

not to make it more expensive and say if you don't buy the government-approved care—even if you don't want what it provides—then we are going to coerce you to do it. We are going to penalize you for it. This is bad for America and hurts people instead of giving them the helping hand they need when it comes to health care.

We are going to have a lot more to say about how we need to repeal and replace ObamaCare with more affordable health insurance that gives people access to the doctors and services they want and need. But on the present bill, no one denies the need for a long-term permanent solution to the way we pay health care providers under Medicare. So for the benefit of physicians, our seniors, and the American people, we need to do this, but we also need to find a way to pay for it.

I am hoping we pass this legislation today. I believe the current provision expires at midnight tonight. It is important that we stop kicking the can down the road and we allow our family doctors to do what we want them to do most, which is to focus on what they do best and what our families need the most. At the same time, it will ensure seniors access to the care they need. Such a meaningful solution is long overdue.

Mr. President, I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

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 President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER (Mr. LANKFORD). Without objection, it is so ordered.

The Senator from Michigan.

#### LYNCH NOMINATION

Ms. STABENOW. Mr. President, I think the American people deserve to see the contrast between how nominees were treated in the last decade, during the Bush administration, versus how they are treated in this decade, during the Obama administration.

When former President Bush nominated John Ashcroft to be U.S. Attorney General, it was controversial. I was one of 42 Democrats who opposed the nomination. Yet it only took 42 days for John Ashcroft to get a vote on confirming his appointment because neither I nor other Democrats stood in the way and blocked actually having a vote.

Now, I agree that was a different time, where filibusters were not used every single day on every single issue, unfortunately. But I remember that at that time our Republican colleagues came to the floor and said: Elections have consequences. When a President is elected, he or she has the opportunity to put forward their nominees and have a vote. Day after day people came to the floor and said: Just let us vote.

Just let us vote. And we did let the vote happen.

As of today, President Obama's nominee for Attorney General, Loretta Lynch, has waited 157 days and counting, and we intend to count the days. In fact, since the Judiciary Committee reported Loretta Lynch's nomination out of committee, she has now waited longer for a vote on the Senate floor than the last seven attorneys general combined—seven attorneys general combined. She has waited longer than seven attorneys general combined.

The U.S. Senate has the constitutional responsibility to provide advice and consent to the President as it relates to his appointments. That is a serious responsibility and we are not asking that someone vote yes if they want to vote no. They have a right to vote no. We have had enough Members now come forward that it is clear she actually has the votes. We have had enough Members indicate they would support her that we know we could get a vote on the floor and that she would, in fact, be confirmed as the Attorney General. But everyone has the right to state their piece, to vote as their conscience would have them vote. Unfortunately, our Republican colleagues have so far withheld the respect given to other Presidents—to President Bush. They have withheld that from this President.

If this is frustrating to me, I can only imagine how frustrating it is to Loretta Lynch, who I know is eager to get on with the work of our Nation's top law enforcement official. I had the opportunity to meet with Ms. Lynch in early December. She impressed me with her passion for upholding the rule of law and her belief that law enforcement could be a partner in building stronger and more cohesive communities. I talked to her about how the Justice Department could play a role in supporting ethnic diversity in communities such as Detroit and Flint and other communities across Michigan.

Loretta Lynch understands the devastating effect racial profiling has had on the relationship between the police and the public, which is why I am pleased to learn of her support for police body cameras and so many other policies that would help in that regard. In addition, she understands the threat posed by those who would intimidate Americans from participating in elections.

I regret Loretta Lynch has not yet been granted the opportunity to play her role in promoting access to the polls and preventing groups from being disenfranchised. I regret our FBI, with all it must do for the safety and security of Americans, does not have a permanent Attorney General to direct it. I regret there is not a permanent Attorney General to advise prosecutors about actions to take against banks that commit fraud against homeowners. I regret our Republican colleagues are continuing to perform the same stunts in the majority as they did

in the minority: to govern by holding government functions hostage.

Those who oppose the nomination have every right to vote no, every right to fight to defeat this nomination, but if they continue to refuse to give the advice and counsel and perform the duty they are sworn to uphold under the Constitution and continue to block a simple vote on a nomination from the President of the United States for Attorney General of this country, they are doing a disservice, I believe, to our country.

We have heard so often from people they are so tired of Congress obstructing and not acting. I would urge colleagues to get on about the business of a nomination that has been held on this floor for too long—too long—and 157 days is too long. It does a disservice to all of us to see this continue. We need Loretta Lynch as our Attorney General.

We have a lot of business to conduct in the Senate and a lot of very important topics coming up. We need to get about the business of allowing this vote. However it goes is how it goes. We have indicated, we have the votes if we are allowed to vote, but everyone has a right to express themselves. Let us put in place a competent, strong Attorney General for the country and then move on to other serious issues that we have to address in the Senate. It is time to vote.

Mr. President, I yield the floor.

The PRESIDING OFFICER. The Senator from Alabama.

#### SGR LEGISLATION

Mr. SESSIONS. Mr. President, I have been a strong advocate and a believer that it is time for us to fix the physicians' payment method for Medicare and Medicaid—for the providing of health care by doctors—and put it on a permanent basis right now.

We have 17 times passed last-minute legislation to avoid what now would be a 21-percent cut in doctors' reimbursement rates for doing Medicare work. That is not acceptable. We need to end that. They do not need to be worried every year whether or not Congress is going to cut their pay. In fact, they cannot do the work with a 20-percent cut. They will not do it, they can't do it financially, and it would be devastating to Medicare. I believe that, and I think all of us believe in that.

The 17 different times when this issue has come up since 2003 we have paid for it. Republicans in particular have insisted that we will find the money through some sort of other reduction in government spending and move that over to pay for this critical need, without which Medicare would collapse.

I thought now that we want to do it permanently, it should be done in a way that is financially sound and does not add to the debt and has good policy in it.

Some of my colleagues have already talked about the policy that would be

in this legislation. I am not prepared to be a big critic of that. I am sure it could be done in different ways. My focus right now is just based on my experience from the Committee on the Budget and the spending we are doing in Congress to try to get the thing done right. It must be paid for.

The bill to be advanced today contains over 250 pages. It was rushed through the House of Representatives with the promises that “it pays for all new future spending” and “it offsets all new spending.” Well, both of those statements are not true. That is just not true. The bill is not paid for and it does not offset the new spending.

Because of a desire to get this fixed, an attempt was made by the House so the Senate, on the night we completed work on the budget at 3 a.m. before recess, would pass this bill without even having a good official score—at least not one we were able to examine over a period of time—and without any knowledge of what was in the bill. Senator MCCONNELL and Members of the Congress said: No, we are not going to rush this through—\$200-something billion in expenditures over 10 years—at 3 a.m. in the morning with nobody having had a chance to look at it.

We had some 700 amendments filed to the Budget Act so we didn’t pass it that night. It has been moved forward now, and we have a deadline tonight. Presumably, if we don’t fix something tonight, physicians will begin to see cuts in their pay. Of course, too often that is what happens around here. Too often a bill that is not sound financially is moved at the very last minute and Members are told: If you don’t pass it now, then something bad is going to happen. In this case, doctors, whom we respect and admire and need, are not going to be able to get the pay they deserve and have been receiving, and they are going to be hurt by these cuts.

Well, there are opportunities to extend this. We could pass legislation this afternoon, tonight, that would extend this for a period of time, if need be, but the reason we are at the end, the last minute, is because it was designed that way.

Only days after passing the Senate budget, that we were proud to see balanced with a \$3 billion surplus, we are talking about passing new legislation that would add \$174 billion to the debt over the next 10 years. Another estimate shows that over 20 years it is a \$500 billion addition to the debt of the United States—one-half of a trillion dollars.

The bill violates the Budget Act. The Budget Control Act, which we passed in 2011, set a limit on how much spending could occur. There may be as many as eight—let me repeat, eight—violations of budget rules that are involved in this legislation. The Committee on the Budget is looking at this, and these are the numbers it may violate.

One, it likely violates section 302(f) of the Congressional Budget Act by spending in excess of the budget alloca-

tion of the Committee on Finance for the next fiscal year, over the next 5 years, and over the next 10 years.

Two, it may violate section 311(a)(2)(A) of the Congressional Budget Act by spending \$7.4 billion in excess of the aggregate spending top line agreed to for fiscal year 2015—this year we are in.

Three, it likely violates the Senate pay-go rules. The bill increases the on-budget deficit by \$74 billion over both the 5- and 10-year budget periods, thus exceeding the balance on the Senate pay-go scorecard.

Four, H.R. 2 increases short-term deficits. Over the 10-year budget window it would increase deficits by \$141 billion.

Now, \$141 billion and \$174 billion, what is the difference? Well, when you spend \$141 billion more than you are supposed to over 10 years, financed by deficit spending, all of that money, every penny of it, is borrowed in order to be spent, which means you have to pay interest on the money you borrow. So it is not \$141 billion, it is \$174 billion. That includes the interest on the \$141 billion over 10 years that has been accumulated and will continue to accumulate in the next decade and the decade after that.

Five, the bill increases long-term deficits.

Six, it may violate section 306 of the Congressional Budget Act by including language that falls within the jurisdiction of the Committee on the Budget that has not been reported or discharged from the Committee on the Budget.

Seven, it likely violates section 303(a) of the Budget Act by creating new spending in a fiscal year without a budget resolution.

Eight, it may violate section 401 of the Budget Act by creating new entitlement spending during the fiscal year.

We tried to contain ourselves, and one of the things we rightly did was to create a budget violation aimed to prevent the creation of new entitlement programs during the current fiscal year.

So these are not technical violations, as it might appear to some. They are mechanisms by which the crafters of the Budget Act deliberately tried to contain the Senate from figuring out ways to gimmick and get around spending limits. They created all these steps, each one based on history, for the most part in order to stop abuses. So it violates these provisions because it spends more money than we are supposed to be able to spend and more than what we agreed to spend.

So H.R. 2 increases long-term deficits. According to the nonpartisan Congressional Budget Office’s letter to Speaker BOEHNER, enacting this bill in its current form would increase the Nation’s long-term deficits. Long-term deficits are those deficits created after the first 10 years of the current budget window.

A lot of times they will write a bill so it looks as if it is OK for 10 years, knowing that in the future it will add to the debt. But nobody cares about that. So we made a budget point of order to try to identify long-term abuses—a good provision, I submit.

About a month or so ago we had before the Budget Committee, a professor from Boston University, I believe, who talked about the real threat to America’s financial condition. He said that we are on an unsustainable path, that we cannot continue on this path, and that it will result in financial dislocation and damage to America. And the most important thing to consider is this: What will a piece of legislation do to the long-term liabilities of the United States? Does it add to our unfunded liabilities or not? We need to be reducing our unfunded liabilities because they are so great—hundreds of trillions of dollars—and those unfunded liabilities financially threaten the very future of America.

This adds to that. We need to be figuring out ways to reduce the unfunded liabilities. I thought that is what our goal was. That is why we passed a budget that balances.

According to the Congressional Budget Office’s analysis, “taken as a whole, H.R. 2 would raise federal costs relative to current law in the second decade after enactment.”

In other words, it increases the deficit in the second decade. Some have tried to argue that in the second decade there is extra money coming in, in some way, and it will all be paid for—not so.

So let me explain. In its report to Speaker BOEHNER, the report that was used by the House as it proceeded to vote on this bill, the Congressional Budget Office indicated that not only would H.R. 2 increase short-term deficits by \$141 billion over the next 10 years but it would also increase long-term deficits over both, the first and second 10-year windows. The Committee for a Responsible Federal Budget estimates that this legislation would add a half trillion dollars to the debt in the next 20 years.

Half a trillion is real money—\$500 billion. We are struggling right now to figure out how we can permanently fix our highway bill so we have a long-term highway bill that is paid for. We need about \$10 billion, \$15 billion a year to achieve that. We are seeing a reduction in gasoline revenues. Congress wants to spend more than that, and we are looking for that money. This is over \$500 billion over 20 years, and \$174 billion over 10. These are huge sums of money.

The Federal highway bill is now under \$50 billion a year. Federal aid to education is about \$100 billion a year. This is just indicative of how much we are overspending.

The Office of the Actuary at CMS—the chief financial officer at the Centers for Medicare and Medicaid Services—is responsible for conducting and

directing the actuarial program for CMS and directing the development and analysis of health care financing issues.

On April 9, Mr. Spitalnic released a review of the estimated financial effects of this legislation. Analysis conducted by the Heritage Foundation actuaries indicates that the drafters of the bill actually double-counted funds. While the bill anticipates higher premiums for Medicare Parts B and D and cuts to Medicare Part A, those savings would be \$55 billion and \$32 billion, respectively.

Medicare Part A is the trust fund American working people's money goes into off their paychecks every week. So most Americans believe they pay for Medicare. And they do, for the most part, although we are now taking in less money than is going out to a significant degree.

So what did this bill do? This bill cuts the expenditures for Medicare Part A, the trust fund part, and it claims that money—\$32 billion and \$55 billion, respectively—is now available to spend on the physicians to pay for their fix. But the physicians' Medicare part—when you go to a doctor and Medicare pays for that—that is not trust fund money. That is general revenue Treasury money.

So what has happened? They are cutting the reimbursements of hospitals and doctors. They claim it won't affect the benefits accrued to people who need health care, but it probably will. To cut the cost of providers of health care services, in effect, reduces the benefits that actually go to the patient.

So how does that money get from the trustees of Medicare—who are supposed to manage this program and take the money in that comes off our paychecks and goes to Medicare—to paying for something outside of Medicare Part A?

They take an oath to be responsible and faithful to the trust as trustees of Medicare. They don't give it to the U.S. Treasury. They loan it. There is a debt instrument. The money is loaned to them and the Federal Government pays interest. That is where we get the 30-some odd billion dollars in interest over 10 years—part of it.

The money that is being used to fund the portion that they claim is actually paid for I say is not paid for. The Congressional Budget Office has told us this technique is double counting. The money cannot be used to benefit Medicare and, at the same time, fund a new expenditure. We really have to watch this. It is something I have come to realize is one of the biggest gimmicks the Senate uses.

When ObamaCare was passed—on December 23, the night before it passed, we got a letter from the Congressional Budget Office at my request. I read it on the floor on December 24, the day the bill passed. It said, I think, there was \$400 billion, \$500 billion in double-counted money they said was available to fund the Affordable Care Act.

Colleagues, we have got to be careful. A country goes broke by managing money this way—huge sums of money.

Beyond this gimmick, CMS Actuary Spitalnic goes on to say that H.R. 2 raises "important long-range concerns that would almost certainly need to be addressed by future legislation."

When the bill's 5 percent annual bonuses in physician payments expire as scheduled in 2024—9 years from today—a major payment cut from most physicians would follow the next year, according to his report. The payment structure would also be troublesome in years with high inflation. So, in essence, by 2024, another round of doc fixes would be needed. In other words, not only does this bill add massively to the debt and engage in—I hate to say this—improper accounting, but it also fails to even provide the long-term solution it promises. It promises we are going to have a permanent fix of the payments of physicians. But this bill is not a permanent fix, and within 9 years we are going to be back in a situation that is unacceptable and has to be dealt with again by spending more money. By making these cuts in the outyears, the real costs are hidden.

We have a proposal that provides increases for doctors for the next 9 years and then begins to show reductions, and it claims, somehow, that this is going to pay for it. But Congress is not going to allow those reductions to take place either, because we are not going to be cutting doctors 5 percent a year for any 1 year, most likely.

It is not too late to make things right. The bill needs to go through regular order. It hasn't gone through our committee in the Senate. The House said the bill was going through the regular order. It hasn't gone through the regular order. It hasn't been through a committee where members have the chance to offer amendments. It is coming up on the floor. We are hardly having any amendments. I understand maybe we will have three amendments on each side. That is a pretty minuscule discussion when it supposedly has to be passed in a day. So the discussions will take place at midnight tonight.

Colleagues, we have to understand the importance of what we are doing. This legislation adds almost \$200 billion to the debt in the next 10 years. It breaks our past commitment and the precedent we have established to pay for these doc fixes. In fact, I have been most insistent that before we put the extra money for the physicians, we find a pay-for—some responsible reduction in spending elsewhere—so we can set priorities and pay for the doctors. This is substantially abandoned in this legislation. I think it disregards Congress's commitment to honest accounting, the principles that we have established about how to accurately calculate the cost of legislation. It breaks the budget we had agreed to in 2011—the spending reductions in the Budget Control Act—and it violates

the budget the Senate just passed a couple of weeks ago.

We need to think this through. I hate to object because I truly believe we need to take care of physicians' payments. It is absolutely wrong, and Congress has been negligent in failing to address this for years. It has been over a decade that we haven't dealt responsibly with this.

So I salute the House colleagues for saying we are going to develop a bill that fixes this over time. Unfortunately, it is not a permanent fix, as I originally thought it would be, but, it is also not a responsible fix, a grownup fix. The kind of action for which the American people depend on Congress, and hope to see, is not occurring because this bill adds to the debt.

We want to do something. We want to fix the doctors' problem, but we don't want to cut spending anywhere else.

Faced with that difficult choice, this legislation—at least to a two-thirds degree—does what we too often do: We just spend the money, commit to spending the money, and then add it to our credit card. We add it to the debt that is \$18 trillion now and growing dramatically, producing for us an annual interest payment of \$220 billion and putting us on a path—according to the Congressional Budget Office—of an almost \$900 billion interest payment in 10 years. I believe that is not good management of the people's business.

I appreciate the opportunity to share these grim remarks and to lament the difficult situation in which we find ourselves. I do believe the Lee amendment will fix this. Maybe other amendments will, too. But we certainly need to step forward and make sure we don't continue down this path.

I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

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

The PRESIDING OFFICER (Ms. AYOTTE). Without objection, it is so ordered.

Mr. WYDEN. Madam President, I ask unanimous consent to speak in morning business for up to 15 minutes.

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

#### MEDICARE ACCESS AND CHIP REAUTHORIZATION ACT

Mr. WYDEN. Madam President, it is my hope that soon the Senate will be about to start voting on legislation that in one fell swoop will improve health care for millions of Americans. This discussion should start with a Medicare milestone. That milestone is abolishing once and for all the outdated, inefficiency-rewarding, commonsense-defying system of paying physicians under the Medicare Program.