

By the way, the House passed 12 of the 13. Our committees worked 12 of the 13 out. So they came out in regular process. They were not allowed to come to the floor.

We have just about finished studying the bill. We have no problems moving on the bill and giving consent to move on the bill once we have looked at the bill. But for the majority leader to say that Members of the Senate can't have amendments after having their staff work since 9:45 last night to look at the bill and attempt to make amendments to the bill, that doesn't fit on a trillion-dollar bill. And when the American people find out what is in this bill that should not be in it, and the options that we can offer of what should be in it, I think they are going to agree that maybe we ought to make some changes.

I understand the frustration of the majority leader, but I also understand our rights. This is not about filibustering anything. This is about being an informed Senator who knows what you are doing and knows how to make a decision about how to amend the bill. We can call it something other than that, but it is not. It is about doing our job. The fact is, we got this last night.

What I would say to everybody who was fine with us going on it without having read it, I would say there is a problem with their position in the Senate in terms of their oath to do what they were sent here to do, which is to read what you are voting on, know what you are voting, and prepare amendments to what you are voting on.

We have this outburst at 16 hours after we got an almost 600-page bill? That doesn't fit with any common sense. We have instructed our side we are willing to go ahead and allow this to move forward but in a process that recognizes that this bill is not perfect, just as both the chairman of the Appropriations Committee and the ranking member said. We do not have any problems with it moving forward. We do have problems spending money we don't have on things we don't need, and we ought to be able to offer amendments that would highlight that whether the body agrees with it or not—that would highlight it so the American people can see it. We may not be allowed, based on what the majority leader said, to offer any amendments. He is the majority leader. But if that is the case, we are probably going to be here all through the weekend because that is a right each Senator has and they ought to be able to offer them—especially on a \$1 trillion appropriations bill.

I hope Senator REID has a good night's sleep. I will try to call him in the morning and work out an accommodation that will allow this bill to move so we do not have to be here on the weekend. I don't want to be here this weekend, but I will if it is the right thing to get the point out and let American people know.

Right now we are having no tours of the White House. I can show you hundreds and hundreds of thousands of dollars that are under the control of the executive that they could save that are a whole lot less important than tours of the White House. The same goes for us in the operation of our House, in terms of the Senate and the House.

I am sorry I irritated Senator REID. I am sorry he is upset with me, but I am going to do my job. I have been here, I am in my ninth year, and I have always kept my obligation to the people of this country to make sure I am thinking about the long term, I am thinking about priority on how we spend money and the best way, the right way, and offering amendments, whether they pass or not, offering those ideas. That is because that is not only my privilege but it is my obligation.

With that I yield the floor.

REMEMBERING YVONNE RICE

Mr. DURBIN. Madam President, I rise with sadness today to pay my respects and pay tribute to a dedicated public servant and a close friend whom I have known for decades.

For 12 years, when Illinoisans walked into Senator Alan Dixon's office—and then later into Senator Paul Simon's office—there was a pretty good chance that they would be greeted by the friendly, warm smile of Yvonne Rice.

She would work with them to solve whatever problems they may have had or to make sure they got the help they needed.

Thanks to her efforts, more often than not those Illinoisans walked away happy—and with one less thing to worry about.

But her service to her community wasn't limited by the walls of a Senate office. She worked in the Illinois State government for many years before joining the Dixon team and then working with Senator Simon.

She also broke new ground when she became the first African-American nominated by a major party for county-wide office in Sangamon County—the capital county of my home State.

Yvonne truly was a remarkable, wonderful, and spirited woman.

She will be dearly missed by her children, stepchildren, grandkids, great-grandkids and all of those—including my wife Loretta and myself—who were fortunate enough to know her.

RECOGNIZING DR. HANNAH GAY

Mr. COCHRAN. Madam President, today I rise to recognize the work of Dr. Hannah Gay, a pediatric infectious disease specialist at the University of Mississippi Medical Center's Blair E. Batson Hospital for Children in Jackson, MS. On March 3, the news broke that one of Dr. Gay's patients, a baby born with the human immunodeficiency virus, or HIV, had been "functionally cured" of the infection.

Now 2½ years old, this child is only the second person in history to be cured of the virus. The infant was born to her HIV-infected mother at a rural Mississippi hospital and then transported to the University of Mississippi Medical Center, where she came under the care of Dr. Gay. Only 30 hours after the baby was born, Dr. Gay began an immediate and aggressive approach to treatment that seems to have made all the difference in this child's life.

News of Dr. Gay's work and this baby's apparent cure has been celebrated around the world. This development opens a significant door to advance research and treatment for HIV and AIDS, the acquired immune deficiency syndrome. Millions of children around the globe have been infected at or during birth, and it is my hope that the spread of HIV among newborns will begin to slow and eventually stop with what has taken place in Mississippi what one doctor at Johns Hopkins University Medical School called a "game-changer."

I share the pride of all Mississippians in Dr. Gay, a native of Jackson, for her achievement and her dedication to our State. She not only teaches and practices at the University of Mississippi Medical Center, but received her training there. As a mostly rural State, Mississippi faces many health care challenges, and our homegrown health care providers give us the best chance of finding solutions so that Mississippians can live healthy lives. Dr. Gay's work at the University of Mississippi Medical Center is addressing critical needs in our State with the potential to impact other countries and regions that struggle with the scourge of HIV.

Congratulations, again, to Dr. Gay and her colleagues. Thanks to them, one child has the opportunity to lead a normal, healthy life, and we may be one step closer to ending the global HIV/AIDS epidemic. I wish all the best to researchers at the National Institutes of Health and other institutions as they explore the potential for Dr. Gay's method of treatment. I ask unanimous consent to have printed in the RECORD the Clarion Ledger article from March 7, 2013, titled: "Congratulations in order for Dr. Hannah Gay, UMC."

There being no objection, the material was ordered to be printed in the RECORD, as follows:

CONGRATULATIONS IN ORDER FOR DR. HANNAH GAY, UMC

[From ClarionLedger.com, Mar. 7, 2013]

Yes, great things do happen in Mississippi. That's something we've known all along. But the rest of the world seems to see us sometimes as a caricature of the lists we make—high in obesity, low in education and income.

But recent news that a baby born with HIV was likely cured at the University of Mississippi Medical Center by pediatrician Dr. Hannah Gay is something so powerful that the rest of the world could not help but notice.

Globally, it is arguably one of the most important stories to come along in years for the health community—real hope that HIV,

the virus that causes AIDS, can be cured. That's why when the case was presented at the 20th Conference on Retroviruses and Opportunistic Infections in Atlanta last Sunday, the story made headlines in newspapers throughout the world.

The story is: A baby was born to an HIV-positive mother at a rural hospital who was then transported to Jackson's UMC. At 30 hours old, the baby tested HIV positive and Dr. Gay, a pediatric HIV specialist at the hospital, put the baby on an intensive drug therapy that continued until the child was 18 months of age. Tests along the way showed a progressively lower viral presence in the infant's blood until it reached undetectable levels at 29 days of age. The child, a little girl, is now 2½ years old. She is healthy, with a normal immune system—meaning she is considered HIV free.

The child is only the second person in history according to health experts to have been cured of the HIV virus. It is also described as the first "functional cure" of an HIV-infected infant, which could lead to eliminating HIV in children throughout the world altogether.

And, it happened right here in Mississippi. It's not that we are surprised. UMC and its staff, comprising more than 9,000 full and part-time employees, have long been known for excellence. It is Mississippi's only academic health science center, which strives to educate tomorrow's health care professionals and eliminate differences in health status of Mississippians based on race, geography, income or social status.

The stories of success over the years are too many to list here. But it's important at this critical moment, as UMC and Dr. Gay stand at the center of the world health stage for work that could ultimately change the fortunes for so many around the world, that we celebrate this accomplishment.

We congratulate UMC, Dr. Gay and the thousands of others who work for and with Mississippi's outstanding health facility. If there was any doubt before, the world certainly knows now—we do great things in Mississippi.

BUDGETARY REVISIONS

Mrs. MURRAY. Madam President, committee allocations and budgetary aggregates were previously filed pursuant to section 106 of the Budget Control Act of 2011. On December 18, 2012,

those levels were revised pursuant to the Budget Control Act. Today, I am further adjusting those levels, specifically the allocation to the Committee on Appropriations for fiscal year 2013 and the budgetary aggregates for fiscal year 2013.

Section 101 of the Budget Control Act allows for various adjustments to the statutory limits on discretionary spending, while section 106(d) allows the Chairman of the Budget Committee to make revisions to allocations, aggregates, and levels consistent with those adjustments. This adjustment accounts for changes resulting from the following bills:

One, the American Taxpayer Relief Act (ATRA, P.L. 112-240).

Two, the Disaster Relief Appropriations Act of 2013 (P.L. 112-77).

Three, the Senate substitute amendment to the Continuing Resolution (H.R. 933).

ATRA reduced the overall discretionary spending level by \$4 billion and redefined the firewalls. The supporting tables reflect totals that correspond to the revised security/nonsecurity definition included in ATRA. As such, I am reducing the security budget authority allocation by \$2 billion, the nonsecurity budget authority by \$2 billion, and the total outlays by \$2.315.

The Disaster Relief Appropriations Act and the Senate amendment to the Continuing Resolution are eligible for adjustments under the Budget Control Act.

The Disaster Relief Appropriations Act includes \$5.379 billion in budget authority that is designated as disaster relief and \$41.669 billion that is designated as an emergency. That funding is estimated to result in \$3.257 billion in outlays in 2013. The adjustment filed on December 18, 2012 included revisions related to the Disaster Relief Appropriations Act. Removing the adjustment for the Senate bill and including the enacted bill nets to a reduction of \$8.909 billion in budget authority designated as an emergency, a reduction

of \$6.309 billion in outlays designated as an emergency, and an increase of \$592 million in outlays designated as disaster relief. Furthermore, the Disaster Relief Act includes \$3.459 in budget authority and \$344 million in outlays as nonemergency and non-disaster funding, which is not eligible for an adjustment.

The Senate amendment to the Continuing Resolution includes \$98.683 billion in budget authority designated as Overseas Contingency Operations (OCO), \$11.779 billion in budget authority for disaster relief, \$483 million in budget authority for program integrity, and \$41.669 billion for emergencies. This is estimated to result in \$55.766 billion in outlays in 2013.

Consequently, I am revising the budgetary aggregates for 2013 by a total of –\$9.883 billion in budget authority and –\$8.603 billion in outlays. I am also revising the budget authority and outlay allocations to the appropriations committee by –\$3.504 billion in security budget authority, –\$6.381 billion in nonsecurity budget authority, and –\$8.605 billion in total outlays, pursuant to the new security/nonsecurity definition included in ATRA.

I ask unanimous consent that the following tables detailing the changes to the allocation to the Committee on Appropriations and the budgetary aggregates be printed in the RECORD.

There being no objection, the material was ordered to be printed in the RECORD, as follows:

BUDGETARY AGGREGATES

(Pursuant to section 106(b)(2)(C) of the Budget Control Act of 2011 and section 311 of the Congressional Budget Act of 1974)

\$s in millions	2012	2013
Current Spending Aggregates:		
Budget Authority	3,075,731	2,986,115
Outlays	3,123,589	3,006,559
Adjustments:		
Budget Authority	0	–9,883
Outlays	0	–8,603
Revised Spending Aggregates:		
Budget Authority	3,075,731	2,976,232
Outlays	3,123,589	2,997,956

* Excludes \$2 million in off-budget Social Security funds.

REVISIONS TO THE BUDGET AUTHORITY AND OUTLAY ALLOCATIONS TO THE COMMITTEE ON APPROPRIATIONS

(Pursuant to section 106 of the Budget Control Act of 2011 and section 302 of the Congressional Budget Act of 1974)

In millions of dollars	Previous Allocation/Limit Under Old Definition	Previous Allocation/Limit Under New Definition	Adjustment	Revised Allocation/Limit Under New Definition
Fiscal Year 2012:				
Security Discretionary Budget Authority	816,943	0	0	816,943
Nonsecurity Discretionary Budget Authority	363,536	0	0	363,536
General Purpose Discretionary Outlays	1,320,414	0	0	1,320,414
Fiscal Year 2013:				
Security Discretionary Budget Authority	639,663	805,008	–3,504	801,504
Nonsecurity Discretionary Budget Authority	565,836	400,491	–6,381	394,110
General Purpose Discretionary Outlays	1,284,553	1,284,553	–8,605	1,275,948

* The American Taxpayer Relief Act redefined the discretionary firewalls for fiscal year 2013. Security now includes the Departments of Defense, Homeland Security, and Veterans Affairs, all of budget function 150 (international), the National Nuclear Security Administration, and the Intelligence Community Management Account. Nonsecurity includes all other funding.

DETAIL ON ADJUSTMENTS TO FISCAL YEAR 2013 ALLOCATIONS TO COMMITTEE ON APPROPRIATIONS

(Pursuant to Section 106 of the Budget Control Act of 2011)

\$s in billions	Program Integrity	Disaster Relief	Emergency	Overseas Contingency Operations	Other	Total
American Taxpayer Relief Act Cap Adjustment (P.L. 112-240)*:						
Budget Authority	0.000	0.000	0.000	0.000	–4.000	–4.000
Outlays	0.000	0.000	0.000	0.000	–2.315	–2.315
Disaster Relief Appropriations Act, 2013 (P.L. 112-77)*:						
Budget Authority	0.000	0.000	–8.909	0.000	0.000	–8.909
Outlays	0.000	0.595	–6.312	0.000	0.000	–5.717
Senate Amendment to the Continuing Resolution (H.R. 933):						
Budget Authority	–0.567	0.752	0.000	2.839	0.000	3.024