

coverage by insurance providers who care more about profits than people. I hear about people who lost their health coverage when they lost their jobs and now have no means of getting it back. I hear of people from Nevada who play by the rules and rightly demand that our health care system be guided by common sense.

That is what this debate is all about—nothing more, nothing less. These people—and nothing else—should be the focus of the open and honest debate they deserve—the people of America.

Mr. President, has the Chair yet announced that we are in a period of morning business?

The ACTING PRESIDENT pro tempore. It has not.

RESERVATION OF LEADER TIME

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

MORNING BUSINESS

The ACTING PRESIDENT pro tempore. Under the previous order, there will now be a period for morning business, with Senators permitted to speak for up to 10 minutes each.

The majority leader.

Mr. REID. Mr. President, I suggest the absence of a quorum.

The ACTING PRESIDENT pro tempore. The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

Mr. McCAIN. Mr. President, I ask unanimous consent the order for the quorum call be rescinded.

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

The Senator from Arizona is recognized.

Mr. McCAIN. I thank the Chair.

(The remarks of Mr. McCAIN pertaining to the submission of S. Res. 193 are located in today's RECORD under "Submission of Concurrent and Senate Resolutions.")

HEALTH CARE

Mr. McCAIN. Mr. President, I wish to say a few words about health care. Obviously, according to most media reports, and my experience as a member of the HELP Committee, we are basically at gridlock. The Congressional Budget Office stated on Monday, in relation to the legislation being considered in the HELP Committee, that

Once the proposal is fully implemented . . . the number of people who had coverage through an employer would decline by about 15 million.

The Lewin Group, a health care consulting firm, estimates this number to be much higher. They estimate that up to 70 percent of all Americans who have private insurance today—120 million Americans—will lose their health

insurance and be forced onto the government rolls.

That stands in stark contrast to the President's repeated assertions that if you like your health care, you can keep it. Further analysis by HSI Network, a health care economics firm, found that to get all Americans covered under the Democrats' bill, it would cost a staggering \$4 trillion and result in 79 million Americans who currently have private insurance having to obtain coverage from the government plan.

What I have described is what is known as the "crowdout" phenomenon. It is the substitution effect that occurs when a massive government insurance plan "crowds out" private insurance as the expansion of publicly subsidized programs encourage or force people from private arrangements to public ones. This is a real issue and one we must pay attention to.

On Monday the President said:

I know that there are millions of Americans who are content with their health care coverage. . . . And that means that no matter how we reform health care, we will keep this promise: If you like your doctor, you will be able to keep your doctor. Period. If you like your health care plan, you will be able to keep your health care plan. Period. No one will take it away. No matter what.

If the bill we are considering is enacted, I do not believe this is a promise the President will be able to keep. The President's hometown newspaper, the Chicago Tribune, stated in an editorial on Tuesday:

[The President] promises that anyone who wants to keep their private coverage will be able to do so But we do know a few things about government-run health plans . . . the Federal Government isn't competition. It is the health care equivalent of Bigfoot It sets low prices, to be sure, lower than many insurers are able to match. But that just means those doctors and hospitals recoup the losses by shifting costs onto those with private insurance . . . [which] could easily crowd out private plans. A lot of Americans think the health care system isn't really all that broken. They get good care. They pay for it via insurance But a government-run health plan? Experience says that the cure would be worse than the illness.

The Chicago Tribune has it exactly right. The fact is, a lot of Americans are pleased with their health care options. In fact, 70 percent of Americans with health insurance rated their coverage good or excellent, according to a Rasmussen Reports poll dated May 14, 2009. Those 70 percent might be the precise group of Americans who will lose their health insurance and be forced into government-run programs if the legislation is enacted.

It is a fact that premiums continue rising, eating into family budgets and preventing the uninsured from getting covered. This is the problem we need to be addressing. We need to bring down the cost of health care and thus the cost of health insurance coverage. This will lead to more coverage of the uninsured and ensure that those who like their health care coverage can keep

their coverage and their doctor as the President promises. Yet the majority bill contains not a single reform that will save money. Instead, as I have pointed out, it will cost up to \$4 trillion and displace up to 79 million Americans from their current coverage.

This is not reform. This is why we should start over. I continue to believe that the Democrats and the White House should scrap this incomplete bill and start over. Democrats and Republicans must come together and draft a bill that allows the President to uphold his promise that Americans will be able to keep their current doctor or health care plan.

We spent a lot of time in the HELP Committee going over an incomplete proposal. Supposedly by tonight the three major issues, including the so-called government option, will be revealed to us by the majority side. I hope it is soon. I hope we will be able to view it so we could have for the first time a meaningful discussion and negotiation in the HELP Committee. So far, three major components are still blank spaces.

I have been in this body for a long time. I have never seen a process such as we are going through right now. It is basically fundamentally a charade so the Democrats can come to the floor and say we consulted with the Republicans, we had hours and hours of debate and discussion and markup—when we were not presented with the key elements of the legislation we were supposed to be considering. If the key elements are there and we get to examine it over the weekend, then perhaps we will be able to sit down together and negotiate some kind of reasonable approach to this bill.

It is not an accident that the Finance Committee, the other committee that is supposed to be tracking the health reform bill along with the HELP Committee, has decided not to present their proposal until after the Fourth of July recess because they simply do not have a way to pay for it.

The CBO analysis and other outside analysis has revealed something very important, that the plan as proposed and propounded by the administration and by the Democrats is unsustainably expensive and one that they do not have a way of paying for. It will be very interesting to see how they tailor their plan to the expenses and how they address the issue of how to pay for it. Clearly, raising taxes is an option they are considering. I don't think raising anybody's taxes in the present day economy is something that would be beneficial to all Americans.

I suggest the absence of a quorum.

The ACTING PRESIDENT pro tempore. The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

Mr. McCONNELL. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.