

both received numerous letters with conflicting information regarding changes to our current policies. We are reasonably intelligent people and yet we cannot figure out what is actually happening with our health care nor do we believe the government has any clue what is happening with this new legislation. Also, in comparing an equivalent Obama care policy to my current policy, I have only 10% of the doctors available in network to what I currently have and of course, my doctors are not in network. Please STOP and REPEAL this ridiculous legislation. I DO NOT SEE ANY EVIDENCE that the government can improve our current health care, only EVIDENCE that it has caused much confusion, created wasted time, wasted money, and driven Americans crazy!

These are two emails sent to me out of many more I could be reading. But it is important for us to understand the impact the Affordable Care Act is having on the American people and the people of my State. In fact, I will share my personal experience from just over the Christmas holidays.

In December, I enrolled through the DC health care plan to buy my health care because all of Congress was moved into the DC health exchange to comply with the ObamaCare legislation. I worked hard to try and match the same care I had before under plan 105 Blue Cross/Blue Shield under the government health care. I couldn't find exactly a good enough match of PPO, but I came close—close in everything except premium. The premium went up 20 percent. And I think most of the American people—certainly people of my age—are realizing the same type of experience where premiums are going up and up.

I would suspect the reason for the Executive order to extend next year's open enrollment date beyond the election is in part because the administration suspects what I suspect; that is, the realities of less enrollment than thought, and fewer young people going into coverage than thought is going to mean higher premiums, less access, and less affordability.

But let me share another story which is really poignant. Fortunately, I was able to help, but when I found out, it broke my heart. It is a story about my grandson Jack and his speech therapist.

Jack is a great kid, a highly intelligent kid, but had some speech problems and so had a special speech therapist named Dr. Tim. Over the Christmas holidays I got to meet Dr. Tim, and we were talking about his job, what he does as a speech therapist, and about Jack and all of his improvements.

Dr. Tim turned to me and said: I don't want to burden you with my personal problems, but my youngest daughter has cystic fibrosis and has had it into her teenage years; and I have had health care coverage up until a week ago, when I was notified my health coverage would no longer pay for the drugs it takes to keep her alive.

For anybody in this Senate or in America who understands cystic fibrosis, it is a terrible debilitating disease

of the lungs and people never used to live to the age of 21. But because of medicine, health care, and breakthroughs in pharmaceutical therapy, people live past the age of 21. In fact, we have a Georgian who lived into his 50s before he passed from cystic fibrosis. But they cannot live if they don't have the pharmaceutical therapy. And there are no substitutes and there are no replacements.

This doctor lost his health care reimbursement for pharmaceuticals for cystic fibrosis in part because of the judgments and the applicability of the Affordable Care Act. To his credit and to the credit of the health care system and the insurance industry, he was able to in part replace it but not nearly as close to what he had on the policy before.

These are just a few stories about Americans who are experiencing terrible problems because of the change in our health care system.

The promises we made are not being kept. The promises that were made to sell the Affordable Care Act to the American people and to the Congress of the United States are not being kept. It is important for us to understand that cannot stand. And if what happens next year happens as I think it will, costs will skyrocket again for the American people, access and affordability will go away or will not be nearly as good as it is, and we will have taken a health care system which was the envy of the world and turned it into a health care system that is the biggest problem in the world.

I want things to work. I want to help the American people. I want them to have access to affordable health care. I want them to have access to their doctors and to be able to keep their policy. We need to work toward that as we go through the tragedies of the implementation in 2014 of the Health Care Act—ObamaCare—which today is America's No. 1 personal problem for the average American citizen.

I am grateful for the time, and I yield back the remainder of my time.

The PRESIDING OFFICER. The Senator from Indiana.

#### HEALTH CARE COSTS

Mr. COATS. Mr. President, I come here to speak about a couple items. We are now in a second-day delay as the majority leader and his caucus decide whether Republicans will be allowed to offer alternatives and to offer amendments to the proposal before us, and that is extension of the Unemployment Insurance Act.

I was one of six who voted for the motion to proceed for the very purpose of achieving the opportunity to offer ideas which I have had and to allow others on our side of the aisle to offer their ideas as to how we can improve this program, and how we ought to address it at this point in our continuing effort to struggle out of the great recession now into its fifth year.

Unemployment is still high in my State—over 7 percent—as a number of States, which is unacceptable, and particularly into the fifth year after a recession. The growth has been so anemic and so tepid, we are sort of staggering our way into a better position.

Nevertheless, while some people are finding jobs and getting back to work, there are many who aren't. That is a serious subject and something we ought to be debating and talking about.

Unemployment insurance is one of the programs which has been proposed to help those in need. There are people who are genuinely in need of that help and have made every possible effort to get back to work and, for many reasons, have not been able to do so. But we also know, and it has been documented, that there are many people who have taken advantage of this program and basically said, I don't have to work hard to get back to work because I am getting enough support from the government.

We have to acknowledge the fact that there are policy issues which have to be discussed as we go forward without automatically extending a program where we know reforms would make the program better and would put us in a better position to help people get back to work and to move our economy.

We also know, working now to just pass a budget for the first time here in several years to work off of, the number we agreed on we wouldn't go over is now being violated. The very first legislative piece which has come before this body violates the budget agreement which was agreed to a short time ago. So a number of us would like the opportunity to propose ways to offset the spending if this program goes forward.

The combination of those two things—reforms which will allow us to continue to support those who are genuinely unable to find work from those who are taking advantage of the program and abuse of the program, as well as suggestions as to how we can support efforts toward more full employment through training programs, through any number of initiatives—my colleagues would like to at least talk about, at least debate, and at least have a vote on. We are in the minority here. We are not sure we are going to win any of those votes. Although I think if we make persuasive enough arguments and it makes enough sense, perhaps we will.

Given this 2-day delay in terms of a decision from majority leader HARRY REID as to whether to allow us these opportunities, it appears that through this tactic of supporting the motion to proceed we have literally put the ball in HARRY REID's office and his caucus court as to what they want to do.

We went through the year 2013, and since July, Republicans have been offered a total of only four amendments to all the things done in the last 6

months of this year. That is not how the Senate is supposed to work. That is a dictatorial dictate by the majority leader, unprecedented in 200 years or more of operation of this Senate.

So we are waiting for that decision, and, obviously, that decision will have a bearing on my position on this particular issue.

I would also comment on the fact that lately we have been hearing a lot from the President about income inequality, and I anticipate we will be hearing a lot more as we move toward the 2014 elections in November. There will be a debate on this, and I hope there will be a debate which allows both sides to look at this in a serious way and try to find ways to address the issue. But if we do that, I think it is important we understand that the President's signature accomplishment, the Affordable Care Act—ObamaCare, as it is called—is contributing to the problem of income inequality. So any debate on that issue, to be factually accurate and to be truthful, needs to incorporate a conversation about the impact of ObamaCare.

As recently as 2012, we were told by the President that the health insurance premiums paid by small businesses and individuals “will go down.” Yet even as the administration recently has admitted that many Americans will pay more for health care because of ObamaCare, this week the latest report on health spending trends from CMS—the Centers for Medicare and Medicaid—disclosed that health care spending in the United States rose 3.7 percent in 2012. That is less than it rose in previous years, and that is a good sign.

Many are saying, well, the reason for this is the Affordable Care Act. Had we not passed the Affordable Care Act, this wouldn't have happened. Apparently, though, they did not read the rest of the report because the report also states that the provisions in the Affordable Care Act had minimal impact on total national health care spending. So while the administration may claim that their bill, ObamaCare, is lowering overall health care spending, the report says it has only had a minimal impact.

What is happening is that there are reforms being made through the private sector, through the providers, in terms of more efficient, more effective ways to deliver health care. That is not operating because of the health care act. In fact, the health care act, if we are truthful about it, is contributing to the problem of inequality.

Many Americans are experiencing, despite what the President has said, higher premiums or paying outrageous deductibles when they purchase coverage through the ObamaCare exchanges. Let's bring this down to a personal level because I have been receiving hundreds, actually thousands of emails, phone calls, letters, comments that I hear back home from Hoosiers who basically say: This ain't working. It is sure not working for me.

But I want to bring it down to the personal level so we can understand what individual families are going through at this particular time with this mandate imposed upon them relative to their health care coverage.

Thomas from Indianapolis wrote to me and said he went on the ObamaCare exchange to take a look at health insurance plans that would be available to him and he was, as he said, “shocked to find that it was at least \$200 a month.” That is \$2,400 a year more than he had been quoted just a few months before from a broker. He added, “I have thought about just going without insurance”—as we know many individuals are thinking about and have decided not to sign up for this program. Of course, the program is built financially on the fact that millions will sign up and that is not happening. I predict that is going to break the back of the program. He added:

I have thought about going without insurance, but my family suggested that I not do that. The Affordable Care Act has created a terrible quandary for me. At this point I feel as if the Federal Government is like a mean Big Brother, making my life miserable.

William from Granger, IN, emailed me to tell me his wife, who works as a part-time nurse, now is no longer offered health care because she is part time. So William then decided, OK, I will have to go into the exchange and find insurance for my wife and my family and discovered that their premiums will rise to \$19,076 a year. He goes on to say, “So much for ‘if you like your plan, if you like your doctor . . . your costs will go down by \$2,500.’”

Let me repeat that. The President has said your costs are going to go down by an average of \$2,500 a year. William's costs increased over \$7,500 a year. That is a \$10,500 swing. That is not what was promised.

Brandy from Cambridge City, IN, told me:

I have been offered insurance through work at a cost of \$318 or \$80 a week. I then checked HealthCare.Gov and have been given a quote of \$450 a month. I work a minimum wage job and work as many hours as I can to get by as it is. After taxes and child support, neither option is an option that I can afford.

He also cannot even afford to pay the penalty of the payment.

These are just a few of the hundreds, if not thousands, of Hoosier comments I have heard from people who are experiencing sticker shock when they search for so-called affordable care under ObamaCare. I don't know if these people are Republicans or Democrats, conservatives, moderates, liberals, nonvoters or voters. These are just human beings who live in my State, regardless of their political affiliation, who are basically saying this thing is killing us. All these examples, multiplied by hundreds if not thousands, are contributing to the inequality the President is talking about.

The inescapable truth is that the Democrats forced an unwanted, unpopular, and unread—the famous quote from then House Speaker NANCY

PELOSI—“We have to pass the bill so we can find out what is in it”—and we are finding out about what is in it—an unwanted, unpopular, and unread 2000-plus page, one-size-fits-all health care bill, dictated by one party without any support from the minority.

I am questioning whether this is the best way to deal with health care issues. Jamming this thing through on Christmas Eve day in 2009 has turned out to be a disastrous Christmas gift for the American people. Families across our country who are being forced to redirect money they would have used to pay rent, to help their children attend school, to put food on the table, to pay the electric bills, are finding many cannot even do that.

As we discuss the issue of income inequality, and it appears the President is going to want to do that throughout this coming election year, let's not pretend that ObamaCare is helping the situation. It is not. We need to face up to the fact that the Affordable Care Act—I bet the writers of this bill, if they could do it over again, wish they had not used the word “affordable.” They could call it the health care act or health care act for American people or whatever. If they went back and rewrote it, I bet you they would drop the word “affordable,” based on the facts, not the perception, the fact of what this health care bill is.

I suspect they would have wanted to pass this in a bipartisan way so that at this point in time they would not have to take full responsibility for this act. Too many hard-working American families are paying more, not less, for health care because of ObamaCare, and it is contributing to the inequality the President continues to talk about.

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

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

#### UNEMPLOYMENT BENEFITS

Mr. CORNYN. Mr. President, over the last few days our friends across the aisle have been telling the American people that we have a choice when it comes to the extension of long-term unemployment benefits. On one hand, they are saying we can do exactly what the President, Senator REID, and his allies want, which is to extend benefits for 3 months at a cost of \$6.5 billion that we will have to borrow from somebody or we will do nothing at all.

Well, I am here to suggest that is a false choice, as President Obama likes to say from time to time. We can do better than that. As a matter of fact, several of my Republican colleagues have offered their suggestions. I have in my hand a list of 23 amendments that would deal with everything from improving access to workforce training to finding a way to pay for this money that would otherwise have to be borrowed from the Chinese or other creditors of the United States and added to our \$17.3 trillion debt.