

unprecedented deficits forecast for the next decade, this is definitely not a time to start a major new spending program.

A second key goal of the Obama health plan is to slow the growth of health-care spending. The president's budget calls explicitly for cutting Medicare to help pay for the expanded benefits for low-income individuals. But the administration's goal is bigger than that. It is to cut dramatically the amount of health care that we all consume.

A recent report by the White House Council of Economic Advisers claims that the government can cut the projected level of health spending by 15 percent over the next decade and by 30 percent over the next 20 years. Although the reduced spending would result from fewer services rather than lower payments to providers, we are told that this can be done without lowering the quality of care or diminishing our health. I don't believe it.

To support their claim that costs can be radically reduced without adverse effects, the health planners point to the fact that about half of all hospital costs are for patients in the last year of life. I don't find that persuasive. Do doctors really know which of their very ill patients will benefit from expensive care and which will die regardless of the care they receive? In a world of uncertainty, many of us will want to hope that care will help.

We are also often told that patients in Minnesota receive many fewer dollars of care per capita than patients in New York and California without adverse health effects. When I hear that, I wonder whether we should cut back on care, as these experts advocate, move to Minnesota, or wish we had the genetic stock of Minnesotans.

The administration's health planners believe that the new "cost effectiveness research" will allow officials to eliminate wasteful spending by defining the "appropriate" care that will be paid for by the government and by private insurance. Such a constrained, one-size-fits-all form of medicine may be necessary in some European health programs in which the government pays all the bills. But Americans have shown that we prefer to retain a diversity of options and the ability to choose among doctors, hospitals and standards of care.

At a time when medical science offers the hope of major improvements in the treatment of a wide range of dread diseases, should Washington be limiting the available care and, in the process, discouraging medical researchers from developing new procedures and products? Although health care is much more expensive than it was 30 years ago, who today would settle for the health care of the 1970s?

Obama has said that he would favor a British-style "single payer" system in which the government owns the hospitals and the doc-

tors are salaried but that he recognizes that such a shift would be too disruptive to the health-care industry. The Obama plan to have a government insurance provider that can undercut the premiums charged by private insurers would undoubtedly speed the arrival of such a single-payer plan. It is hard to think of any other reason for the administration to want a government insurer when there is already a very competitive private insurance market that could be made more so by removing government restrictions on interstate competition.

There is much that can be done to improve our health-care system, but the Obama plan is not the way to do it. One helpful change that could be made right away is fixing the COBRA system so that middle-income households that lose their insurance because of early retirement or a permanent layoff are not deterred by the cost of continuing their previous coverage.

Now that congressional leaders have made it clear that Obama will not see health legislation until at least the end of the year, the president should look beyond health policy and turn his attention to the problems that are impeding our economic recovery.

FURTHER CHANGES TO S. CON. RES. 13

Mr. CONRAD. Mr. President, section 401(c)(4) of S. Con. Res. 13, the 2010 budget resolution, permits the chairman of the Senate Budget Committee to adjust the section 401(b) discretionary spending limits, allocations pursuant to section 302(a) of the Congressional Budget Act of 1974, and aggregates for legislation making appropriations for fiscal years 2009 and 2010 for overseas deployments and other activities by the amounts provided in such legislation for those purposes and so designated pursuant to section 401(c)(4). The adjustment is limited to the total amount of budget authority specified in section 104(21) of S. Con. Res. 13. For 2009, that limitation is \$90.745 billion, and for 2010, it is \$130 billion.

On June 25, 2009, the Senate Appropriations Committee reported H.R. 2847, the Commerce, Justice, Science, and Related Agencies Appropriations Act, 2010, with an amendment in the nature of a substitute. The reported legislation contains \$126 million in funding that has been designated for overseas deployments and other activities pursuant to section 401(c)(4). The

Congressional Budget Office estimates that the \$126 million in budget authority will result in \$104 million in new outlays in 2010. As a result, I am revising both the discretionary spending limits and the allocation to the Senate Committee on Appropriations for discretionary budget authority and outlays by those amounts in 2010. When combined with previous adjustments made pursuant to section 401(c)(4), \$379 million has been designated so far for overseas deployments and other activities for 2010.

In addition, section 401(c)(2)(B) of the 2010 budget resolution permits the chairman to adjust the section 401(b) discretionary spending limits, allocations pursuant to section 302(a) of the Congressional Budget Act of 1974 and aggregates for legislation making appropriations for fiscal year 2010 that both appropriates \$7.1 billion and provides an additional appropriation of up to \$890 million to the Internal Revenue Service for enhanced tax enforcement to address the tax gap, the difference between the amount of taxes owed and the amount of taxes paid.

On July 9, 2009, the Senate Appropriations Committee reported S. 1432, the financial services and general government appropriations Bill, 2010. The reported bill contains \$890 million in funding that satisfies the conditions of section 401(c)(2)(B). The Congressional Budget Office estimates that the \$890 million in budget authority will result in \$837 million in new outlays in 2010. As a result, I am revising both the discretionary spending limits and the allocation to the Senate Committee on Appropriations for discretionary budget authority and outlays by those amounts in 2010.

When combining the effects of the two adjustments, I am revising today both the discretionary spending limits and the allocation to the Senate Committee on Appropriations by a total of \$1,016 million for budget authority and \$941 million for outlays.

I ask unanimous consent to have the following revisions to S. Con. Res. 13 printed in the RECORD.

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

CONCURRENT RESOLUTION ON THE BUDGET FOR FISCAL YEAR 2010—S. CON. RES. 13; FURTHER REVISIONS TO THE CONFERENCE AGREEMENT PURSUANT TO SECTIONS 401(c)(4) AND 401(c)(2)(B) TO THE ALLOCATION OF BUDGET AUTHORITY AND OUTLAYS TO THE SENATE APPROPRIATIONS COMMITTEE AND THE SECTION 401(b) SENATE DISCRETIONARY SPENDING LIMITS

In millions of dollars	Current Allocation/ Limit	Adjustment	Revised Allocation/Limit
FY 2009 Discretionary Budget Authority	1,482,201	0	1,482,201
FY 2009 Discretionary Outlays	1,247,872	0	1,247,872
FY 2010 Discretionary Budget Authority	1,086,269	1,016	1,087,285
FY 2010 Discretionary Outlays	1,306,259	941	1,307,200

WASP CONGRESSIONAL GOLD MEDAL

Mr. DODD. Mr. President, as chairman of the Committee on Banking, Housing, and Urban Affairs, it is the responsibility of my committee colleagues and I to oversee and consider

legislation to award Congressional Gold Medals to prospective candidates deemed worthy of the honor. Indeed, it is the highest honor that Congress can bestow on an individual or group, and as such, my committee has to ensure that these bills garner broad bipartisan

support in the form of two-thirds co-sponsorship in the Senate before they can receive full consideration. This year, I am pleased that a bill to award a Congressional Gold Medal to the Women Airforce Service Pilots, or