

This is personal to me. I know in the Acting President pro tempore's home State of Hawaii they have a huge agricultural sector. I know it is very important to his State. Everybody thinks of how beautiful Hawaii is and tourism and all that, but agriculture is critically important to his State's economy, just like it is for the other 49 States. In almost every State—maybe with one or two exceptions—agriculture is very critical to that State's economy. That is true for Arkansas.

Again, this is very personal for me. One in six jobs in our State is related directly or indirectly to agriculture. Agriculture—we love our Fortune 500 companies. We love having them. We have several that are based in Arkansas. We are proud of them. But 25 percent of our State's economy is tied to agriculture—25 percent.

So the question is, How do we fix this? It is something we will never hear on the talk shows. We will not hear the talking heads chatter on about this. But the way we fix it is to work in a bipartisan way, to come together, to be very responsible—as the Senate has been on this issue—to put something together, and to get it done.

This is why groups in my State, such as the Arkansas Farm Bureau, Agricultural Council of Arkansas, Riceland Foods, Arkansas Rice Growers Association, Tyson Foods, the Arkansas Cattlemen's Association, et cetera, et cetera—the list goes on—all supported what we did in the Senate, and they do not support what is going on in the House right now.

But even more important than the groups, I have been around my State, of course, all year—and over the last 10 years. But during the August recess, I went around the State, and every time I saw a farmer—and I literally talked to hundreds of them—they said: Please, please, don't let this happen. Don't let this happen. Why do we want to put all this at risk? What we have now is working. Sure, we can make improvements. Yes, we support the Senate bill. Even though the Senate bill is not perfect, we support that because we know the importance of agriculture.

I would ask my House colleagues to please get themselves out of this manufactured crisis they have created for us all. Let's turn off the politics. Let's work together. The American people are counting on us.

I yield the floor.

The ACTING PRESIDENT pro tempore. The assistant majority leader.

Mr. DURBIN. Mr. President, are we in morning business at this time?

The ACTING PRESIDENT pro tempore. We are.

Mr. DURBIN. Does the majority have the control for an additional period of time?

The ACTING PRESIDENT pro tempore. Yes.

Mr. DURBIN. How much time is remaining?

The ACTING PRESIDENT pro tempore. There is 20½ minutes.

Mr. DURBIN. Thank you very much, Mr. President.

FACING DEADLINES

Mr. DURBIN. Mr. President, the news out of Washington is not encouraging. It looks as though we are facing a government shutdown and the possibility of even a default on the debt. These are totally unnecessary. There is nothing that is forcing this, other than the political will of some people, and both are disastrous.

Shutting down the government, of course, runs the risk of disrupting Social Security payments, veterans' checks. It, of course, is damaging to our economy. At a time when we are recovering, but slowly, and we need to create jobs, it does not make any sense.

We are facing a deadline, obviously, of October 1 for a new fiscal year. We passed a budget in the Senate back at the end of March, if I remember correctly. Senator PATTY MURRAY of Washington, the chairman of the Senate Budget Committee, worked through a budget that passed. We then asked for the obvious: Let's have a meeting with the House. It is controlled by Republicans. We have a Democratic majority here. Why don't we sit down now and work out our differences? The difference between the two budgets, about \$92 billion—substantial for sure but something that is at least worth sitting down and discussing.

We came to the floor of the Senate repeatedly asking for a chance to sit down and work it out. Sadly, three or four Senators on the other side of the aisle continued to object. They would not let us sit down and talk. They would not let us try to find a bipartisan solution to this challenge, and it brings us to this moment.

Not having agreed on a budget resolution, we have been unable to pass appropriations bills—though they are ready in the Senate. I know a little bit about this because my new responsibility in the Appropriations Committee is the largest single bill. The bill I have worked on, with Senator COCHRAN, Republican of Mississippi, is a bill that covers all of the Defense Department and all of the intelligence agencies. I will tell you, it is the largest and a huge portion of our national discretionary budget—almost 60 percent.

We are ready. We prepared the bill. We want to bring this bill before the committee on the floor and have the debate that it deserves so our men and women in uniform are well served, our intelligence operations continue, and we acquire the necessities for the protection of America. Unfortunately, the same group that opposed sitting down with the House Republicans and finding a compromise has objected to taking up any spending bill on the floor of the Senate.

Where does that leave us? We have no budget, and we cannot take up a single

spending bill because of the objections from the other side of the aisle. They are being guided by a few Members over there who are of a certain political faith that I cannot even describe who believe that chaos is the best. I do not.

I have been here for a little while. I have found good-faith efforts by Members on both sides of the aisle. Many Republican Senators—conservative, yes, but sensible—are willing to sit down and try to find answers to these issues.

That is the right thing. Sadly, what has happened over in the House is hard to explain. I read press reports. There are about 40 of the House Republicans who are so-called tea party Republicans who insist on shutting down the government and insist as well on defaulting on our national debt. They happen to believe that is a good way to push their position opposing health care reform, ObamaCare. They happen to believe that is the way to convince the American people they are right.

I think they are completely wrong. I never thought I would ever come to the floor of the Senate to quote Karl Rove. But in this morning's Wall Street Journal, for goodness' sake, he wrote a long article to his fellow Republicans saying: Wake up to reality. Independent voters, those who do not declare for either political party across America, think the tea party Republican strategy is disastrous.

He warned the Republican Party: If you are not careful, you are going to push those Independents over onto the Democratic side.

Far be it for me to not want to see that happen politically, but I certainly have to tell you that if it takes shutting down the government and shutting down the economy, I do not want it to happen. What Karl Rove has said to his fellow Republicans is: Look at the reality of what you are doing to this party. You are destroying this party for the next election—this morning's Wall Street Journal.

I ask unanimous consent that article be printed in the RECORD at the conclusion of my remarks.

Most people do not even understand what a debt ceiling is. It is kind of hard for the average American to understand. Let me try to put it in simple terms. We spend more money than we raise in taxes. When we do that, we have to borrow money. The good news is that the amount each year is coming down dramatically, so our annual deficits are reducing, are coming down.

But when there is a difference, when we spend more than we have, we have to borrow it. In order to borrow it, there needs to be an overall authorization of the government. It is called the debt ceiling. So as we, for example, fund our military and borrow, say, 40 percent or 30 percent of what it takes to fund our military, as we borrow that, we need an authorization to do it.

There comes a point where we have used all our authority to borrow and

we have to increase our authority to borrow, lift the debt ceiling to cover our new debt for money already spent, money spent by Congress. Now we have a position being taken by some tea party Republicans, who may have voted for the spending but now do not want to vote for the borrowing. They cannot have it both ways.

What happens if we do not increase the debt ceiling? What it means is that for the first time in the history of the United States of America, we will default on our national debt—the first time. What does a default mean? Families understand this and businesses understand this. If you do not pay your debts as you are supposed to, bad things can happen: foreclosure, legal proceedings, but at a minimum it destroys your credibility as a borrower.

When your credibility as a borrower goes down, what happens? Interest rates go up for you. Translate that to America. If we default on our debt, if we fail to raise the debt ceiling for the first time in the history of the United States, interest rates go up. The dollars paid by American taxpayers to build roads, educate children, defend the United States are diminished because we have to pay more and more for interest on the money we borrow.

Can we avoid this? Of course, we can. This is a self-imposed problem, a problem that has been imposed by the tea party Republicans on the Congress and on the Nation that is totally unnecessary.

Let me say a word or two about the underlying issue of ObamaCare. It has been a little over 3 years now since we passed ObamaCare. The Supreme Court took up the bill, found it constitutional. It is underway. Certain provisions of this bill are already underway. The goal of it, of course, is to deal with the cost of health care and the availability of health insurance in America. This is important to individuals and families and businesses. It is also important to our government. Sixty percent of our national deficit, 60 percent of our national debt projected for the next 5 or 10 years is associated with the cost of health care.

We buy a lot of health care as a Federal Government: Medicare, for the elderly and disabled; Medicaid for those who are low income; veterans, to make certain we keep our promise to them for good medical care; Indian health care; a variety of others. So as health care costs go up, the costs to the government go up, and they squeeze out all other spending, spending on medical research, education, helping students have the money they need to go to college.

When we talk about the Affordable Care Act and ObamaCare, we are talking about dealing with a health care issue that directly impacts the debt of the United States of America. We passed this bill to try to start to reduce the cost of health insurance and to make health insurance more available.

We changed some critical aspects of health insurance. Does anyone following this debate know of a person with a preexisting condition—somebody in your family who maybe has high blood pressure, high cholesterol, asthma, diabetes, a history of cancer? All of those things can disqualify you—or could before this bill passed—from even having health insurance.

We said: That is the end of it. Health insurance companies have to take everybody—everybody. They cannot exclude a person for a preexisting condition. Take them all. Do not cherry-pick the healthy people. Take them all.

The second thing we said was: Do not put a limit on the amount of money a health insurance policy will pay—for obvious reasons. You go to the doctor tomorrow, some member of your family gets a terrible diagnosis, a need for cancer treatment, and the bills start stacking up. If your health insurance policy has a cap or limit of, say, \$50,000 or \$100,000, when you reach that limit, there goes all of your savings. You are finished.

So we eliminate the limits on coverage in health insurance policies. That is ObamaCare. When the Republicans come to the floor and say: We want to abolish ObamaCare, they are abolishing these protections in health insurance. They are abolishing the provision which says you cannot discriminate because of preexisting conditions. They are abolishing the provision that says there cannot be limits on your coverage. They are abolishing the provision which says 80 percent of the premiums you pay have to be used by the health insurance company to pay for medical care, not for profit-taking, not for advertising but for actual medical care.

There is more. Parents who are raising children going to college—I went through that, my wife and I did with our kids. How many times are you going to ask that young person just graduating from college: Jennifer, do you have your health insurance, have you bought any health insurance, and then have them tell you: Dad, I feel fine.

Let me tell you, as a parent, that is not a good answer. But many students graduating from college who cannot find a full-time job do not have health insurance. The Affordable Care Act, ObamaCare, says families can keep those young people on their own health insurance plan until they reach the age of 26. Across America, over 1 million young people now have protection because of this.

Also, in the Affordable Care Act, we start reducing the out-of-pocket costs of prescription drugs for seniors under Medicare. Medicare prescription Part D is the right thing to do. But there was a so-called doughnut hole, this period where seniors had to pay out of their pockets. We started closing that doughnut hole to make sure seniors did not lose their precious savings to buy the medicine they needed to stay healthy and independent and strong.

So when the Republicans say: We want to abolish ObamaCare and health care reform, they want to abolish this provision that will allow families to continue to cover their young people, their kids until the age of 26, and they want to abolish the provisions which say, basically, that those who are receiving Medicare prescription Part D will pay less out of pocket.

Those are just four or five parts of ObamaCare. The central part of it, which starts October 1—I think this is what makes some politicians on the Hill especially nervous. October 1 they will advertise across America the insurance exchanges. What is an insurance exchange? It is an opportunity for people to buy health insurance.

Many of them have never, ever in their lives been able to shop for health insurance. Now they can. If they are low-income families, they may not have to pay a premium or a reduced premium under these insurance exchanges. Are these insurance exchanges reliable, trustworthy? Can we count on them? We better because we put in the law that Members of Congress now have to buy their insurance on these very same health insurance exchanges. What is good for America should be good for Members of Congress.

In my State, there will be at least a half dozen plans to choose from. In a State such as California, when they announced their exchanges, they announced a reduction in premiums that people had to pay under those exchanges. That is what we are looking for: competition, opportunity. People can make their choice if they wish to go into the exchanges. Members of Congress and our staff people do not have that choice. We are in them. That is fine. I think it is going to be good health insurance. I have no question it will be in my State of Illinois.

But to eliminate ObamaCare is to eliminate these health insurance exchanges, which means a lot of people, desperate for health insurance for the first time in their lives, health insurance they can afford, will not be able to do so.

I do not think the bill we passed, ObamaCare, health care reform, is a perfect bill. There is hardly anything we do that is perfect or even close. I think it could be changed for the better. I am open to that. I hope Members on both sides are. But that is not the way it works here. In the House of Representatives, they voted 41 times—41 times—to destroy and eliminate ObamaCare—41 times.

The Republican leader, Mr. CANTOR of Virginia, offered one change in ObamaCare that he thought made it better. His own party turned on him and said: No, we do not want to improve this bill. We want it to go down in flames. We do not want this law to go forward. It is not a positive view.

A positive view is to take this measure, improve it where we can, and work to make it part of America's future,

such as Social Security, such as Medicare, such as Medicaid. These are programs which are critically important to millions of Americans.

I am sorry we are facing this show-down. But I hope what will happen in the Senate is this: I hope the Senate does not go under cruise control following what we have seen from the House Republican caucus, this notion of doomsday scenarios and high noon scenarios and shutting down the government, shutting down the economy. I hope there will be reasonable, conservative Republicans who will stand and say that is unacceptable. We are going to sit down in good faith, bargain with the Democrats in the Senate, to resolve whatever differences we can but not to damage our government or our economy at this important moment in our history. That kind of courage will be rewarded. It may not be popular with some of the talking heads or screaming heads in these shows on television, but the American people are looking for that kind of leadership on both sides of the aisle.

They do not accept the notion that shutting down the government and shutting down the economy is the best way to solve our political problems. The approval rating of Congress now is about 11 percent. I am surprised many days that it is even that high. I did not know we had so many relatives and people on the payroll—11 percent. We can do better if we face our problems and challenges honestly and deal with them in a way that does not hurt innocent people and families across America.

I yield the floor.

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

[From the Wall Street Journal,
Sept. 19, 2013]

KARL ROVE: THE GOP'S SELF-DEFEATING
'DEFUNDING' STRATEGY

In 2010, Republicans took the House of Representatives by gaining 63 seats. They also picked up six U.S. senators and 675 state legislators, giving them control of more legislative chambers than any time since 1928. The GOP also won 25 of 40 gubernatorial races in 2009 and 2010.

These epic gains happened primarily because independents voted Republican. In 2010, 56% of independents voted for GOP congressional candidates, up from 43% in 2008 and 39% in 2006.

Today, independents look more like Republicans than Democrats, especially when it comes to health care. In a new Crossroads GPS health-care policy survey conducted in 10 states likely to have competitive Senate races and in House districts that lean Republican or are swing seats, 60% of independents oppose President Obama's Affordable Care Act. If this holds through 2014, then Republicans should receive another big boost in the midterms.

There is, however, one issue on which independents disagree with Republicans: using the threat of a government shutdown to defund ObamaCare. By 58% to 30% in the GPS poll, they oppose defunding ObamaCare if that risks even a temporary shutdown.

This may be because it is (understandably) hard to see the endgame of the defund strat-

egy. House Republicans could pass a bill that funds the government while killing all ObamaCare spending. But the Democratic Senate could just amend the measure to restore funding and send it back to the House. What then? Even the defund strategy's authors say they don't want a government shutdown. But their approach means we'll get one.

After all, avoiding a shutdown would require, first, at least five Senate Democrats voting to defund ObamaCare. But not a single Senate Democrat says he'll do that, and there is no prospect of winning one over.

Second, assuming enough Senate Democrats materialize to defund ObamaCare, the measure faces a presidential veto. Republicans would need 54 House Democrats and 21 Senate Democrats to vote to override the president's veto. No sentient being believes that will happen.

So what would the public reaction be to a shutdown? Some observers point to the 1995 shutdown, saying the GOP didn't suffer much in the 1996 election. They are partially correct: Republicans did pick up two Senate seats in 1996. But the GOP also lost three House seats, seven of the 11 gubernatorial races that year, a net of 53 state legislative seats and the White House.

A shutdown now would have much worse fallout than the one in 1995. Back then, seven of the government's 13 appropriations bills had been signed into law, including the two that funded the military. So most of the government was untouched by the shutdown. Many of the unfunded agencies kept operating at a reduced level for the shutdown's three weeks by using funds from past fiscal years.

But this time, no appropriations bills have been signed into law, so no discretionary spending is in place for any part of the federal government. Washington won't be able to pay military families or any other federal employee. While conscientious FBI and Border Patrol agents, prison guards, air-traffic controllers and other federal employees may keep showing up for work, they won't get paychecks, just IOUs.

The only agencies allowed to operate with unsalaried employees will be those that meet one or more of the following legal tests: They must be responding to "imminent" emergencies involving the safety of human life or the protection of property, be funded by mandatory spending (such as Social Security), have funds from prior fiscal years that have already been obligated, or rely on the constitutional power of the president. Figuring out which agencies meet these tests will be tough, but much of the federal government will lack legal authority to function.

But won't voters be swayed by the arguments for defunding? The GPS poll tested the key arguments put forward by advocates of defunding and Mr. Obama's response. Independents went with Mr. Obama's counter-punch 57% to 35%. Voters in Senate battleground states sided with him 59% to 33%. In lean-Republican congressional districts and in swing congressional districts, Mr. Obama won by 56% to 39% and 58% to 33%, respectively. On the other hand, independents support by 51% to 42% delaying ObamaCare's mandate that individuals buy coverage or pay a fine.

The desire to strike at ObamaCare is praiseworthy. But any strategy to repeal, delay or replace the law must have a credible chance of succeeding or affecting broad public opinion positively.

The defunding strategy doesn't. Going down that road would strengthen the president while alienating independents. It is an ill-conceived tactic, and Republicans should reject it.

The PRESIDING OFFICER. The Senator from Georgia.

NATIONAL SUICIDE PREVENTION MONTH

Mr. ISAKSON. Mr. President, September is National Suicide Prevention Month. I think as a member of the Veterans' Committee, as an American, as a Member of the Senate, it is important for us to pause for a minute and recognize some alarming facts about suicide in America among our veterans.

On average, every day, 365 days a year, 22 veterans who have served America take their own life in suicide. That is 8,000 veterans a year, an alarming number that is growing. It is important for us to recognize the need to see to it our veterans have access to those things that can help to prevent suicide and make sure it is minimized and happens as little as possible.

Recent surveys by VSOs—the veterans service organizations—have demonstrated that an alarming number of veterans in America out of our 22 million have actually considered suicide. An even more alarming number actually knows someone who attempted to take their life or, in fact, was successful.

We know there are reasons that reach out and help us, and we know there are reasons that are hurting us. One that is hurting us right now is long lines for veterans in need of mental health. Mental health needs are an emergency. They are time-sensitive. We need to improve our wait times so they are not as long at our VA hospitals.

There is a nationwide shortage, both public and private, of mental health providers. We need to work to improve the number of providers for our entire country. Scarce appointment times for veterans because of their work or family obligations and scarce appointment times because of overworked VA hospitals make it sometimes difficult and protracted for a veteran to receive services.

Most important to me are the gaps in the continuum of service and treatment for a veteran under mental stress and depression. I wish to focus on that for a moment.

Recently I held a VA field hearing in Atlanta, GA, because of the tragedy that took place at the Atlanta VA. We had two suicides of veterans under the care of the hospital and one overdose of drugs while someone was in the hospital and under the care of the hospital.

Those brought about an inspector general's report that made a plethora of recommendations to the Veterans' Administration in Atlanta but also nationwide on things the VA needed to do to address those problems. To the credit of Director Petzel, who is head of all VA medical care, and Eric Shinseki, the Secretary of the Veterans' Administration, the VA has begun taking initiatives to do so. We have to make sure