

you're waiting for Mitch McConnell to roll in a wheelbarrow with a 2,700-page Republican comprehensive bill, it's not going to happen because we have come to the conclusion Congress doesn't do comprehensive well.' We have watched the comprehensive economy-wide, cap and trade; we have watched the comprehensive immigration bill, we have the best Senators we have got working on that in a bipartisan way; we have watched the comprehensive health care bill. And they fall of their own weight.

"Our country is too big, too complicated, too decentralized for Washington to write a few rules about remaking 17 percent of the economy all at once. That sort of thinking works in a classroom, but it doesn't work very well in our big, complicated country. It doesn't work for most of us and if you look around the table—and I'm sure it's true on the Democratic side—we have got shoe store owners and small business people and former county judges and we've got three doctors. We've got people who are used to solving problems, step by step.

"That's why we said 'step by step' 173 times on the Senate floor in the last six months of last year in support of our step-by-step plan for reducing health care costs. I would like to just mention those in a sentence or two:

First, you mentioned Mike Enzi's work on the small business health care plan. That's a good start. It came up in the Senate. He will explain why it covers more people, costs less, and helps small businesses offer insurance.

Two, helping Americans buy insurance across state lines. You've mentioned that yourself. Most of the governors I've talked to think that would be a good way to increase competition.

Number three, put an end to junk lawsuits against doctors. In our state, half the counties' pregnant women have to drive to the big city to have prenatal health care or to have their baby, because the medical malpractice suits have driven up the insurance policies so high that doctors leave the rural counties.

Number four, give states incentives to lower costs.

Number five, expanding health savings accounts.

Number six, House Republicans have some ideas about how my friend in Tullahoma can continue to afford insurance for his wife who has had breast cancer; because she has a pre-existing condition, it makes it more difficult to buy insurance.

"So there're six ideas—they're just six steps. Maybe the first six, but combined with six others and six more and six others, they get us in the right direction.

"Now, some say we need to rein in the insurance companies; maybe we do. But I think it's important to note if we took all of the profits of the health insurance companies entirely away, every single penny of it, we could pay for two days of health insurance for Americans. And that would leave 363 days with costs that are too high. So that's why we continue to insist that as much as we want to expand access and to do other things in health care, that we shouldn't expand a system that's this expensive, that the best way to increase access is to reduce costs.

"Now, in conclusion, I have a suggestion and a request for how to make this a bipartisan and truly productive session. And I hope that those who are here will agree, I've got a pretty good record of working across party lines, and of supporting the president when I believe he's right, even though other members of my party might not on that occasion. And my request is this: before we go further today, that the Democratic Congressional leaders and you, Mr. President, re-

ounce this idea of going back to the Congress and jamming your bill through on a partisan vote through a little-used process we call reconciliation.

"You can say that this process has been used before, and that would be right, but it's never been used for anything like this. It's not appropriate to use to rewrite the rules for 17 percent of the economy. Senator Byrd, who is the constitutional historian of the Senate, has said that it would be an outrage to run the health care bill through the Senate like a freight train with this process. The Senate is the only place where the rights to the minority are protected, and sometimes, as Senator Byrd has said, the minority can be right.

"I remember reading Alexis de Tocqueville's book *Democracy in America*, in which he said that the greatest threat to the American democracy would be the 'tyranny of the majority.'

"When Republicans were trying to change the rules a few years ago, you and I were both there. Senator McCain was very involved in that—getting a majority vote for judges. Then-Senator Obama said the following, 'What we worry about is essentially having two chambers, the House and the Senate, who are simply majoritarian, absolute power on either side. That's just not what the founders intended.' Which is another way to saying that the founders intended the Senate to be a place where the majority didn't rule on big issues.

"Senator Reid in his book, writing about the 'Gang of 14,' said that the end of the filibuster requiring 60 votes to pass a bill 'would be the end of the United States Senate.' And I think that's why Lyndon Johnson, in the '60s, wrote the civil rights bill in Everett Dirksen's office, the Republican Leader, because he understood that by having a bipartisan bill, not only would pass it, but it would help the country accept it. Senator Pat Moynihan has said before he died that he couldn't remember a big piece of social legislation that passed that wasn't bipartisan.

"And after World War II, in this very house and in the room back over here, Democratic President Truman's Secretary of State, General Marshall, would meet once a week with Senator Vandenberg, the Republican Chairman of the Senate Foreign Relations Committee, and write the Marshall Plan. And General Marshall said that sometimes Van was my right hand, and sometimes he was his right hand.

"And we know how [Congressmen] John Boehner and George Miller did that on *No Child Left Behind*. [Senators] Mike Enzi and Ted Kennedy wrote 35 bills together; you mentioned that in your opening remarks. You and I and many other others worked together on the America COMPETES Act. We know how to do that—and we can do that on health care as well.

"But to do that, we'll have to renounce jamming it through in a partisan way. And if we don't, then the rest of what we do today will not be relevant. The only thing bipartisan will be the opposition to the bill, and we'll be saying to the American people—who I've tried to say this in every way they know how—town halls and elections and surveys—that they don't want this bill, that they would like for us to start over. So if we can do that—start over—we can write a health care bill. It means putting aside jamming it through. It means working together the way General Marshall and Senator Vandenberg did. It means reducing health care costs and making that our goal for now, not focusing on the other goals. And it means going step by step together to re-earn the trust of the American people. We would like to do that, and we appreciate the opportunity that you have given us today to say what our ideas

are, and to move forward. Thank you very much."

—  
U.S. SENATE,  
Washington, DC, February 25, 2010.  
Hon. BARACK OBAMA,  
President, The White House,  
Washington, DC.

DEAR MR. PRESIDENT, During today's discussion on health care, you and I disagreed about whether the health care bill that passed the Senate on party-line vote on December 24 would cause health insurance premiums to rise even faster than if Congress did not act. I believe premiums will rise because of independent analysis of the bill:

On November 30, the non-partisan Congressional Budget Office (CBO) wrote in a letter to Senator Bayh that "CBO and JCT estimate that the average premium per person covered (including dependents) for new nongroup policies would be about 10 percent to 13 percent higher in 2016 than the average premium for nongroup coverage in that same year under current law."

When you asserted that CBO says premiums will decline by 14 to 20 percent under the Senate bill, you are leaving out an important part of CBO's calculations. These reductions are overwhelmed by a 27 to 30 percent increase in premiums due to the mandated coverage requirements in the legislation. CBO added those figures together to arrive at a net increase of 10 to 13 percent—as shown in their chart in that same letter.

In that same letter, CBO wrote, "The legislation would impose several new fees on firms in the health sector. New fees would be imposed on providers of health insurance and on manufacturers and importers of medical devices. Both of those fees would be largely passed through to consumers in the form of higher premiums for private coverage."

On December 10, the chief actuary for the Centers for Medicare and Medicaid Services—who works for your administration—concurred with the CEO. In his analysis, the actuary said, "We anticipate such fees would generally be passed through to health consumers in the form of higher drug and device prices and higher insurance premiums." He also said, "The additional demand for health services could be difficult to meet initially with existing health provider resources and could lead to price increases, cost-shifting, and/or changes in providers' willingness to treat patients with low-reimbursement health coverage."

For these reasons, the Senate-passed bill will, indeed, cause Americans' insurance premiums to rise, which is the opposite of the goal I believe we should pursue.

Sincerely,

LAMAR ALEXANDER.

Mr. ALEXANDER. Mr. President, I yield the floor.

The PRESIDING OFFICER. The Senator from Washington.

#### WOMEN'S ACCESS TO HEALTH CARE

Mrs. MURRAY. Mr. President, like many of my colleagues I am deeply disappointed that Republican leaders have dedicated this week to partisan, political attacks rather than working with us to deliver results to the families we represent. So I wish to take a few minutes today to talk about the work we could and should be doing and make clear again that Republican efforts to undermine families' health care are nothing but a dead end.

I am pleased that over the last few months Democrats and Republicans

have been able to work together on some very important issues. We passed another bipartisan budget deal. We have worked on a bill together to fix the No Child Left Behind law that is broken, and Republicans and Democrats are now working to pass a transportation bill that would do a lot to help fix our crumbling infrastructure. But there is certainly a lot more that we should be doing to boost wages, to expand opportunity, and to make sure our economy is growing from the middle out, not from the top down. I would hope that we would be working on a way to raise the minimum wage or ensure that working parents can earn paid sick days or make higher education more affordable and accessible for our students.

With the holidays just around the corner, we should be focused on what struggling families need to make ends meet. Those are the kinds of issues I would like to be working on and many more, but instead Republican leaders are insisting on tilting at tea party windmills by trying to dismantle the Affordable Care Act for the umpteenth time.

This bill is not going to be signed into law. As we all know, this is just a political gesture here. But I want to be very clear about what it would mean for millions of men, women, and children across the country if this were to be signed into law. The policies that are being put forward could cause millions of people to lose their health care coverage, make premiums skyrocket, increase costs for our hospitals and for our providers, cut off support for important public health programs by repealing the prevention fund, and take us back to the bad old days when insurance companies, not patients, had all of the power.

Democrats believe strongly that while the Affordable Care Act was an historic step forward, the work did not end when the law passed—far from it.

We are willing to work with anyone on either side of the aisle who has good ideas about how to build on the progress that has been made so far and continue making health care more affordable, expanding coverage, and improving quality of care for our families.

So it is very disappointing that Republicans instead continue to insist that when it comes to health care, politics—not families—comes first. This is especially because—again to be very clear—this legislation has no chance of becoming law. The very same is true when it comes to this latest attempt to cut off women's access to health care.

After years of trying to turn back the clock on women's constitutionally protected rights and to undermine Planned Parenthood, Republicans should have gotten their fill of political attacks on women's health. Clearly, they have not.

In the wake of the tragedy in Colorado Springs last week, I have thought a lot about how important it is that we

do more to insure communities are protected from that kind of violence and that we continue to stand with Planned Parenthood as it helps so many people—women and men—get the care they need.

So it is very frustrating that my Republican colleagues are doubling down this week on their efforts to defund Planned Parenthood and get in between women and their health care. If Republicans were to succeed in the bill they have before us in defunding Planned Parenthood—our Nation's largest women's health care provider—with the legislation we are debating today, they would undermine a critical source of health care that one in five women have relied on for cancer screenings, for HIV tests, and for so much more. They would make it harder for women to exercise their constitutionally protected right to make their own choices about their own bodies and their own doctors.

By dismantling critical health care reforms, this proposal would cause millions of women to lose their health care coverage and access to everything from birth control to prenatal care. That is simply not going to happen—not on my watch, not on Democrats' watch, and not on President Obama's watch. Republicans may want to go back to the days when being a woman was a preexisting condition. They may see this entire bizarre effort as nothing more than a great opportunity to pander to their extreme tea party base by attacking health care and Planned Parenthood. But for millions of women and families, the policies we are debating today are no political exercise; instead, if enacted, they would represent a deeply harmful step backward—a step away from building a health care system that is affordable, accessible, and high quality, one that contributes to economic security and opportunity.

Women and families have seen these extreme Republican attempts many times before, and, frankly, I think they have had enough. They don't want Congress fighting over whether to roll back a law that has helped millions of people get health care coverage and bolstered our Nation's health care system, a law that has been upheld time and time again by the Supreme Court, and they believe firmly that politicians in Congress should have better things to do than interfere with women's constitutionally protected health care choices. I am sure they would rather see us working to actually improve health care and the many other challenges our country faces.

Democrats agree with that. We want to move health care forward, not backward, for women and families, and we want to do the other important work across the aisle to strengthen our economy and grow our middle class. So today, as my Republican colleagues double down on their partisan political pandering, we on this side are going to continue to stand up for family health care and stand up for women and their

rights every step of the way. I hope my Republican colleagues will finally drop the politics and join us.

I yield the floor.

The PRESIDING OFFICER. The Senator from West Virginia.

#### OBAMACARE

Mrs. CAPITO. Mr. President, I wish to address ObamaCare repeal. As I was thinking about what I was going to say today, I went back and looked at a speech I made on the House of Representatives floor on March 21, 2010. The previous speaker talked about the partisanship that she perceives now. I thought it interesting. I am going to read just a couple quotes from my speech then: “[We are thinking about] this bill as a blanket, a blanket of health care legislation that may be draped across America and its population in the coming years,” which it has for the last 4 years. I talk about how “its cloth has been cut behind closed doors and its color is tinged by partisan hands.” That is the ObamaCare legislation and the ObamaCare plan we have today. “The huge holes will not protect the cold winds of job loss, new taxes, government bureaucracy, and increased health care costs. . . . All of America will feel the weight of this uncomfortable burden.” Those were my words on March 21, 2010, in the House of Representatives.

Today and later this week, the Senate will consider a bill to repeal that bill, ObamaCare, a costly disaster that 4 years—5 years later we see has cost countless people access to their doctors, access to the health care plan of their choice, and thousands of West Virginians from my State have lost or had to change their coverage. We ought to ask the individuals and families whose premiums and deductibles have skyrocketed and the small businesses that have been forced to cut hours and employees.

Let's consider the exchanges that are folding and the hospitals that are facing unmanageable costs. Even the Nation's largest health insurance provider has threatened to pull out of ObamaCare, citing high costs and growing risks. Just today, the CEO of that company said that joining ObamaCare was “a bad decision.”

There has to be a better way, and we need to find it.

In the bill we are considering this week, the Senate will do two major things: It will repeal significant portions of the health care law that are not working. It will also provide a bridge to replace this law with an improved health care system. This ObamaCare repeal bill will eliminate enforcement of the individual and employer mandates. It will repeal \$1 trillion—\$1 trillion—in onerous taxes. It will save and strengthen Medicare. It will also dedicate resources to fight the growing drug epidemic that is sweeping across this country. Certainly in our