

this petition and ExxonMobil appealed to the Supreme Court. Unfortunately, in this intervening time period, with years and years of litigation bringing delay in resolution, we have had several thousand plaintiffs pass away since this litigation began.

Due to the limitations in admiralty law with respect to the recovery of compensatory damages, many Exxon Valdez plaintiffs were not able to recover the financial losses they sustained in the aftermath of this spill. So the punitive damages that are under consideration by the Supreme Court will provide them that level of compensation.

Once the Supreme Court decided to hear this case, I joined with Senator STEVENS and Representative YOUNG in submitting an Alaska congressional delegation amicus brief to the U.S. Supreme Court. In that brief, we argue that the award of punitive damages in this case of reckless and wanton conduct by Exxon not only is permissible under the Clean Water Act, but it is supported by Federal maritime law. Only punitive damages will provide those who were harmed—and who continue to be harmed—with the justice and the fair compensation they deserve.

This litigation needs to end. Nine-teen years is far too long for these plaintiffs to wait to be compensated for their loss of income. I am hopeful that the Supreme Court will rule in favor of the plaintiffs in this case, and I, along with so many Alaskans, look for a final resolution to this great tragedy that occurred to us as a State some 19 years ago.

Mr. President, I yield the floor.

#### MORNING BUSINESS

The ACTING PRESIDENT pro tempore. Under the previous order, there will be a period of morning business until 12:30 p.m., with the time equally divided and controlled between the two leaders or their designees.

The ACTING PRESIDENT pro tempore. Under the previous order of the Senate, the Senator from Wyoming is recognized for 10 minutes.

#### EQUALIZING THE TAX TREATMENT OF HEALTH INSURANCE

Mr. ENZI. Mr. President, I wish to congratulate the Senator from North Dakota, Mr. DORGAN, and the Senator from Alaska, Ms. MURKOWSKI, on the piece of legislation we just passed. It is extremely critical to a number of people in the United States, the Native Americans.

It was an extremely difficult piece of legislation to do because it is such a diverse group of people. There are Native Americans who are living in cities, there are Native Americans living on reservations, and there is even a difference in reservations because there are some that have a lot of land and a few people, and some have a lot of peo-

ple and very little land. To come up with a one-size-fits-all is not possible. This bill takes care of all of those people wherever they are and under the circumstances they are under, and it does meet the promise that was given. It culminates 15 years of work that should have been done 15 years ago, but because of the diversity, it was extremely difficult to do. And the chairman and the ranking member, working together, were able to pull that together. So I congratulate both of them for their efforts and their capability of working with everybody in this body, with probably about 100 amendments that were thought about, though not all were offered. The solutions, the ways to solve a lot of those problems are included in the bill. I think it is a very good bill, and they deserve a lot of credit for the way they worked on it and the effort they put into it and the result they got. I am looking forward to getting it resolved on both ends of the building and the President signing it, and I congratulate both of them.

I do rise today, however, to talk about finding other solutions to our health care crisis. That is a part of it. We have extended the children's health insurance plan until March of 2009, so that part has been partly solved, but my wife Diana and I travel to different parts of Wyoming most weekends, and the No. 1 issue on people's minds is their health care. They all ask me what I am going to do to make sure they have the health care they need. I am able to tell them a lot of things I am working on, but I am not able to tell them very much about things actually getting accomplished. This troubles me because our constituents deserve our help. It is time for real action, and I hope we are able to do something on health care this year.

As the senior Republican on the Committee on Health, Education, Labor and Pensions, I spend a lot of time working on health care issues. I have spoken to this body many times about a bill that I am working on, that I have been working in conjunction with anybody in this Chamber who is interested in health care, and trying to pull together the idea so that we can do some things in health care, any one of which would help us to get closer to a solution for all Americans.

The bill I have put together is one called Ten Steps to Transform Health Care in America. That will fix many of the common complaints I hear from my constituents. Why ten steps? Well, I have discovered over the course of the years I have been in this Chamber that if you try to put together one massive comprehensive bill that solves everything, you will have one piece that 5 people don't like, another piece 8 people don't like, another 11 people don't like, and another 3 people don't like, until pretty quickly you are at 51 votes and you can't get the bill done. When you try to do something comprehensively, it often looks revolutionary. And we don't do things revolutionarily;

we do them evolutionarily. So I put together 10 pieces, any one of which gets us closer to having every American insured. All 10 would get every American insured. So I hope people will take a look at it.

Today, I am just going to focus on one step; that is, the first, and that is equalizing the tax insurance treatment for all Americans, not just the ones who get health insurance at work. I encourage everyone watching to look at my Web site, [enzi.senate.gov](http://enzi.senate.gov), to learn more about all the steps of the bill. Again, I emphasize that these are bipartisan ideas people have given me.

Because the chairman of the committee has been so involved in the education portion—and we are making progress on the education portion, having sent several pieces to the President already, and we are going to finish the higher education bill, and we are going to finish No Child Left Behind—I have been given the flexibility to look into this health care area. The chairman and I sat down and worked on principles of health care, and then I have sought to get ideas from both sides of the aisle and incorporated them as much as I can into 10 steps.

Before I go into the details of step 1, I wish to say a few things about the entire proposal.

If the Ten Steps bill were to become law, the end result would be an insurance card for everyone. Now, lots of people have insurance cards—Members of Congress have them, people who work for big companies have them, the kids in Wyoming who participate in the State Children's Health Insurance Program have them. Lots of people have them, and most of those people who have insurance cards are happy with the care they are getting. They do not want change. And the bill doesn't change that. If you have an insurance card now, you can keep that card and keep getting the exact same care you are getting. The problem is the 47 million or so Americans who don't have an insurance card. My bill gives all those people cards. If they can't afford the cards because they are low income, this bill helps them by giving them the money they need to purchase the insurance card. The bottom line is that everyone has a card and everyone will be able to get the care they need.

So how does the bill get everyone an insurance card, and will we bust the budget in the process of getting everyone an insurance card? The bill won't bust the budget. It won't be free, but it won't bust the budget. So how is this possible? Well, in order to understand how the bill works, it is important to review a few facts about the history of health insurance in this country.

Right now, about 60 percent of the folks under age 65 are getting their health insurance through their job. The question is why. Why are 60 percent of Americans getting their health insurance through their job? Well, the short answer to that question is, because of the way employer-sponsored