

appropriations process has not worked that way for a while. Too often, over the past few years, the majority of the year's appropriations bills have been thrown together in one catchall funding bill, greatly reducing Senators' ability to take a hard look at spending and to ensure that funds are being allocated responsibly.

Republicans are determined to change that. We started the appropriations process by passing a balanced budget resolution for the first time in over 10 years. This week, we continue the process with the National Defense Authorization Act, which authorizes funding for our Nation's defense and our men and women in uniform. This authorization bill is the first step in the appropriations process for defense funding under what we call regular order.

This legislation accomplishes a number of important things. It authorizes funding for our military at the President's requested level of \$612 billion. It also eliminates waste and inefficiencies. Specifically, the bill targets \$10 billion in wasteful and unnecessary spending and redirects those funds to military priorities such as funding for aircraft and weapons systems and modernization of Navy vessels.

The bill also focuses heavily on reform. The military's current process for acquiring new equipment and technologies is inefficient and bureaucratic. It wastes our Nation's resources and, even more importantly, it reduces our military readiness by delaying the acquisition of essential weapons, equipment, and technology. The National Defense Authorization Act introduces broad reforms to modernize and streamline the acquisitions process, which will significantly improve the military's ability to access technology and equipment when it needs it.

The act also implements a number of reforms to the Pentagon's administrative functions. Over the past few years, Army Headquarters staff has increased while combat personnel have been cut. Army Headquarters staff increased 60 percent over the past decade, yet the Army is currently cutting brigade combat teams.

From 2001 to 2012, the Department of Defense's civilian workforce grew at five times the rate of Active-Duty military. Prioritizing bureaucracy at the expense of our preparedness and our Active-Duty military is not an acceptable use of resources.

The Defense authorization bill that we are considering changes the emphasis at the Department of Defense from administration to operations, which will help ensure that our military personnel receive the training they need and that our military is ready to meet any threats that arise. Finally, this bill overhauls our military retirement system. The current military retirement system limits retirement benefits to soldiers who served for 20 years or more, which eliminates 83 percent of those who have served, including many

veterans of the wars in Iraq and Afghanistan.

The National Defense Authorization Act replaces this system with a modern retirement system that would extend retirement benefits to 75 percent of our servicemembers. The bill before us today is a strong bill. It is the product of bipartisan efforts. It authorizes funding for our troops at the level requested by the President and provides key reforms that will strengthen our Nation's defense and improve training benefits and quality of life for our servicemembers.

Supporting this legislation should be a no-brainer. Incredibly, however, the President has threatened to veto this important legislation. His reason is that the President does not want our military to receive the increased levels of funding proscribed in this bill unless the President's nondefense funding priorities receive an increased level of funding.

That is right. Apparently, President Obama is willing to hold up funding for our Nation's military until Congress provides more funding for agencies such as the IRS and the EPA. Well, the President can certainly make his case to Congress when it comes to funding government agencies. Holding troop funding hostage for political purposes is reckless and irresponsible. If that were not enough, the White House is busy lobbying Senate Democrats to abandon bipartisan efforts that went into this bill and back up a Presidential veto.

The National Defense Authorization Act plays a key role in keeping our Nation safe. The President's attempt to hijack this bill for his political purposes is wrong. I very much hope that he will consider the implications of what he is doing and rethink that threat.

#### OBAMACARE

Mr. THUNE. Mr. President, before I close, I want to take just a few minutes and discuss the President's health care law. The President made some comments yesterday on the upcoming Supreme Court ObamaCare decision. Referring to his health care law, the President said:

What's more, the thing's working. Part of what's bizarre about this whole thing is we haven't had a lot of conversations about the horrors of ObamaCare because it hasn't come to pass.

That was from the President yesterday. Let me just repeat and put that into context. The President of the United States thinks that ObamaCare is working and that negative predictions about the law have not come to pass. Well, to respond to that, let me just read a few headlines from the past couple of weeks. This from CNN: "Obamacare sticker shock: Big rate hikes proposed for 2016." From the Associated Press: "Many health insurers go big with initial 2016 rate requests." From The Hill: "Overhead costs explod-

ing under ObamaCare, study finds." From the Associated Press again: "8 Minnesota health plans propose big premium hikes for 2016." From the Lexington Herald-Leader: "Most health insurance rates expected to rise next year in Kentucky."

I could go on. The truth is that not only is ObamaCare not working, but it is rapidly unraveling. A May 1 headline from the Washington Post reported: "Almost half of Obamacare exchanges face financial struggles in the future."

Hawaii's exchange has already failed. California's exchange is struggling to sign up consumers. One-third of the consumers who purchased insurance on the California exchange in 2014 declined to reenroll in 2015. The Massachusetts exchange is being investigated by the Federal Government.

Colorado's exchange is struggling financially and has raised fees for consumer insurance plans. Rhode Island's Governor is pushing for new fees on insurance plans to help fund the \$30.9 million operating cost of the Rhode Island exchange. Now, incidentally, that is \$30.9 million to run an exchange that serves just 30,000 people.

The Minnesota exchange was supposed to cover more than 150,000 individuals in its small business marketplace by 2016. So far, it is covering 1,405 individuals, or approximately 1 percent of the number it is intended to cover. The Minnesota exchange has cost Federal taxpayers \$189 million so far—\$189 million for an exchange that provides coverage for just 61,000 people.

A recent Forbes article notes that Vermont's exchange "will need \$51 million a year to provide insurance to fewer than 32,000 enrollees—or \$1,613 per enrollee in overhead. Before ObamaCare, \$1,600 would have been enough to pay for the entire annual premium for some individual insurance plans."

While the ObamaCare exchanges unravel, health insurance costs on the exchanges are soaring. Insurers have requested double-digit premium increases on 676 individual and small group plans for 2016. More than 6 million people are enrolled in plans facing average rate increases of 10 percent or more. Around the country, rate increases of 20, 30, 40, and even 50 percent are common.

One health care plan in Arizona is seeking a rate increase of 78.9 percent—so much for the President's promise that his health care plan would "bring down the cost of health care for millions". In my home State of South Dakota, proposed rate increases range up to 44.4 percent. That is not something South Dakota families can afford.

The discussion about ObamaCare's success or failure is no longer theoretical. The evidence is in, and it shows the President's health care law is broken. It is time to repeal ObamaCare and to replace it with real health care reforms that will actually drive down costs. Five years under ObamaCare is long enough for American families.

## EPA RULE AND BIG STONE PLANT

Mr. THUNE. Mr. President, I wish to speak about the President's misguided plan to reduce carbon emissions from existing powerplants, specifically the impact it is going to have on my home State, South Dakota.

Over the last year, EPA has claimed its rule will grant States flexibility to meet burdensome emission reduction targets. However, there is really only one way for South Dakota to meet its staggering target of a 35-percent reduction; that is, by effectively shutting down Big Stone Plant, our only base-load coal-fired plant, which will soon be among the cleanest in the country.

The plant, which provides affordable power to thousands in South Dakota and neighboring States, is nearing completion of a \$384 million environmental upgrade project to meet the EPA's regional haze and Utility MACT regulations. So as you can see, highlighted on this poster by a Watertown public opinion op-ed headline, the clean powerplant would threaten this significant investment.

The EPA has required this nearly \$400 million upgrade—which is more than the original cost, the entire original cost of the plant itself—and is now turning around and saying: That is not enough. We want it shut down.

Let me repeat that. The EPA has required a \$384 million environmental upgrade to make the plant among the cleanest in the country and now wants to put all that to waste. This isn't right, and this will stick South Dakotans with holding the bill.

When the Obama EPA pushes new regulations to attack affordable and reliable coal generation, it is low-income families who take the biggest hit. South Dakotans have already seen their electricity rates increased to pay for that \$384 million add-on, but the Clean Power Plan will limit the ability for this investment to be recouped, and now they will be charged even more.

This is because the Clean Power Plan would require Big Stone Plant to run less, even on a limited or seasonal basis, not at the high capacity for which it was designed and is most efficient. At the same time, the Clean Power Plan would require the plant to run more efficiently to meet strict emission requirements. So, again, we have had this nearly \$400 million investment to make the plant cleaner and more efficient in order to satisfy the EPA, and now the Obama EPA wants to shut it down.

The Obama EPA should not push regulations that result in higher utility costs for consumers, less grid reliability, and fewer jobs. Affordable and reliable energy helps grow the economy and helps low- and middle-income families make ends meet.

Unfortunately, the EPA's rule will only increase electrical rates and hurt those who can afford it the least by forcing our most affordable energy sources offline.

I urge my colleagues to join me in opposing this burdensome rule and to

prevent the serious economic burden it will impose on middle-income families in this country.

I yield the floor.

The PRESIDING OFFICER. The Senator from Wyoming.

## OBAMACARE

Mr. BARRASSO. Mr. President, this morning President Obama will be speaking at a meeting of the Catholic Health Association of the United States.

Now, the White House says the President will talk about his health care law. The President has already been spending a lot of time talking about the law. At the G7 summit in Germany this past weekend, the President was asked about the law and what he said is: "The thing is working."

He said: "We haven't had a conversation about the horrors of ObamaCare because none of them have come to pass."

The President must be kidding himself.

This morning, when he talks to this Catholic health care group, President Obama should stop his denial and he should confess the truth. If he gives another rosy speech about the impact of this terrible law, he will be, once again, intentionally and deliberately misleading the people in his audience.

The President should not stand on the stage today and pretend his law is helping more people than it hurts. He should not stand on that stage today and pretend he hasn't heard that his law is causing premiums to skyrocket. He should not stand on that stage today and pretend he has kept his promises about this law. He should not stand on that stage today without admitting his law has cut into the take-home pay of millions of hard-working Americans.

What the President should do is talk about how his health care law has hurt nonprofit hospitals like the Catholic hospitals across the country. That was the subject of a Wall Street Journal article just last Wednesday with the headline: "Hospitals Expected More of a Boost From Health Law."

Now, remember, President Obama said his health care law was going to help hospitals. He said it would help hospitals because uninsured people wouldn't be coming into the emergency room needing free care anymore.

Well, that hasn't happened. Even more people are going to the emergency room today. According to the Wall Street Journal, nonprofit hospitals have seen a huge increase in Medicaid patients—and Medicaid pays only about half of the cost of caring for patients.

The article gives an example of a group of nonprofit hospitals near St. Louis. It has lost about \$5 million as a result of President Obama's Medicaid expansion. That is a big hit for a nonprofit hospital to take. It directly affects hospitals' ability to continue providing high-quality care.

If President Obama is honest today, I would say he needs to explain to this Catholic health care group why his health care law has not lived up to expectations. Is he going to explain why his law is hurting their ability to provide care? It is not only hospitals that are being hurt by ObamaCare, millions of people across the country are seeing the news that their insurance premiums might soar by 20 percent, 30 percent or even more next year.

In North Carolina, Blue Cross Blue Shield says it needs to raise premiums by 26 percent. In Minnesota, Blue Cross wants to raise rates by 54 percent. President Obama spent part of his childhood in Hawaii. One insurance company there is planning to raise premiums by 49 percent.

Will the President explain to this group today why premiums are skyrocketing?

I will tell you why they are skyrocketing. It is because of the cost of all the Washington-mandated services that came from ObamaCare. Another reason costs are going up is all the bureaucracy that came with the health care law.

There was an article in The Hill newspaper May 27 with the headline: "Overhead costs exploding under ObamaCare, study finds."

The article says:

Five years after the passage of ObamaCare, there is one expense that's still causing sticker shock across the health care industry: overhead costs.

It continues:

The administrative costs for healthcare plans are expected to explode by more than a quarter trillion dollars over the next decade, according to a new study.

This is \$270 billion "over and above what would have been expected had the health care law not been enacted."

That is what this study found.

Under the health care law, Washington has been spending billions of taxpayer dollars on health care: \$1 out of every \$4 is going to overhead—not to treat sick or injured people, not to help or prevent disease, no, to overhead. It is the President's law. It is incredible. This money isn't being used to help one sick child, to provide medicine for a single individual, it is overhead.

As one of the study's authors put it, the money "is just going to bureaucracy." According to this study, this works out to \$1,375 per newly insured person per year under Obama's health care law. Now, of course, people's premiums are going through the roof. The health care law created or raised 20 different taxes.

Maybe President Obama today should explain why \$1 out of every \$4 that Washington spends on health care should go to bureaucracy instead of caring for patients. The President's health care law is hurting hard-working American families who are going to have to pay premiums of 40 to 50 percent more next year. It is hurting the hospitals that are supposed to provide