



United States
of America

Congressional Record

PROCEEDINGS AND DEBATES OF THE 109th CONGRESS, SECOND SESSION

Vol. 152

WASHINGTON, WEDNESDAY, MAY 10, 2006

No. 56

Senate

The Senate met at 9:30 a.m. and was called to order by the President pro tempore (Mr. STEVENS).

PRAYER

The Chaplain, Dr. Barry C. Black, offered the following prayer:

Let us pray.

O God our rock, forgive us for deviating from Your will. Forgive us for careless work and half-finished projects. Forgive us for labors we have not yet begun because of procrastination. Forgive us for people we have hurt or disappointed. Forgive us for failing those who most need our help. Forgive us for the promises we have broken and the vows we have forgotten. Forgive the times we have disobeyed and grieved You.

Use Your lawmakers today as agents of reconciliation. Teach them to love You as You have loved them.

We pray in Your loving Name. Amen.

PLEDGE OF ALLEGIANCE

The PRESIDENT pro tempore led the Pledge of Allegiance, as follows:

I pledge allegiance to the Flag of the United States of America, and to the Republic for which it stands, one nation under God, indivisible, with liberty and justice for all.

RESERVATION OF LEADER TIME

The PRESIDENT pro tempore. Under the previous order, leadership time is reserved.

MORNING BUSINESS

The PRESIDENT pro tempore. Under the previous order, there will be a period for the transaction of morning business for up to 60 minutes, with the first half of the time under the control of the majority leader or his designee and the second half of the time under the control of the Democratic leader or his designee.

RECOGNITION OF THE MAJORITY LEADER

The PRESIDENT pro tempore. The majority leader is recognized.

SCHEDULE

Mr. FRIST. Mr. President, this morning we have set aside the first hour for a period of morning business to allow Senators to speak. Following that time, we will begin consideration of the small business health plans bill. Yesterday we invoked cloture on the motion to proceed and last night we reached the agreement to begin the bill this morning.

Chairman ENZI will be here to speak with Members about their amendments. We hope we can consider amendments related to the bill throughout today's session, and therefore I expect votes today. I ask Senators who have relevant amendments to come to the floor to speak to the two managers to see if they can reach an agreement to debate those amendments.

In addition, we have the Tax Relief Act conference report that was filed in the House yesterday. We will consider that conference report this week once it arrives from the House.

SMALL BUSINESS HEALTH PLANS

Mr. FRIST. Mr. President, I want to take this opportunity to paint the larger picture of why the small business health plans are so important to our Nation, to everyday Americans, and to the 46 million people who do not have health insurance today, and how it affects the cost of health care and thus the quality and access to health care.

Much of the discussion that has gone on and that will go on as we proceed with this bill centers on the fact that America is facing a health insurance crisis. It centers on the fact that health care premiums are growing. They are growing faster than individ-

uals' wages or income, and this growing cost—skyrocketing cost—of premiums translates into a significant portion of the 46 million people who don't have insurance today—solely because of the price of the premiums of health insurance. I do think—in fact, I know—that is unacceptable in a country that is as prosperous as ours.

The medical impact and the impact on quality of life and life itself is embodied in the statistic that the Institute of Medicine reported in the fact that 18,000 Americans die prematurely each year because they don't have health insurance. A lot of people say why, because you eventually can get into a hospital, but it boils down to the fact that if you have some health insurance—just some health insurance—you do better than if you don't have health insurance. People can still go to emergency rooms whether they have health insurance, but entry into our system is much easier if you have health insurance.

So this is a big problem that troubles me as a Senator and as a physician, and it troubles and should trouble every American. That is why we are on this issue today.

About 60 percent of uninsured employees today work for small businesses. Unfortunately, these skyrocketing health insurance costs, coupled with very complicated State regulations, are pricing small businesses out of the health insurance market. They simply can't afford to buy insurance and to offer that insurance to their employees.

We hear a lot of statistics on the floor, we have already heard a lot, and you will hear them continually over the next couple of days as we address this issue. In the past 5 years, the cost of health insurance to companies has nearly doubled from roughly \$4,200 per family—almost double—to \$8,100. In 2005 alone, health care costs rose three times faster than inflation, and even faster for many small businesses. Consequently, the small firms, the small

• This "bullet" symbol identifies statements or insertions which are not spoken by a Member of the Senate on the floor.



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businesses are the ones that are hit the hardest.

Many of them are operating on a very narrow margin already. They have had to cut benefits and, in many cases, eliminate coverage altogether for their employees. Some of them have been forced to lay off workers because of the cost of health care. They simply can't sustain it; it eats into their profits and they can't stay in business. So it is no wonder that small businesses across America have said to us and have made it known that access to affordable health care is their No. 1 concern: access to affordable health care.

That is what this small business health insurance debate is all about. It is the guts, the thrust of the bill on the floor today. Small business owners want to take care of their employees and their families. They want to do everything they possibly can. Most small businesses are family affiliated, many of them family run, but it is becoming impossible to do in the face of increases that are so far greater than any margins they have, these double-digit increases in health insurance every year.

One survey reports that only 41 percent of firms with 9 employees or less can afford to offer health benefits, compared to 99 percent of large firms. That hurts the ability of small businesses to attract capable workers, to stay in business, to stay competitive in the larger marketplace. Unfortunately, the system is broken and small businesses are caught. They are stuck.

Eighteen hundred State mandates are choking the ability of the private sector to offer affordable choices, reasonable choices. We have to cut out the redtape. We have to streamline the process itself. We have to get rid of the waste and abuse in the system.

We all know that small businesses are the engine of economic growth in our economy. These small businesses are where innovation occurs and these innovators create 60 to 80 percent of all new jobs nationwide. They generate more than 50 percent of the gross domestic product. In my home State of Tennessee, 97 percent of all businesses are small businesses. This aspect of affordable health care is their No. 1 concern.

It makes sense that if we want to expand health care coverage, if we want to diminish the number of uninsured, we need to start to at least make a major advance in an area where we know we can make a difference, and that is where the jobs are. That is why the Enzi-Nelson-Burns small business health insurance bill that we bring to the floor and will formally open debate on here in about an hour is so important.

I want to applaud Chairman ENZI for his tremendous work to pull people together on both sides of the aisle to address these issues. This bill represents the first real, major, solid step to end the small business health plan stalemate that has characterized this body

in over a decade. Its purpose is to deliver meaningful reform for millions of Americans employed in the small business sector.

Under this plan, small business firms would be able to combine their negotiating power and to group that negotiating power in a way that purchasing clout can be used to purchase more affordable plans. By allowing that to happen, they could reduce the cost of health insurance by as much as \$1,000 per employee, while reducing the number of uninsured, people who are uninsured today, by more than 1 million. The CBO recently estimated the Enzi-Nelson-Burns plan would increase Federal revenue by \$3.3 billion between 2007 and 2016, while saving States an estimated \$600 million in Medicaid spending during the same period.

I know this is a very important bill. I am delighted that we will begin on this bill in an hour, or a little over an hour from now. It will be a substantive debate and will go right to the heart of a major problem facing this country, and that is the uninsured. It will address the issues of cost, access, and quality. I encourage Members on both sides of the aisle to participate in this debate, to stay on the issues—we are talking about small business health reform—to not bring in extraneous issues, and with that pass a very important and substantive bill for the American people.

RECOGNITION OF THE MINORITY LEADER

The PRESIDENT pro tempore. The Democratic leader is recognized.

HEALTH CARE REFORM

Mr. REID. Mr. President, the problem with the Enzi bill is laid out in great detail in a report filed by the minority of the HELP Committee. This is not a question of my not liking the bill, it is not a question of Democrats versus Republicans, it is a question of the bill not being good. It is not a good bill, as indicated by 41 attorneys general. Forty-one attorneys general have signed letters saying the Enzi bill is not good for their States. These attorneys general are from Democratic States and Republican States. Insurance commissioners from around the country have acknowledged that the bill is not a good bill. The bill is opposed by 206 different advocacy groups and health care organizations, disability groups, and professional organizations.

For example, we know that the American Association of Retired People opposes this legislation. I was able to speak to Mr. Novelli a couple of times about this bill while it was moving through the system, and AARP believes the bill is very hurtful to senior citizens, as well as the Small Business Majority, the National Health Council, and the Lance Armstrong Foundation. As I said, more than 200 different orga-

nizations think this legislation is bad for the American people.

I have been led to believe that when this bill is brought to the floor, the 30 hours doesn't expire postcloture on the motion to proceed until sometime this afternoon. We have agreed to go to the bill at an earlier time. But it is not going to give the people in our country the opportunity to move forward on progressive, strong legislation. We will be stuck with the Enzi bill, and AARP doesn't think it is going to go anywhere. The amendments will be controlled by Senator ENZI. If he likes the amendment, he will allow us to offer it. If he doesn't, he won't. I submit that is not the way we should move forward on legislation brought forward during Health Care Week dealing with health care reform.

There are many issues related to health care we need to deal with. There are issues that are so fundamental to what is going on in the country today, and we believe the proposal put forward by Senator LINCOLN from Arkansas, the ranking member of the Finance Committee, Senator BAUCUS, and of course a person who has worked very hard on this legislation for months, Senator DURBIN, should be the legislation we debate. But it will not be. We should have the opportunity to offer amendments relating to postponing the May 15 cutoff line of the eligibility for Medicare drug benefits. That is not going to be allowed.

We should be able to offer legislation dealing with the ability of Medicare to be competitive and bid for drugs at a lower price. That won't be able to be offered.

We should be able to offer an amendment dealing with stem cell research, giving hope to millions of Americans. We won't be able to do that. That is unfortunate.

Walking into the Chamber today, I was asked by someone: Tell us what you stand for. I think, rather than what I stand for, what we stand for as a minority, it is who we stand for. I think that is the direction we should be focusing: Who do we stand for?

There are lots of people we stand for. We stand for parents with no health care. We stand for those people with maladies who are crying out for some research on stem cells so we can move forward finding cures for these diseases—Alzheimer's, Parkinson's, diabetes.

We stand for children who are attending failing schools because the Bush administration refuses to put money into the schools that needs it. It is reported today that very soon there will be 10,000 schools in America that will be failing. I don't think that speaks well. Why are they failing? It is because of this Leave No Child Behind Act that the President pushed so hard.

We stand for the soccer mom who, today, someplace, is going to fill up her vehicle with gasoline and find the price is prohibitive. Rather than filling up her tank, she will fill it half full,