

Sergeant Owens' family and friends said he joined the Army out of a sense of patriotism and took pride in serving his Nation. He devoted his life to defending America and gave the ultimate sacrifice for the country he so deeply loved.

After this tremendous loss, Fort Smith, AK, is in the process of waving off 200 airmen from the Air National Guard's 188th Fighter Wing as they head to Afghanistan, joining about 75 members of the 188th already serving there. This will be the unit's first deployment with the A-10 Thunderbolt II—also known as "The Warthog"—since the 188th received the aircraft in April of 2007. Also, many of these guardsmen are part of the agribusiness development team. This unit will teach Afghans better farming, crop storage, and marketing practices in an effort to draw them away from poppy production and build a strong economy. These Arkansans are picking up Sergeant Owens' mantle in the fight to create a more secure and stable Afghanistan and together their efforts will endure.

Today, I join all Arkansans in lifting up Sergeant Owens' wife Kaitlyn, his parents Sheila and Keith and his siblings and friends and extended family and community of Fort Smith during this very difficult time. Sergeant Owens may be gone, but his courage, valor, and patriotism will never be forgotten.

I yield the floor. I suggest the absence of a quorum.

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

The assistant legislative clerk proceeded to call the roll.

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 President, I ask unanimous consent that the order for the quorum call be rescinded.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

#### HEALTH CARE

Mr. JOHANNES. Mr. President, I rise to speak to the Senate health care bill and to talk a little bit about some of the issues related to that bill, in terms of financing and scoring and, to be very candid, about some of the accounting gimmicks that try to hold this bill together. I will be joined by Senator WICKER and Senator BARRASSO in this colloquy. Let me get started.

If you start to study the bill, and for many of us who have served in other capacities—myself as Governor and as a mayor—the first thing you want to do is ask yourself: Does it work? Is the financing of this bill such that it makes sense? Is it an honest portrayal of the income you expect and the expenses you expect? Certainly, that is where I start and, I suggest, many of my colleagues start.

The one thing about this health care bill that struck me immediately and struck others is, first of all, there are 10 years of tax increases. They total over \$½ trillion—a massive amount of tax increases.

The second thing you see is, there are 10 years of Medicare cuts, again about \$½ trillion total. You do those things and some other things and it pays for 6 years of spending because even though some of the issues relative to this health care bill kick in initially, the vast majority of it does not kick in for 3 or 4 years.

When you put that all back together, you begin to realize what you have is a health care bill that costs about \$2.5 trillion over a 10-year score.

Then you start working through a whole bunch of other issues. You have a Senate bill that takes \$52 billion in higher Social Security taxes and revenues and counts them as offsets. That would be money normally reserved for the Social Security trust fund. You look at the CLASS Act. One Member of this body—a Member who is very respected for what he has done relative to budgeting—called this a Ponzi scheme.

The CLASS Act was initially opposed by our friends on the other side or by leading Democrats. But it is back alive. It is included in the Senate bill. It is another Federal entitlement that is going to create an insolvency problem very quickly. It takes money from premiums that are supposed to go for benefits and uses them as offsets and pay-fors.

CMS experts have looked at this, and they reached a conclusion that is reliable. They said the CLASS Act faces "a significant risk of failure," and then said, and may lead to "an insurance death spiral."

Our friends on the other side claim the bill will simultaneously extend the solvency of Medicare and then magically decrease the deficit. But the reality of that, again, comes from CMS actuaries who say: Well, wait a second here, that is double-counting. You can't use the same dollar twice. You can't count it twice. CMS concludes that the Medicare cuts in the legislation cannot be simultaneously used to finance other Federal outlays, such as coverage expansions under this bill or to extend the trust fund.

So when you cut all the way through this and see what is happening here, it doesn't hold together. This is a financial plan that is built upon sand, and you can almost guarantee it is going to collapse.

So let me, if I might, ask my colleague, Senator WICKER, what he thinks of all of this. Can he offer some thoughts as to where this bill is headed and the financial mechanisms of this bill?

Mr. WICKER. I appreciate my colleague from Nebraska getting into the weeds because it is important that we know the details of the numbers here. I think there is also a sort of big-picture aspect to this. There are a lot of Americans out there who may not have read the details the Senator from Nebraska just outlined, but they instinctively know you can't do all this to one-sixth of our economy and save

money for the Federal Government at the same time. They instinctively know this is going to turn out, as big entitlement programs always do, to be more expensive than has been estimated and it is going to cost the American taxpayer and future generations in terms of the national debt.

I would like to pivot and talk about what this is going to do to State governments because that is an additional aspect over and above the gigantic numbers the Senator from Nebraska mentioned.

Really, almost half of the additional coverage in this Senate bill, which the House is being asked to adopt lock, stock, and barrel without even changing so much as a semicolon, half of the coverage is going to be under Medicaid. We all know Medicaid requires a huge Federal investment, but Medicaid also always requires a State match. Under the provisions of this bill, if it is enacted, States will be told that the magnificent Federal Government has increased coverage, and now, Mr. State Legislator, Mr. State Governor, you figure out a way to pay your part of it.

I know this much: In my State of Mississippi, our legislators and our Governor have had to stay up late 2 years in a row figuring out a way to pay for the Medicaid match they are already being asked to pay, much less this new mandate of additional persons who would be covered under this Senate language. There is no way the State of Mississippi can stand this new Medicaid coverage without an increase in our taxes at the State level. I don't think we can cut teachers enough, although teachers might have to be cut to pay this Federal mandate. I don't think we can cut local law enforcement enough, although that might have to be cut too. It is just a huge, unfunded burden on the States. Quite frankly, even if all of the promises that are being made on the Senate side come true—that we will clean this up in reconciliation, which I frankly doubt can possibly happen—the States are going to be faced with this huge unfunded mandate.

You don't have to take our word for it on this side of the aisle. Democratic Governor after Democratic Governor has had press conferences, they have sent letters, they have sent messages, they have made themselves available to the press. Governor Bredesen of the State of Tennessee said this bill is the "mother of all unfunded mandates" and has urged, even at this late date, that we not go down this road.

So I appreciate my friend from Nebraska pointing out what this is going to do to the Federal budget, and I would simply commend the bipartisan State officials who have been talking to anyone within the sound of their voices saying that State governments cannot afford this mandate at the State level, and it will inevitably result in an increase in taxes at the State level—something we certainly don't need at this time of economic hardship.

Perhaps Senator BROWNBACK has some thoughts he would like to add, and I know others may be joining us, too, Mr. President.

Mr. BROWNBACK. I appreciate my colleagues allowing me to join in this colloquy because it is incredibly important and I believe the American public believes it is incredibly important because, if for no other reason, they are looking at it and saying: We don't want this bill. We don't think this bill is the right way to go. We don't think this procedure is the right way. So they oppose it on process and they oppose it on product. And you don't have to believe me. Listen to these poll numbers: 68 percent say the President and the congressional Democrats should keep trying to work with Republicans to craft legislation.

By the way, that big, all-day-long meeting at Blair House to talk about this, where we put forward a series of ideas, virtually all of them were rejected—a bipartisan incremental compromise, which is much more the way the American public wants to go.

A Rasmussen poll says that 57 percent of the voters say the health care reform plans we are discussing in Congress will hurt the U.S. economy. Only 25 percent think it will actually help. And 66 percent believe the health care plan proposed by President Obama and congressional Democrats is likely to increase the Federal deficit. Do you know the reason they think that? Because it will. This is going to increase the Federal deficit.

On top of all that, there is a big intangible here. If this bill passes, the rest of the world is watching to see if the United States passes this big increase—an entitlement program—when we are running \$1.5 trillion in deficit and have a \$12 trillion debt that is 90 percent of the size of our total economy. They are watching and they are saying: If the United States does this now, they are not serious about getting their budget under control. They are going to start pulling dollars out of the U.S. economy and putting them in other places. It will make it harder for us to raise capital, it will increase interest rates, and it is going to hurt the U.S. economy. And that is a near-term thing that is going to happen because people are watching this.

I might note the "Saturday Night Live" routine where China's President, Hu Jintao, is lecturing President Obama about how he is going to get the budget under control by passing a big new entitlement program. I don't usually cite "Saturday Night Live," but in this case it lands a little too close to home. And people are saying: Yes, this doesn't make any sense to me either. This is going to hurt.

The front page of the Wall Street Journal has an article about what Ireland is having to do to get its budget under control, Greece is a mess, and our deficit and debt is skyrocketing.

If we pass this, this is going to hurt us in the near term as far as the cost of

raising the capital we need in this economy. It will hurt States that are really struggling as well. It is a bad idea at a bad time.

I am glad my colleagues let me join them, and I note that the doctor is in—the Senator from Wyoming—to help us dissect this bill as well.

Mr. BARRASSO. Well, Mr. President, that is exactly what I am hearing at home from Wyoming's voters and from my patients. I was in Wyoming this past weekend. I have had the privilege of practicing medicine there for 25 years, taking care of families in Wyoming. When I talk to people, their concerns are the national concerns the Senator from Kansas has just mentioned—the debt and what our Nation is facing long term. But they are also very focused on their own personal care. If you have a town meeting or just talk to people at the coffee shop, the people of America believe that if this bill passes, the quality of their own personal health care will go down; that their opportunity to go to the doctor they have enjoyed a relationship with for years, where they know them and they know their family, may be gone.

We are also seeing that health care providers all across the country—even the Mayo Clinic—are saying this bill is a huge lost opportunity. It was supposed to be designed to help get the cost of care down, and it is not doing that. It is going to raise the cost of care. It was designed to improve the quality of care, but it is going to cost people the quality of their own health care. That is why Americans don't like this bill. They do not like anything about it.

The Mayo Clinic was used early on by the President in this debate as the model for how we should have health care in this country. The Mayo Clinic has said "no thank you" to patients on Medicare in Arizona, "no thank you" to patients on Medicaid. Yet the President plans to push this program through. He says he is going to provide coverage for more Americans, and he is going to do it by putting 15 million more people on Medicaid—a program that many doctors won't see because the reimbursement is so low. If all a provider saw were Medicare patients, they couldn't afford to keep their doors open—not at the hospital or the clinic. And we are hearing that from hospitals and doctors across the country. That is why the Mayo Clinic said: No thank you, Mr. President. We can't take those patients, whether it is Medicare or Medicaid.

This bill will cut Medicare—the program our seniors depend upon—by \$500 billion for patients who depend on Medicare. It cuts Medicare Advantage, and that program is an advantage, and the reason people signed up for it is because it provides preventive care and coordinated care. But it is not just that; there will be \$135 billion in cuts to hospitals in all our States and communities, \$42 billion to home health

agencies. These are the folks who help provide a lifeline for people who are at home, and it saves money by keeping them out of the hospital. There are cuts to nursing homes, to hospice providers—providing services to people in the final days of their lives. That is why the American people are offended that this bill is being crammed through.

I see we have the former Governor of Nebraska here on the floor, who has experienced these issues with Medicaid, with Medicare, and with nursing homes. So I would ask my friend and colleague whether this the same thing he is hearing at home in Nebraska.

Mr. JOHANNIS. This is exactly what I am hearing at home in Nebraska, Mr. President.

As a former Governor, as the Senator from Wyoming points out, you deal with these programs every day. You are trying to figure out how to fashion a State budget that deals with Medicaid. I said a few weeks ago that I don't know whom the folks who wrote this bill were talking to because if you look at the expansion of health care to people in this bill, really what they are doing is expanding Medicaid by about 15 to 18 million individuals.

The Senator from Wyoming hit the nail on the head. You already have serious access problems with Medicaid. What do I mean by that? As the doctor, Senator BARRASSO, said, doctors cannot practice on the Medicaid reimbursement. They would literally go broke. Our little hospitals in all of our States, our critical access hospitals, would say: We cannot keep our doors open on Medicaid reimbursement. They can't do it on Medicaid or Medicare reimbursement. So what is the solution? Well, the solution certainly isn't adding 15 to 18 million more people who will walk into a hospital or a doctor's office and who will hear: Sorry, we don't take Medicaid patients because we can't afford to do that.

The other thing I want to mention, if I might—and then I am going to ask Senator WICKER to comment on some of these questions also—because this is a very important point, is that all of a sudden we are starting to hear a lot of discussion from the White House on down about how we have to get a handle on cost. And I think they have communicated that well because, quite honestly, the American people get it. They understand that if you don't have an impact on cost, you are not going to get anywhere with health care reform.

My colleagues will remember that we sent a letter to the CMS Actuary—this is an actuary employed by the Federal Government—and we said: Take a look at this bill and tell us what you think in these respects, and one of the respects was health care costs. Let me quote from that report:

Overall health expenditures under this bill would increase by an estimated total of \$222 billion.

Compared to what? Compared to doing nothing. If we did nothing, we

would have a better impact on health care costs than this bill is going to have.

After spending \$2.5 trillion, after cutting \$½ trillion out of Medicare, after raising taxes over \$½ trillion, the CMS Actuary says to us: After you have done all those things, the overall health expenditures under this bill would increase by an estimated total of \$222 billion versus doing nothing.

I ask Senator WICKER, is that the kind of health care reform he is hearing the people back home want?

Mr. WICKER. The people back home want health care reform, but they certainly want the kind that is going to lower health care costs and lower health care premiums. The Senator mentioned CMS. It may be that some people within the sound of our voices do not realize this is a part of the administration. This is not some outside business group that has an ax to grind. The actuaries at the Centers for Medicare and Medicaid Services are called on to tell us the numbers as they see them. They had no choice but to answer the question accurately and the question is not one that lends itself to getting public support for this plan. I think that is why the poll numbers Senator BROWNBACK mentioned are there. There is only about 25 percent of the American public that believes at this point we should pass this huge Senate bill lock, stock, and barrel and send it to the President for his signature.

Senator BARRASSO mentioned the \$½ trillion cut in Medicare. We spent a little time in December debating whether actually there was a cut in Medicare. Some of our friends on the other side of the aisle suggested this—the programs that were cut should not be considered part of the Medicare Program.

Obviously, there is one Democratic Senator who thought so much of these cuts in Medicare that he got an exemption for his State. That is what the minority leader has been calling the “Gator aid.” Florida, under the Senate bill—the bill the House is being asked to pass in its entirety without changes—the Senate bill says we are not going to cut Medicare Advantage for the State of Florida.

Why the people of the State of Florida are more deserving of Medicare Advantage and Medicare benefits than the people of Wyoming or Mississippi or Kansas or Nebraska, I do not know. But somehow the majority, 60 Members of this Senate, in their wisdom, believed Medicare was a good program and Medicare Advantage was a very good program for the people of Florida.

By the same token, I guess the Democratic Senator from Nebraska has now repudiated what was known as the “Cornhusker kickback,” which was basically saying Nebraska would not have to pay for their share of this huge Medicaid mandate; all the other States would. Somehow that State was singled out. Apparently, the people of Nebraska rose in horror at being singled

out for some sort of favor the other people in America were not getting, so that is being proposed to be changed.

I ask Senator JOHANNIS, if the House votes on this next week, they will not have a chance, will they, to take that out? The only choice the House is going to have is to vote for the “Cornhusker kickback,” the “Gator aid,” the “Louisiana purchase,” these special deals for labor unions, and all that will be sent to the President to be signed into law and will be part of the statute.

That is the way I understand the Democratic procedure. I ask Senator JOHANNIS, am I correct?

Mr. JOHANNIS. I believe the Senator is correct. Let me offer a thought, if I might. I think others—maybe I will turn to Senator BROWNBACK next. If this were a great bill, if this were the kind of legislation you wanted to take home and go out there and champion and maybe, if you are up for election, campaign on, then you would not have to go through all these gyrations and gimmicks and somersaults and cartwheels to try to get this darn thing passed. But that is exactly what is happening.

I cannot wait to get up in the morning and run down and turn on the computer and see what the latest is, because they are, over there at the House, but they finally figured out that the only way to get this terrible policy enacted is to pass the Senate bill with all its warts and moles and ugliness and special deals and whatever. They have to pass it without pulling a dotted “i” out or a crossed “t.” They may be able to say back home: Folks, I didn’t support that. What I wanted was the reconciliation package that would fix all these things. All I can say is reconciliation was never designed for this. This is not what reconciliation was designed for. Reconciliation was designed to bring down the budget deficit. What is happening over in the Senate are more somersaults, more gyrations, more cartwheels to figure out how to shoehorn this terrible piece of policy into a rule for which it was never designed.

Now you are going to end up this day, I guess, where we all show up and literally you have rulings on what you can do with reconciliation and what you cannot do. So no House Member can go home and say I voted for this awful piece of legislation, but we are going to be saved by reconciliation. Do you know what. Maybe you will, maybe you won’t. The reason why that question cannot be answered today is because reconciliation was never designed to take control of one-sixth of the economy; it was never designed to do what folks are trying to do.

Let me wrap up with this, and then I would like to hear Senator BROWNBACK’s thoughts. Enough of the somersaults, enough of the cartwheels, enough of trying to figure out how many angels fit on a pin and what size razorblade is going to divide the hair.

This is craziness. This is terrible policy. Please stop now. The country is begging us to stop and start over with a thoughtful process.

If there were a great bill, we would not be going through this. There would be bipartisan support such as there has been on many tough issues through the decades of our history. But, you see, this is not a good bill. This is a terrible bill. The bottom line is, they are going to try to fix it with a process that was never designed for this purpose.

I would like to hear the thoughts of Senator BROWNBACK.

Mr. BROWNBACK. We were on the floor in December, the longest continuous session in the history of the Senate, 25 continuous days, and we were talking about this and my colleague from Nebraska and I were joined by our colleague from Utah, Senator HATCH, who has been around a long time and part of a lot of health care reform legislation. His point is, if you follow the normal order and work it through a committee and bipartisan process, almost every health care bill he has been a part of—and there have been a number of substantial ones—gets 75 votes in this body. People want to support health care reform on a good bill. They will support it. It will be bipartisan. We are all for health care. But now you have a bill that is going to be completely partisan, on one side, not supported by the American public, and then you are having to jimmy rig a process to try to figure out how we set this up to do it.

Even KENT CONRAD, the chairman of the Budget Committee, who is a Democrat, says:

Reconciliation cannot be used to pass comprehensive health care reform. It won’t work. It won’t work because it was never designed for that kind of significant legislation.

My experience is, if you try to do something that is not designed to do this, you are going to get a flawed product and flawed process that people are going to be mad about. It will hurt this body. I think it will be very harmful to this country to do this and it should not be done.

After all the time we spent in December, 25 continuous days in session, I think the American people spoke when they had a Massachusetts election and elected SCOTT BROWN. It was clearly about health care reform.

I know my colleague from Wyoming has been all over speaking about this on television, getting a lot of feedback from people. He probably is getting the same sort of feedback that I have, about don’t do this. It wasn’t designed to be done, this sort of health care reform, in a reconciliation process.

Mr. BARRASSO. I heard that just this morning. We had a number of county commissioners from Wyoming here in Washington. They were at a speech yesterday given by Speaker of the House NANCY PELOSI, and she told these county commissioners, this group from all around the country, we

need to first pass the bill so then later the American people will know what is in it. She said this to them and they laughed. They laughed at the Speaker of the House at this meeting yesterday because these are county commissioners. They know they are not going to vote on something the people in the community don't know about. The people in the community come, they want to know what is going to be discussed and then voted on.

The people of America do not know what is in this bill. They know this bill is going to raise taxes by \$500 billion. They know this bill is going to cut Medicare for our seniors who depend upon Medicare by another \$500 billion. They know they are going to be paying for this thing for 10 years, but there are only 6 years of services. It is amazing how much the people of America know about the gimmicks of this bill that, in fact, those who are pushing the bill wish they didn't know.

That is why three out of four Americans say stop. A quarter of them say stop, a quarter of them say stop and start over, and only a quarter of them support what is happening here.

Mr. WICKER. If I can interject, I think that was a very telling remark from the Speaker of the House yesterday, and if someone didn't catch that, she said we need to pass the bill so we can then find out what is in it. The comments are out there on the Internet for the American people to see. I would like to quote Senator LAMAR ALEXANDER about this entire process. He said:

What the President is doing is asking House Democrats to hold hands, jump off a cliff, and hope Harry Reid catches them.

I don't know that HARRY REID will be able to catch them. I will say this. If there are budget points of order that need to be waived in this scheme the majority leader has about cleaning up this statute in conference, I am not going to be a part of 60 votes to waive that point of order. It will all be on Mr. REID and his teammates over there to get this done because I will not be a part of waiving points of order, helping them get to a supermajority to clean up something, even if it needs to be done.

This process needs to be stopped, and I would say the next 10 to 14 days are going to tell the tale. The American people do not want this bill, and it is up to the House of Representatives and to us, saying what we can on the Senate side, to see if we are going to listen to the people and stop this bill, go back to the drawing board and try something that works.

Mr. BROWNBACK. I join my colleague from Mississippi. I would note that is the case, and why is it the Speaker is saying we have to pass the bill to see what is in it? They are going to hold it back until they break enough arms to get a majority vote and then pop it out and then there will be an hour's debate on one-sixth of the economy being changed. We saw that same

procedure when Majority Leader REID was crafting this bill behind closed doors and nobody knew what was in the bill and then popped it out when you have the deal, when you made enough deals, broken enough arms, then we can pass this. That is no way to have a process like this. That is no way to effect this big a piece of the economy that touches every American's life in the process.

I urge the Speaker not to do something like this. Listen to the American public and follow normal order. They could send this back to committee, to the Finance and the HELP Committees, work a bipartisan agreement on this, say we have to hit this number or that, let's do an incremental approach and come out with a bill that would have 75 votes. That is doable.

We put forward a whole bunch of ideas at the Blair House. Here are different things we would support. Put out a long day of discussion. That is the normal order that produces good legislation that will stand the test of time. This will not stand the test of time, and it is going to bankrupt the country.

Mr. JOHANNIS. If my colleagues will permit, let me offer a few closing thoughts. I so appreciate the opportunity to be on the floor with them. It was not that long ago that our President of the United States actually was a Member of this body. He was a Member of the Senate. It just seems, from time to time, we are asked to comment on the 60-vote rule. He was asked to comment on that. Here is what he said. "Removing the 60-vote threshold would change the character of the Senate forever."

He went on to say having majoritarian absolute power on either side was "not what the Founders intended."

The thing about reconciliation is this: It limits debate, it is a very abbreviated process, and it just comes in and says you are only going to get 20 hours of debate. Very limited. The second thing is it only takes a majority vote.

From time to time this issue pops up. But you do not have to study the history of this great Nation very long to understand what our Founders were doing. The House is a majority body. Now, States such as Kansas and Nebraska do not fare very well in that. We do not have a lot of Members. We are never going to have as many Members as California, New York, or New Jersey. So literally on every vote you could find yourself losing.

Our Founders understood that. They came up with an idea for a very unique body, a body that would be an equalizer. Every State got two. Every State got two Members. But the important thing about this body was this: that as issues were passed on the House side by majority vote, over on this side it was anticipated that something more would be required to cause the Members to come together and try to work through the Nation's difficult problems.

Initially there was no way to stop debate. Then about 1915 it was decided that a two-thirds vote would stop debate. Then, in the mid-1970s that was changed to 60 votes. That 60 votes is an important limitation on the power of the Federal Government to impose its will upon the people.

I will wrap up my comments today by saying this: The will of the people here is very clear. They do not want this bill. They see this as a massive government takeover of their lives. They have spoken very clearly and eloquently in our townhall meetings, in elections that have occurred, and they have said: We want you to go back and work through your differences and come up with a bipartisan approach.

Yet if reconciliation is used, you will not only change the character of this body, you will change how our government operates. If you can pass this bill through a reconciliation process, you can do anything, and you end up with literally a system that is vastly different than was ever intended and a system, in my judgment, that is not good for the future of our great Nation.

With that, let me wrap up and say again to my colleagues, I appreciate the opportunity to be on the Senate floor with you today.

I yield the floor, and I suggest the absence of a quorum.

The PRESIDING OFFICER (Mr. BURRIS.) The clerk will call the roll.

The bill clerk proceeded to call the roll.

Mr. ENSIGN. I ask unanimous consent that the order for the quorum call be rescinded.

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

#### FISCAL RECKLESSNESS

Mr. ENSIGN. Mr. President, I rise to discuss the tax extenders legislation and the consequences of our fiscal recklessness. I cannot stress enough that our spending is completely out of control. It seems every week this body passes more legislation and spends more money and adds more debt onto the backs of our children. Unfortunately, the Democratic majority continues to sing from the same old sheet of music—more debt, more spending, and more fiscal recklessness. Last week the nonpartisan CBO provided their analysis of President Obama's budget, and it is nothing short of a fiscal train wreck and a roadmap to banana republic status. It pains me to stand on the floor of the Senate and tell the American people that President Obama is leading us down a path of bankruptcy.

I believe this budget is simply reckless, with enormous budget deficits as far as the eye can see. This year, the government has overspent by more than trillion dollars; the same amount last year. We are passing trillions of dollars in debt onto our children and grandchildren. Nevadans and people across the country are facing very hard