

We are also working on an agreement to consider the Legislative Branch appropriations bill. Senators will be notified when votes are scheduled or agreements are reached.

MEASURE PLACED ON THE
CALENDAR—S. 1344

Mr. REID. Madam President, it is my understanding that S. 1344 is at the desk and due for a second reading.

The ACTING PRESIDENT pro tempore. The clerk will report the bill by title.

The legislative clerk read as follows:

A bill (S. 1344) to temporarily protect the solvency of the Highway Trust Fund.

Mr. REID. Madam President, I object to any further proceedings with respect to this legislation at this time.

The ACTING PRESIDENT pro tempore. Objection is heard. The bill will be placed on the calendar.

RECOGNITION OF THE MINORITY
LEADER

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

HEALTH CARE REFORM

Mr. MCCONNELL. Madam President, Americans are insisting that Members of Congress work together on reforms which make health care more affordable and accessible but which don't force people off their current plans or add to an already staggering national debt. Yet the Democratic plan now being rushed through the Senate would do just the opposite. It would force millions of Americans off their health care plans and bury our Nation deeper and deeper in debt.

Democrats have repeatedly and incorrectly declared that under their plan Americans who like their current insurance will be able to keep it. This morning, I would like to explain why that is, unfortunately, not the case.

Just last week, the independent Congressional Budget Office said that the incomplete Democratic HELP Committee proposal would cause 10 million Americans who currently have employer-based insurance to lose that coverage. Let me repeat that. Before the Democratic bill is even complete, we know that it will cause 10 million Americans to lose their health care insurance they currently have. But 10 million would just be the beginning. One key section missing from the HELP bill is the government plan Democrats say they want, and according to one study, 119 million Americans could lose their private coverage if a government plan is enacted.

Here is why this so-called government option would lead to Americans losing their current plans and why it would soon become the only option.

First, a government-run plan would have unlimited access to taxpayer dol-

lars and could operate at a loss indefinitely, which could force private insurers out of business. Private health plans simply wouldn't be able to compete, and millions of Americans could be forced off their health plans whether they like it or not. At that point, people would have to enroll in a government plan or any surviving private health care plan, if they could afford it. I say if they could afford it because another unintended consequence of creating a government plan is that it would cause rates for private health plans to skyrocket, leaving most Americans unable to afford them. They would simply be too expensive. Right now, government programs such as Medicare and Medicaid pay hospitals and doctors less than private insurers do, and hospitals and doctors then pass on the difference to private insurers. If a government plan was established, doctors and hospitals would shift more of their cost onto private health plans, making them even more expensive and making it even harder for them to compete with a government plan. In the end, only the wealthiest would be able to afford private health plans and the kind of care most Americans currently enjoy.

Some say safeguards could be put in place to create a level playing field. But the very nature of the government running a health insurance plan in the private market is the problem. Any safeguard could easily be eliminated, and one look at the government takeovers in the insurance and auto industries shows that when the government is involved, there is really no such thing as a fair playing field.

Let's take a look at the auto industry. The government has given billions of dollars to the financing arms of Chrysler and GM, allowing them to offer interest rates that Ford, a major manufacturer in my State, and other private companies struggle to compete with. This means the only major U.S. automaker that did not take a bailout is at a big disadvantage as it struggles to compete with government-run auto companies. When Ford needed money, it had to raise it in the open market and pay an 8-percent interest rate. But GM could just call up the Treasury—just call up the Treasury—and have them wire over some taxpayer money. No company can compete with that.

So contrary to their claims, if the Democratic plan is enacted, millions of Americans will lose the health insurance they have and that they like. Again, that is not what I say, it is what the Congressional Budget Office says, it is what independent analysts say, it is what America's doctors say, and it is even what President Obama now says. The President now acknowledges that under a government plan, some people might be shifted off of their current insurance.

This isn't the only Democratic claim about health care that is increasingly suspect. Democrats have also promised their health plan will be paid for and

won't add to the deficit. But the facts just don't add up. Right now, just one section—one section—of the HELP bill would spend \$1.3 trillion. It is not plausible that this won't add to the deficit, which has already swelled by more than \$1 trillion thanks to bailouts and the stimulus money.

So when Democrats predict their health care plan won't cause people to lose their current insurance and won't add to the national debt, Americans are certainly right to be skeptical. They made the same kinds of predictions about the stimulus bill. They said the money wouldn't be wasted. Yet we are already hearing about a \$3.4 million turtle tunnel and \$40,000 to pay the salary of someone whose job is to apply for more stimulus money. The administration also predicted that if we passed the stimulus, the unemployment rate wouldn't rise above 8 percent. Now they say unemployment will likely rise to 10 percent.

Americans, indeed, want health care reform, but they do not want a so-called reform that takes away the care they have and stands in the way of their relationships with their doctors or that buries their children and grandchildren deeper and deeper in debt. I think we can do a lot better than that.

I yield the floor.

The ACTING PRESIDENT pro tempore. The majority leader.

HEALTH CARE REFORM

Mr. REID. Madam President, one-sixth of every dollar that is spent in America goes to health care today. If we do nothing with health care, by the year 2020 it will be 35 percent. Think about that. That is just 11 years from now. So it is obvious that crushing health care costs leave many families uninsured and underinsured and drive far too many into bankruptcy or foreclosure.

When we discuss our country's health care crisis with our constituents next week when we go home for the July 4th break and when we debate it with our colleagues in this Chamber in the coming months, they will talk about how best to relieve that burden. There are a lot of good ideas, but one of the best ways to bring down the cost is by preventing disease and illness in the first place.

Prevention and wellness are based on a simple premise: The less you get sick today, the less you will have to pay tomorrow. Part of reforming health care means making it easier for Americans to make healthier choices and live healthier lives. We are far from that goal and need to do a better job of making that possible. More than half of all Americans live with at least one chronic condition, and those conditions cause 70 percent of all deaths in America. So doesn't it make sense to stop them before they start? The obvious answer is yes.

It is not just a health issue, it is also an economic issue. Prevention isn't

free, but it is a lot cheaper to invest in health before it is too late. Unfortunately, that investment is peanuts right now. We spend only 4 cents out of every health care dollar toward preventing disease. That is far too little. Although we spend only 4 cents of every dollar toward preventing disease, we spend 75 cents of every health care dollar caring for people with chronic conditions. It isn't enough just to treat and cure disease, we must also prevent disease and help people stay healthy. Reducing the number of us who suffer from chronic diseases will cut costs and help more Americans lead healthier and more productive lives. It is the same principle we bring to health care reform overall. Reform isn't free, but it is a lot cheaper to invest in our citizens' health, our country's health, and our economy's health before it is too late.

Everyone needs to listen, especially based on my colleague's statement he just gave. We Democrats are committed to lowering the high cost of health care. We Democrats want to ensure every American has access to that quality, affordable care, and letting people choose their own doctors, hospitals, and health plans. We are committed to protecting existing coverage when it is good, improving it when it is not, and guaranteeing health care to the millions—including 9 million children—who have no health care.

We are committed to a plan that says: If you like the coverage you have, you can keep it. We are committed to reducing health disparities and encouraging early detection and effective treatment that saves lives. Just a small investment in prevention and wellness can make a big difference for American families. Reforming health care, doing so in the right way, and making that investment will help people get sick less often—and even when they do get sick, it will cost them less to get back on their feet. Benjamin Franklin famously said: "An ounce of prevention is worth a pound of cure." For Americans' physical health and America's fiscal health it may be worth much more.

Madam President, I believe it is time to announce morning business.

RESERVATION OF LEADER TIME

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

MORNING BUSINESS

The ACTING PRESIDENT pro tempore. Under the previous order, there will now be a period of morning business for 1 hour, with time equally divided and controlled between the two leaders or their designees, with Republicans controlling the first half and the majority in control of the second half, with Senators permitted to speak for up to 10 minutes each.

The Senator from Nebraska is recognized.

Mr. JOHANNNS. I thank the Chair.

(The remarks of Mr. JOHANNNS pertaining to the submission of S. Res. 206 are located in today's RECORD under "Submission of Concurrent and Senate Resolutions.")

The ACTING PRESIDENT pro tempore. The Senator from Tennessee is recognized.

Mr. ALEXANDER. Madam President, how much time is remaining on Republican time?

The ACTING PRESIDENT pro tempore. There is 18 minutes remaining.

Mr. ALEXANDER. Thank you, Madam President. Will you please let me know when 4 minutes remain?

The ACTING PRESIDENT pro tempore. The Chair will do so.

Mr. ALEXANDER. Madam President, let me talk about a threat to the middle-class family's budget, and that is health insurance. How do we pay for health care? I do not have to explain to anyone who might be listening or reading these remarks that health care, for most Americans, is a cost that is difficult to afford.

It is difficult for most small businesses. We have many large businesses who are having a difficult time competing in the world marketplace because of health care costs. We think of the auto industry in Detroit which has claimed that the legacy costs of health care have put them out of business, unable to compete, even with car companies that locate in the United States and make cars here employing American workers.

So we on the Republican side, like our friends on the Democratic side, want health care reform this year. President Obama is going to town meetings and saying what he is for. He is saying: Let's do it this year. He is saying: Let's make sure we cover the 47 million Americans who are uninsured. He is saying: Let's make sure we can afford it.

"We do not want more debt," the President is saying. We certainly agree with that. He already has proposed, over the next 10 years, more new debt than it cost to wage all of World War II according to the Washington Post. So we agree with him, we do not want any health care bill that creates more new debt. We do not want a health care bill that puts more new taxes on States as they pay for State-operated health care programs such as Medicaid.

We want to make sure that Americans who like their insurance are able to keep the insurance they have. About 177 million Americans have employer-sponsored health insurance which they like. They like the quality of the health care they get. We do not want to think about the 47 million who are uninsured, we want to think about all 300 million Americans.

We Republicans agree with the President. We want health care reform this year. We want a health care plan that you can afford. We want a health care plan your Government can afford, so your children do not get a big debt

piled on top of them, and we want to make sure all of the uninsured are covered as well.

We want to make sure, on this side, that Washington does not come in between you and your doctor. In other words, you and your doctor make the health care choices, not some Washington bureaucrat who might cause you to wait in line or deny treatment that you and your doctor think is needed.

So how does the Senate bill that we are working on stack up with the President's ideas that we should cover everybody, be able to pay for it, and allow people to keep their insurance? Well, I am very disappointed to report that, according to the Congressional Budget Office, which is the nonpartisan agency in the Congress—and the Congress, of course, is majority Democratic, by a large margin—has given us some very disturbing information about the bill we are working on in the HELP Committee, a place that I am about to go in a few minutes to continue considering parts of the bill, since we only have a little bit of the bill that we are being asked to consider.

Here is what we know about cost: The Congressional Budget Office has said that in the first 10 years of the partial Kennedy bill which has been presented to us, it would add over \$1 trillion to the debt, the national debt, \$1 trillion.

Senator GREGG of New Hampshire, who is the ranking Republican on the Budget Committee, has pointed out that once the health care program envisioned in the Kennedy bill is up and going, that over a 10-year period, say years 5 through 14, it would be \$2.3 trillion added to the debt, a debt that already has more new debt in the next 10 years, according to the Washington Post, than we spent in all of World War II in today's spent.

People in Tennessee and across this country are saying: Whoa. Wait a minute. This is getting out of control. We need some limits. We know you have got a printing press there in Washington, DC, but our children and grandchildren and even we are going to pay the consequences if we do not have some limits on the amount of debt.

I would think the President would say to the Senators who are working on this: Wait a minute, Senators, I said this needs to be something that pays for itself. We cannot add \$2.3 trillion.

That is not all. We do not even have all the Kennedy bill. Some of the most important parts are yet to come. Some of the most expensive parts are yet to come. The assumptions that we are left to work with—because we hear them discussed—is that there will be a big expansion of the Medicaid Program that States help to operate and help to pay for, usually about 40 percent of the cost, and an increase in the reimbursement rates that go to doctors and hospitals who participate in the Medicaid Program.