist activities and what threat assessments have been conducted to evaluate whether these men will attack U.S. troops on the battlefield or Americans at Embassies abroad?

There are now less than 300 days until the President's Executive order mandates the closure of the secure detention facility at Guantanamo and

the transfer or release of its remaining detainees. I recognize the difficulty of the challenge these detainees present, but we shouldn't let an arbitrary deadline and a desire to appease critics overseas lead to decisions that make American citizens less safe.

I yield the floor.

RESERVATION OF LEADER TIME

The ACTING PRESIDENT pro tempore. Under the previous order, the leadership time is reserved.

EXECUTIVE SESSION

NOMINATION OF KATHLEEN SEBELIUS, TO BE SECRETARY OF HEALTH AND HUMAN SERVICES

The ACTING PRESIDENT pro tempore. Under the previous order, the Senate will proceed to executive session to consider the following nomination, which the clerk will report.

The legislative clerk read the nomination of Kathleen Sebelius, of Kansas, to be Secretary of Health and Human Services.

The ACTING PRESIDENT pro tempore. Under the previous order, there will be 8 hours of debate equally divided and controlled between the leaders or their designees.

The Senator from Montana is recognized.

Mr. BAUCUS. Mr. President, the Senate confirmed the first member of President Obama's Cabinet more than 3 months ago. Today, we are here to finish the job.

It has taken some time to get here. But now we have a great nominee to be Secretary of Health and Human Services.

Today, we will vote to confirm the nomination of Governor Kathleen Sebelius to be Secretary of HHS. She is the right person for the job.

Governor Sebelius comes to us with a long list of qualifications. She is a true public servant. For more than 6 years, she has served as Governor of Kansas. For 8 years, she served as the Kansas Insurance Commissioner. And for 8 years before that, she served in the Kansas State Legislature.

Governor Sebelius has devoted a career to serving the public. She understands the legislative process. She understands the administrative process. And she has experience working with the private sector, too. Governor Sebelius has earned the respect of Republicans and Democrats alike.

Governor Sebelius knows a lot about health care. She is committed to protecting people and getting them the health care that they need. As Governor, she worked hard to make sure that Kansans—especially kids—had access to quality health insurance that they could afford. And as Insurance Commissioner, Governor Sebelius blocked a merger that would have made insurance unaffordable.

In addition to protecting consumers, Governor Sebelius also recognizes the need to bring businesses together to make our health care system work.

As Governor, she worked hard to make health care costs more manageable for businesses. And she worked to get more small businesses to offer health insurance coverage. Governor Sebelius doubled the small business tax credit.

Governor Sebelius' record shows that she approaches problems from all sides. She is prepared to try creative solutions. She is forward-thinking. She is willing to work with everyone. And she is not afraid to lead—even when faced with difficult choices and resistance to change. That is just the kind of leadership that we need in the Secretary of Health and Human Services.

Governor Sebelius has proven that she is willing to work hard and it is a good thing because we have a lot of work to do.

Our health care system is broken. We spend more than any other country on health care—more than \$2.4 trillion annually—and we don't even cover all Americans.

Forty-six million Americans lack health insurance, and another 25 million Americans are underinsured—they have some coverage but not enough to keep their medical bills manageable. That is why medical debt contributes to half of all bankruptcies—affecting about 2 million people a year.

American families are struggling to keep up with the high costs of health care. And American businesses are straining to absorb these rising costs while trying to stay competitive at home and abroad.

The path that we are on is not sustainable. We must inform our health care system and we must do it now. Failure to address problems in the health care system will undermine our efforts to restore the economy.

We need a health care system that meets all of our needs. A high-performing health care system would guarantee all Americans affordable, quality coverage no matter their age, health status, or medical history.

Health care reform will help to stabilize our economy and it will make sure that we are prepared to handle our long-term fiscal challenges.

Congress has made a good start toward reform. But there is still a long way to go.

Last year, we in the Finance Committee started the process by holding ten different health reform hearings. We learned about the problems in our current system and started to develop solutions.

In June, along with my colleague CHUCK GRASSLEY, I hosted a day-long health care summit for the Finance Committee at the Library of Congress.

We engaged our colleagues in the process early on. In November, I released a white paper, "A Call to Action," to outline my vision for health care reform. Since then, I have been

working closely with Senator GRASSLEY and the Senators on the Finance Committee. I have been working with other Senators as well, especially Senator KENNEDY and the HELP Committee, to come up with meaningful, comprehensive health reform legislation we could pass this year.

Last week, the Finance Committee held the first of three roundtables. We discussed delivery system reform. Tomorrow we are walking through some policy options. In the coming weeks, we will have two more roundtables and work through other policy options in other areas.

Senators will weigh the options. They will contribute to the process. By June, we will be ready for a Finance Committee markup. We are working together to make good progress, but Congress cannot do this alone. Congress needs a strong partner at HHS to pass comprehensive health reform.

We are developing a framework that will change how health care is delivered. But we need a first-class Secretary and team at HHS to help get reform off the ground and to make it work. I look forward to working with Governor Sebelius to make sure our bill can be implemented. I wish to make sure we send the Secretary a product that sets the rules of the game. We wish to make sure we also give the Department and agencies the flexibility they will need to play their part effectively.

It will be a long and iterative process, with a lot of back and forth. I am pleased we will be able to get started quite soon.

Governor Sebelius is the right person for the job. She has political experience, determination, and a bipartisan work ethic to get the job done. She has been an insurance commissioner, and she knows the nuts and bolts of the health care system. She has been a Governor, so she knows how to work with Democrats and with the Republicans; that is her inclination anyway.

I have no doubt Governor Sebelius will continue to show her commitment to public service as Secretary of Health and Human Services, and the American people will benefit from her service. Let us finish the job in confirming President Obama's Cabinet. Let's place a fine public servant in office, and let's confirm Gov. Kathleen Sebelius to be Secretary of HHS.

Mr. President, I wish to yield 5 minutes to the Senator from Virginia, Mr. WARNER, for him to speak when he can get recognition. Pending that recognition, I suggest the absence of a quorum.

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

The legislative clerk proceeded to call the roll.

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

The PRESIDING OFFICER (Mr. BAUCUS.) Without objection, it is so ordered.

Mr. WARNER. Mr. President, I rise in support of the nomination of Gov. Kathleen Sebelius for Secretary of Health and Human Services. Mr. President, let me say at the outset how grateful all our Senate colleagues are for your leadership on the terribly important issue of health care reform.

As we think about economic recovery, I think most Members of the Senate realize there will not be true comprehensive economic recovery in this country unless we can also take on the massive challenge of reforming our health care system. The current costs of our health care system, \$2.4 trillion and rising, are costs that are not sustainable over the long term.

I applaud the President's activities in this effort and his efforts to try to bring about the kind of bipartisan consensus on health care reform the Nation so desperately needs. That is why I think it is so important that later today the Senate act rapidly in the confirmation of Gov. Kathleen Sebelius.

I have had the opportunity to get to know Governor Sebelius during my tenure as Governor of Virginia. I have worked closely with her on a range of issues, particularly issues revolving around Medicaid reform. There is no issue that confronts States across the country more than the rising cost of Medicaid.

As we take on health care reform at the Federal level, reform of Medicaid is a critical component, and Governor Sebelius has a long record of working with other Governors all across the country, from both parties, in this important area.

As the Presiding Officer laid out, she brings a unique set of skills to the challenge: Former State legislator, former State insurance commissioner, and now a two-term Governor of Kansas. As we strive in this body to try to reach bipartisan consensus on this terribly important issue, no one brings a better record of working across the aisle to reach that bipartisan consensus than Governor Sebelius.

Governor Sebelius has a legislature that is overwhelmingly of the opposite party, but her overwhelming reelection and her ability to show tangible efforts in the area of health care reform in Kansas gives her the appropriate background to take on this challenge in the national debate.

For example, Governor Sebelius worked with her legislature and her small business community to significantly increase tax benefits to small business for healthcare; employees in this area of our economy are often-times left behind. Governor Sebelius recently worked with her legislature as well on a dramatic expansion of the SCHIP program, a legislative initiative that was actually introduced by the Republican legislative leadership. Again, she worked in concert with the opposite party.

As we move forward on the issue of health care reform, which I know the

Presiding Officer will take the leadership on in the Senate, we need, and President Obama needs, someone who has a long-term record of building bridges between parties.

Health care reform is too important not to have this kind of consensus-building activity. Governor Sebelius has the background. Governor Sebelius has the track record in health care. I can speak, personally, that she has the temperament to work to try to bring both sides together.

I would also add, I think most of us in these last few days have not been able to pick up a newspaper or talk to our constituents back home without hearing about growing concern about the possibility of a swine flu pandemic.

This challenge has already paralyzed the country of Mexico and is one that we all are following very closely, particularly the possible rise of cases in the United States. This challenge, potentially confronts our Nation in a very dramatic way.

It is essential for the health of the Nation that President Obama has in place, and the Nation has in place, a strong Secretary of Health and Human Services to make sure our Federal efforts on this potential pandemic are ably coordinated—one more reason why it is critical this body moves quickly to confirm the nomination of Governor Sebelius. I know we will act on this later today.

But I believe, from a personal standpoint, Kathleen Sebelius will be a great addition to President Obama and to his Cabinet and will be a great partner to you, Mr. President, and our colleagues in making sure we bring about health care reform quickly, rapidly, and properly this year.

Mr. President, I yield the floor and ask that the time of the quorum call be charged equally against both sides.

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

The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mr. COBURN. Mr. President, 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. COBURN. Mr. President, over the past 8 weeks, there has been a Senator in here who has struggled with the birth of twin granddaughters born at 30 weeks, to a first-time mom, his son's wife, and went through a struggle that was near death multiple times.

But yet today, I am pleased to announce that those two baby girls are at home with their parents, thriving, thriving now, life held in the balance, brought out of that balance by modern medicine. Now they will be successful, contributing citizens, with potential that will be manifested in millions and millions of ways that we can all look forward to and accept as a natural response to our procreative abilities.

Why do I bring that up? There was not anybody in this room, and probably

anybody listening, who did not smile when we talked about the potential of two new young children, two new young girls who are going to make an impact, maybe just locally, maybe just in their family, maybe nationally. But the fact is we have joy when we see that kind of outcome.

The reason I tell that story is because it fits who we are as human beings. It fits with our idea of the pursuit of life, of liberty, and of happiness. That right is guaranteed to us under the Constitution.

Kathleen Sebelius is, undoubtedly, a public servant to be honored for her years of commitment in the roles she has held. But I believe she has a drastic and fatal character flaw and it is this: She still believes that if a woman came with those twins at 30 weeks, to a doctor in Kansas, and she wanted to abort them, even though they are viable, that would be fine.

Now we are about to put someone in charge of Health and Human Services of this Nation who has this vital flaw of not recognizing the value of these two young children's lives. What does it say about where we are going to go? What does it say about the judgment process under which we applaud her service but do not recognize this one critical flaw that says: Individuals can decide what individuals have life.

We do that collectively under the law. But we do not do it collectively and discriminately on the basis of making decisions that someone ought not to have life at the very beginning.

I believe that is a disqualifier. I believe as we embrace more and more people into leadership roles in our Government who walk away from this very basic characteristic of human existence, this very basic necessity that recognizes the value—we are not talking about a first-trimester abortion, we are talking about snuffing life from viable children.

I am also unsettled as to her beliefs under the conscience protection for health care providers. If, in fact, you think it is OK to take a 36-week child in the womb who is an inconvenience for someone and that we, as a society, can't handle that, our choice is to snuff it out, how far does it go before we require the provider community to snuff it out? There were no assurances given in her testimony that that will not happen. We have already seen the Obama administration work to look at reversing the guidelines from the last administration clarifying particularly what the providers' roles are. It says a lot about where we are as a society, about our misplaced values.

The other problem I have—it is one I have never voiced before from this Chamber—is the idea that we as politicians embrace somebody for a position because they are a politician, because they have spent years being a career politician, and that that qualifies them, the Governor of a very small State population-wise, to handle and lead on all these areas of health care.

It does not recognize the complexities of the management organization at HHS, the difficulties they have in terms of carrying out their charges. It recognizes past performance in a political arena and equates that as capability in a management arena. If we continue to measure political success and confuse it with the ability to have management success, we will continue repeating the same mistakes in both Republican and Democratic administrations.

My largest worry is not in the short term, it is in the long term. What our country lacks today, what it yearns for today, what it deserves today is courageous, moral leadership, not political leadership. It is OK to have a debate about the controversies society faces. It is not OK for us to run because we are going to get hit by the press because we take a position that is different from that that is politically correct but is based on moral certitude that all life has value. Yet we run from the debate, the true Lincoln-Douglas type debates that held open the soul of America, so we can decide not on the basis of opinion but on the basis of historical fact. The basis of historical fact is this: When societies quit valuing life, societies fail to flourish.

We have a nominee who, for whatever reason, vetoes a bill that says: If you are a doctor, you ought to explain yourself if you are going to take the life of a 26-week infant in utero. You should have to get a second opinion. You ought to demonstrate that you are doing what is in the best interest of the mother and child.

It is hard to demonstrate a best interest for a child when you turn it around in the womb, deliver it two-thirds of the way out, and then destroy it. That is a debate we ought to have. It doesn't just apply to the issue of abortion and unwanted pregnancy; it is a barometer of the soul of the Nation. We offer no excuse that can be recognized as valuable for the betterment of society when we don't have that fundamental debate.

There is a flaw, a critical defect in this nominee. If you are going to be charged with the health and services that relate to health and humans in this society, that you are confused on this issue about transparency and accountability of taking the life of an unborn child is a nonstarter with me, not because I dislike Kathleen Sebelius. She is a wonderful lady. But she lacks part of the moral clarity that is required to lead this Nation in the future and to correct where we are off course on so many issues. Her ability from the start, the first day she is sworn in, will be compromised by her position on this issue. The confidence she will require of the Members of Congress who relate to this foundational principle of liberty as an inalienable right and life as an inalienable right will undermine her from the start.

I have no doubt she will be approved today. I mark it as another signpost on

the way to oblivion as a nation when we empower those who don't recognize the value of life in positions that should be guarding that very precept and foundational principle of the Republic. My hope is that the American people, who by 88 percent think this is an atrocious procedure and should never be done, no matter what parameters are put on it, will wake up and say: What are we doing? What are we doing?

For those reasons, and those reasons alone, I will vote against the nomination of Kathleen Sebelius.

I suggest the absence of a quorum and ask unanimous consent that time under the quorum call be divided equally.

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

The clerk will call the roll.

The legislative clerk proceeded to call the roll.

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

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

THE BUDGET

Mr. BENNETT. Mr. President, we are in the midst of a nomination discussion, and that takes place in the midst of a health care discussion. Last night, the House and Senate conferees struck an agreement on the budget resolution that will clear the way for final votes later this week, but it includes reconciliation instructions for health care and student loan forms which are quite controversial. We are told the reconciliation would not be used until after October 15, and some might find that reassuring. I am not one of those who does because if we are going to deal with the health care problem, we must recognize that it is enormously complex.

Health care spending is projected to be 17.6 percent of our GDP, which is nearly one-fifth of our economy, and a bill dealing with that is going to have to be scored by the CBO before any committee can report it out. At the moment, there is only one bill with respect to health care that has received a CBO score. It is the bill offered by Senator WYDEN and myself, along with 12 cosponsors, known as the Healthy Americans Act. It has been scored by the CBO as revenue-neutral during its first 2 years and then saving money for the Federal Government thereafter. With 12 cosponsors—a mixture of both Republicans and Democrats—it would seem to me that this would be the bill from which we begin our discussions in a truly bipartisan manner, and it would not require the straitjacket of reconciliation to make it possible for the majority to move ahead. We have a score. We have a framework. We have language. It is not perfect. Even some of the cosponsors have indicated that in its present form they might vote against it, but at least it is a place to

begin. It is a place to start the conversation. We do not need the kind of enforcement of majority rights that reconciliation would give us.

To start over again fresh with a proposal from the administration would mean that a bill has to be drafted—something we have already done; the bill would have to be referred to CBO—something we have already done; CBO would have to go through the difficulties of scoring it—an enormous challenge. I don't believe they would be able to get all that done in a timely fashion. Then we would be told on the floor: Well, we have run out of time. We have to deal with health care so we are going to move to reconciliation as the way to jam the thing through in a hurry. Let's understand right here in the beginning that that kind of activity is not required.

Let's turn to Gov. Kathleen Sebelius and her role with respect to the health care debate. My normal pattern has always been to say that the President has the right to whomever he wants, and I have not voted against Presidential nominees unless I felt they were completely inappropriate or incapable of carrying out their duties.

I have respect for Governor Sebelius. I think she is a valuable and potentially productive appointment for the President, but I have reluctantly come to the conclusion that she is the wrong appointee for this particular assignment. She has backed a partisan process for health care reform. She refuses to support patient safeguards and comparative effectiveness research, and, perhaps most strongly for me, she has already endorsed a Government-run public health care plan, something I would have to vote against. I think most of my colleagues—if not all of my colleagues on the Republican side—would vote against it, not for partisan reasons but for the flat fact that it doesn't work. We have seen examples of that throughout the world, and we understand it doesn't work.

I have constituents who have relatives and friends in Canada who come to me and say: Based on our experience with our relatives and friends in Canada, we absolutely do not want a Canadian system. This is just an anecdote, but it is illustrative of the kind of thing that goes on in the Canadian system where they ration care by delay. They don't ration it by regulation, they simply ration it by delaying the ability of people to get access. As has been reported to me, if you can demonstrate as you go into the Canadian system that there is some problem related to heart disease, you get moved to the head of the line. So some of my constituents have told me that their relatives in Canada have discovered that if they go to see a doctor with a cold or with the flu or with some other problem, they always say, "And this threatens my potential for heart disease" in an effort to get ahead of the line and move forward in the Canadian system that would otherwise delay

their access to a doctor. If you haven't learned that trick, you wait for 3 months, 6 months, whatever. This is the kind of Government-run public health plan Governor Sebelius has indicated that she would support.

There is also the troubling problem that she failed to disclose relevant information to the Finance Committee with respect to her taxes. We have had that happen with other Cabinet nominations, and it has become something of a cause celebre with many Americans who are following this. It has become the butt of jokes on the late-night talk shows. It is unfortunate that she has fallen a victim to that as well.

She has also been less than forthcoming with respect to her relationships with some of her political donors. She had a political relationship with a doctor who was involved in partial-birth abortions and was obviously anxious to see to it that he had access to public officials who would support him in that. That is an issue which carries a great deal of influence with my constituents, and it is another one that troubles me.

So while I think Governor Sebelius might be well qualified for some other position, I do not intend to support her for this position. As we deal with health care problems, the Secretary of Health and Human Services is a key player in helping us solve this problem, and I believe she carries a little bit too much baggage for this particular assignment.

So once again we have the framework for a bipartisan solution. It can be the beginning point of the discussion. A bill has been written around it, and it has been scored by the CBO. Why don't we start with that instead of threatening reconciliation for a whole new program that might start with the administration?

I thank the Chair and yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from New Hampshire.

Mr. GREGG. Mr. President, I understand the Senator from New York wishes to be recognized for 5 minutes, so I ask unanimous consent that I be recognized for 10 minutes following the Senator from New York.

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

The Senator from New York.

Mrs. GILLIBRAND. Mr. President, I ask unanimous consent to speak as in morning business for 5 minutes and that Senator GREGG be recognized following my remarks.

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

SOJOURNER TRUTH

Mrs. GILLIBRAND. Mr. President, today is a very special day for me. As a woman and a New Yorker, it thrills me that today we are honoring one of the earliest and greatest figures in the history of women's rights and civil rights: Sojourner Truth. We are placing

a statue of Sojourner Truth in Statuary Hall today—the first African-American woman to have a statue in the Capitol. She will be the 12th woman depicted in works of sculpture among the 92 sculptures of our male leaders. From this day forward, Sojourner Truth's groundbreaking work advancing the basic rights of women will be given its due prominence beside so many other great Americans in the seat of our democracy.

Sojourner Truth was born Isabella Baumfree as a slave in 1797 who never learned to read or write, yet became an all-important messenger for truth and equality. Although beaten and branded, she responded with dignity and faith rather than hatred and violence. Her views were shaped not only by her personal hardships—enslavement, daily beatings, grueling work, and seeing her 13 children kidnapped and sold away—but also from an innate understanding that equality is an inalienable American right and should not be ascribed based on gender or color.

Once freed from bondage in 1817, she changed her name to Sojourner Truth, telling her friends that the spirit had called her to speak the truth for justice. She then traveled our Nation speaking honest words about the shortcomings of the American dream—the stain that slavery and injustice imposed on America's life and laws and noting for all to see where the reality failed to reflect the noble tenets of our Founding Fathers. She dedicated her life, indeed, she risked her freedom, to oppose the trappings of injustice and prejudice.

Despite being born into slavery, stripped of any legal standing, protection, or property, and denied any access to education, Sojourner Truth understood that freedom and equality are fundamental rights. Embracing our greatest traditions and arguing with simple passion that neither gender nor color could overpower justice, she demonstrated a courage and a conviction that compels us to act today, almost 125 years after her death.

Sojourner Truth raised her voice without a chorus of women behind her. Most abolitionists questioned her determination to link women's rights with the abolition of slavery. She rejected their concerns, asking them the direct question they couldn't avoid: "And ain't I a woman?" With those few words, she refused to parse justice. With those few words, she forced audiences past and present to recognize that human dignity and respect are part and parcel of who we are as Americans—male or female, African-American or Caucasian, educated or not. Sojourner Truth represents the courage that the American ideal imparts and calls all of us to action.

As we honor this bold, daring New Yorker today, I am also proud that New York has time and time again helped to foster those who have chosen to carry on her fight. Today, I can think of at least two others committed