

their background perhaps made them even better Justices.

President Obama was elected in a historic election, where the American people turned pages of history to forge a new path for our Nation. It is a new path shaped by common sense and compassion and belief in the potential of our people and the greatness of our Nation. The Supreme Court is a vital part of this path forward.

Exercising one of his most important powers, President Obama nominated someone who will help ensure that our Supreme Court honors the Constitution and that every American is protected by it.

President Obama said:

What she will bring to this court is not only the knowledge and experience acquired over the course of a brilliant legal career, but the wisdom accumulated from an inspiring life journey.

I congratulate Judge Sotomayor, her mother Celina, and the rest of the Sotomayor family. I also congratulate Justice David Souter on his well-earned retirement. Justice Souter's probing intellect and brilliant legal mind deserve our Nation's sincere thanks and gratitude.

Commitment to the rule of law is the foundation of our Nation, where democratic values are enshrined in the Constitution that preserves and strengthens our basic freedom. As Senators, one of our most important Constitutional responsibilities is to confirm a Justice of the Supreme Court. I urge my Senate colleagues to join me in confirming Judge Sonia Sotomayor as the next Associate Justice of the U.S. Supreme Court.

Thank you. I yield the floor and suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

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 President, I ask unanimous consent that the order for the quorum call be rescinded.

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

MORNING BUSINESS

Mr. BROWN. Mr. President, I ask unanimous consent that the Senate proceed to a period of morning business, with Senators permitted to speak for up to 10 minutes each.

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

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

FLOODING IN LOUISVILLE

Mr. McCONNELL. Mr. President, I wish to make a few short observations about a severe storm that hit my hometown and dumped 6 inches of rain in 75 minutes in Louisville just today, causing major flooding and trapping people in their cars and in their neighborhoods. The Louisville Police and

Fire and Rescue have been working nonstop since early this morning to assist those in need. I wish to commend them for the courageous and outstanding work they have been performing throughout the day.

Not surprisingly, I have heard from a number of my constituents. I appreciate very much their calls to keep me informed on the latest developments. We are going to continue to monitor the situation back home. In the meantime, our thoughts and prayers go out to everyone in Louisville today.

COMMENDING THE SIMPSON COUNTY HISTORICAL SOCIETY

Mr. McCONNELL. Mr. President, I rise today to pay tribute to the accomplishments of the Simpson County Historical Society, which is celebrating its 50th anniversary in September, making it one of the oldest continuously operating historical societies in Kentucky.

The society's half century of promoting research and knowledge of history makes it one of south-central Kentucky's treasures. At the society's very first meeting in 1959, 37 individuals met in a private home to discuss the creation of the organization.

For many years the society maintained a small collection at the Goodnight Library until members convinced the county to let them use the old county jail and jailer's house as a headquarters. The facility now serves as the Simpson County Archives and Museum. Their collection contains thousands of items, including books, manuscripts, original documents and papers, pictures, county records, tapes, CDs, microfilm, microfiche, computers, and more.

The research materials, librarians and volunteers at the archives have helped thousands of visitors connect to their past and learn about their genealogy.

The dedicated staff and volunteers at the society have made it very successful. In 2006, Mary Garrett, Nancy Neely, Sarah Richardson, Sarah Smith, Beatrice Snider, Margaret Snider, and Dorothy Steers received the Lifetime Presidential Volunteer Service Awards for over 4,000 hours of volunteer service.

The group not only preserves history, but gives much to the community, for instance by supporting several historical markers in Simpson County and providing grants for schools and groups interested in preserving history. They also offer scholarships for students who want to study history.

Mr. President, I ask my colleagues to join me in honoring, as listed below, the society and their officers for their hard work and dedication to the preservation and research of Kentucky's and Simpson County's history over the past 50 years and for many more years to come:

SIMPSON COUNTY HISTORICAL SOCIETY OFFICERS—2009

President Dr. James Henry Snider, Vice-President Jean Almand, Secretary Jason

Herring, Assistant Secretary Bonnye Moody, Treasurer Commie Jo Hall, Librarian Kenny Lynn Scott, Directors Katherine McCutchen, Emily Mayes, Sarah Jernigan, Past President and Business Manager Sarah Jo Cardwell, Gayla Coates, Nancy Thomas, Commie Jo Hall, Morris Hester, Betty Nolan, Elizabeth Wakefield, Allison Cummings, Helen Cardwell, and Stacie Goosetree

SIMPSON COUNTY HISTORICAL SOCIETY VOLUNTEERS

Myrtle Alexander, Kathy Allen (Dinning), David Forrest Almand, Jean Almand, Margaret Beach, Roxanne Boyer, Lucille Brown, Jean Burton, Barry Byrd, Bill Byrd, Helen Cardwell, Ruth Cardwell, Sarah Jo Cardwell, Pattye Caudill, Billy Jeff Cherry, Ruth Cherry, Liz Chisholm, Jim Clark, Gayla Coates, Sue Cooper, Irene Harding Cornett, Joe Craft, Nettie Craft, Mary Crow, Allison Cummings, Elizabeth Dinning, Elizabeth Dunn, Ruth Forshee, Jackie Forshee, Kathy Forshee, Larry Forshee, Mary Garrett, Paul Garrett, Addie Gillespie, Nora Belle Gillespie, Cheryl Goodlad, Stacie Goosetree, Kay Gregath, John Gregory, Commie Jo Hall, Janet Head, Jason Herring, Jimmy Jennett, Tracy Jennett, Dorothy Jent, Earl Jent, Amy Kepley, Ricky Kepley, Donna Laser, Mary Malone, Emily Martin, Emily Mayes, Charles McCutchen, Katherine McCutchen, Hallie McFarland, Mary Rose Meador, Lowrie Mervine, Peggy Mervine, Betty Milliken, Edna Milliken, Thomas N. Moody, Anne Mullikin, Nancy Neely, Tom Scott Neely, Dorothy Newbold, Mary Ogles, Olaine Owen, Mildred Perry, Jo Ann Phillips, Marian Phillips, Ruth Richards, Mozelle Richardson, Sarah Richardson, Wendell Richardson, Mattie Lou Riggins, Janet Roark, Betty Rogers, Lou Ella Rutherford, Edna Earl Scott, Kenny Lynn Scott, Ellen Smith, Henry Price Smith, Sarah Smith, Billy Briggs Snider, Beatrice Snider, James D. Snider, Margaret Snider, Lori Snider, James Henry Snider, D. B. Snider, Pearl Snider, Dorothy Steers, Geraldine "Jerri" Stewart, Rowena Sullivan, Robert E. Taylor, Nancy Thomas, Jane Truelove, L. L. Valentine, Dan Ware, Bessie Watwood, Alisha Westmoreland, Michelle Willis, Christine Wilburn, Geraldine Wright, Joan Yorgason.

VOTE EXPLANATION

Mr. LIEBERMAN. Mr. President, I was unable to participate in the rollcall vote on the motion to invoke cloture on the Kohl substitute amendment, No. 1908, to H.R. 2997, the Agriculture, Rural Development, Food and Drug Administration, and Related Agencies Appropriations Act of 2010 and on the rollcall vote on amendment No. 1910 introduced by Senator McCain. Both rollcall votes took place yesterday.

Had I been present, I would have voted yea in support of the motion to invoke cloture and yea in support of Senator McCain's amendment. The McCain amendment would have cut \$17.5 million set aside for the Rural Utilities Service, High Energy Cost Grant Program—a program that was eliminated in President Obama's fiscal year 2010 budget.

I commend the chairman of the subcommittee, Senator KOHL, and the ranking member, Senator BROWNBACK, for their bipartisan work on this important bill that will fund agriculture priorities, nutrition assistance programs, and food and drug safety measures that are critical for my State of

Connecticut and the rest of the country.

HEALTH CARE REFORM

Mr. DODD. Mr. President, last night I rose to speak on health care reform.

Today, another 14,000 Americans lost their health insurance.

That is 14,000 Americans who had health insurance when I spoke on the floor last night, but tonight each will go to bed fearing that if something happens to them or their family, they could lose everything—their home, their life savings, their economic security, gone.

Tomorrow, it will be another 14,000.

Another 14,000 the day after that.

And another 14,000 every single day until we finally pass real health care reform.

Between now and when we return from recess, half a million Americans will lose their insurance. Some will have preexisting conditions that, under our current system, will prevent them from ever finding coverage again. Some will have medical issues requiring expensive treatments that they will no longer be able to afford. Some will end up in bankruptcy. Some will end up on public assistance. And some will end up in the emergency room with a sick child whose illness could have been prevented with a simple doctor's visit.

The tragedy caused by our broken health care system is ongoing. It is happening right now. And when we come back from recess, I have every hope and expectation that we will be ready to work together to stop it.

I take my Republican colleagues at their word when they say they don't want to stall this effort to death, they simply want bipartisanship.

The Affordable Health Choices Act, passed in the HELP Committee, didn't win bipartisan support, but it is a bipartisan bill. It incorporates 161 Republican amendments, and reflects a spirited and robust debate with participation from all sides—exactly the sort of debate I expect we can have when we come back from recess.

We are not going to agree on every detail, and there will be times when we have to have a simple up-or-down vote and live with the results. But surely we can all agree that the status quo isn't just unacceptable—it is unsustainable. That is why doctors and nurses, insurance companies and drug companies, Democrats and Republicans—all say we need reform.

Well, it is time for us to make that happen.

I believe that our bipartisan approach has yielded a good bill.

If you don't have health insurance, the Affordable Health Choices Act will put it within reach by giving you a range of affordable options to choose from. It forever banishes the term "preexisting conditions" from the American vocabulary.

If you have health insurance, the Affordable Health Choices Act will make

it less expensive by investing in preventive care to bring down the long-term cost of keeping our citizens well, not to mention eliminating waste and fraud from our system.

And if you like your doctor and your insurance plan, and you are worried about keeping it, the worst thing in the world you could do would be to stand in the way of reform. The Affordable Health Choices Act guarantees that you won't see your insurance be taken away at the moment you need it most or watch as it is priced out of your family's budget.

Whether you have insurance or not, whether you like your health care options or not, whether you are sick or healthy, Democrat or Republican, working-class or a small business owner, reform is for you.

Let us take action on behalf of the 14,000 Americans who will lose insurance tomorrow. Let us take action on behalf of the 45 million uninsured and the 30 million underinsured. Let us take action on behalf of the American people who are looking to us to succeed.

Mr. JOHANNIS. Mr. President, I rise today to bring attention to the unique health care challenges faced by the 62 million Americans who live in rural America.

If you took a snapshot of rural America, you would see a population that is older, poorer, and has less access to health care than other places in the country. Because many rural residents are elderly, they need more health care services.

However, rural residents have greater transportation difficulties reaching health care providers and often have to travel long distances to reach a doctor or hospital. Very few public transportation systems are available, and so many folks wait until they are very sick before turning to the health care system. This makes the already challenging job of managing chronic conditions even more difficult. Rural areas report higher rates of chronic conditions, including heart disease and cancer. One contributing factor to these chronic conditions is the higher obesity and smoking rates of children and adults who reside in rural areas.

Compounding the problem, rural residents also tend to be poorer and make on average \$7,000 less per year than their urban counterparts. Nearly 24 percent of children who live in rural America are in poverty. Poverty affects the types of foods being offered at the dinner table as the price of fruits and vegetables can often bust a tight food budget.

It can also force people to put off medical care. According to a recent study, rural residents are more likely than their urban counterparts to report having deferred care because of cost. It can be a vicious cycle.

While health coverage is vitally important to these rural residents, the greatest crisis is access to care. We could give health insurance to every-

one, but if your county has no doctor or hospital, the best insurance will make little difference. This is a simple concept, but an important one.

In rural America, the cornerstone of the health care delivery system is the critical access hospital. These hospitals, made up of 25 beds or less, provide the most basic access to medical services and serve as a rural safety net for emergency services. Of the 90 hospitals in Nebraska, 65 of them are critical access hospitals. Clearly their importance in rural America cannot be overstated.

However, it is difficult for many rural hospitals to keep their doors open. One reason is that there is less patient volume than in many urban settings. In addition, Medicare payments to rural hospitals and physicians are dramatically less than those to their urban counterparts for equivalent services. This correlates closely with the fact that more than 470 rural hospitals have closed in the past 25 years.

Rural areas also struggle to keep other aspects of their health care infrastructure in place. For example, 20 percent of counties in Nebraska do not have a local pharmacist who can fill prescription medications for their residents. I could go on and on with a similar story on home health services, long term care, durable medical equipment, and other critical health care services.

However, one of the biggest challenges facing rural America is difficulty recruiting and retaining health care professionals. Medical professionals sometimes do not want to set up practice where doctors are few and major metropolitan hospitals require hours of travel. Currently, 50 million Americans who live in rural America face challenges in accessing health care. There are too few providers to meet their basic primary care needs. According to the U.S. Department of Health and Human Services, while a quarter of the population lives in rural areas, only ten percent of physicians practice there. There are over 2,000 health professional shortage areas in rural and frontier areas of all States and U.S. territories compared to 910 in urban areas. Ninety out of 93 Nebraska counties are facing health care profession shortages in one or more areas of practice.

Unless something is done to address this problem, the situation will almost surely become a crisis. This scenario is quickly appearing on the horizon as rural America has a higher percentage of physician generalists who are nearing retirement than urban areas.

Fewer doctors and lack of health care access could decimate rural residents and their rural communities. Young families will not move to a place where they cannot access health care for their children, and older residents will be forced to move to places where they can find care.

This potential rural reality has major implications for the rest of the country and will affect the health and