night. We have no objection to moving to the bill through a fair and open process. We will be happy to submit our ideas to the chairman and ranking member of the Appropriations Committee. There is a lot we ought to discuss about this bill. However, there is no attempt to filibuster the bill. There was an attempt to do our job, which was to actually read the bill and see what is in it so we would be prepared to offer constructive criticisms to the bill.

With that, I leave and I will be back on the floor in a little bit when the managers of the bill come to the floor. If they want to offer amendments and ask unanimous consent to move on to the bill, I am sure there will be no objection.

I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from Illinois.

Mr. DURBIN. Mr. President, I respect my friend from Arizona. He is my friend, and we have worked together on a bipartisan basis. I respect his right as a Senator and his responsibility as a Senator to speak on issues that he thinks are important to our Nation and his home State as well as to offer amendments if that is the appropriate approach he wants to use. However, we have wasted a day. We lost a day in the U.S. Senate.

Yesterday was the day to begin the amendment process and we could not. Senators objected to our coming to this process and even offering an amendment on the continuing resolution, which is the Federal budget for the remainder of this year; in other words, until September 30. We know we are just days away from the continuing resolution expiring. We don't want the government to shut down; we do want to fund the government. We understand there must be spending cuts and there is a healthy difference of opinion on where those cuts should be made. The Senator from Arizona was on the floor yesterday and we spoke of this.

One aspect of this bill, which I wish to address for a moment, is the Department of Defense appropriations. This is a new responsibility which I have on the Senate Appropriations Committee, and it is an awesome responsibility. Not only are we dealing with the security of the United States of America, first and foremost, we are dealing with a massive spending bill. This is larger than any other spending bill in the Federal Government.

Last week the House of Representatives passed a continuing resolution which covers the Department of Defense for the remainder of this year. Many changes are included in there, but that was done along with the military construction budget and the Veterans Administration budget. That was all finished last week. It was all sent to us by the House last week ready for us to address it if we cared to.

Well, we had that chance yesterday, and we didn't do it. Now we have another chance today, and we should take it. We have a lot to do in a limited amount of time. We have this week and the next to accomplish not only the passage of this Federal budget for the remainder of this year but also next week we will begin consideration of a budget resolution for spending in the next fiscal year. Those are two awesome responsibilities back to back and up against the Easter recess.

Senator HARRY REID, the Democratic majority leader, has come to the floor expressing some frustration. He wanted to move on this continuing resolution this week—as early as yesterday—and give Members an opportunity to offer amendments. There were several Members who stepped forward prepared to do so, but there was a stop. There was a hold.

I understand the Senator from Oklahoma—and I believe my friend from Arizona may echo his remarks—is prepared to not stand in the way of any of the amendments. If Members wish to offer amendments, they can do so, and I hope they will.

Mr. MCCAIN. Mr. President, could I ask my friend a question while he is on that subject?

Mr. DURBIN. Mr. President, I ask permission to engage in a dialogue with my friend from Arizona.

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

Mr. MCCAIN. I say to my friend from Illinois that there is no further objection. The Senator from Oklahoma and I have reviewed the bill and yesterday we discussed its length and our obligations. I promise to my friend from Illinois that we will not rehash that discussion we had. We have no objection whatsoever to taking up amendments right now and moving forward with that. I hope that is perfectly clear to all Members. Very frankly, I am eager to move forward.

I will mention to my friend from Illinois that I appreciate the new responsibilities he has. I appreciate the responsibilities he has addressing, as he just said, the largest single part of our appropriations bill which is in the Defense authorization. During the intervening time we had requested, I came up with, for example, $65 million for Pacific coast salmon restorations for States, which includes Nevada. We are going to restore salmon restoration in the State of Nevada?

Also listed here is the Department of Defense to overpay contracts by an additional 5 percent—totaling $15 million—for Native Hawaiian-owned companies. I would be glad to include this long list for the RECORD.

There is a request for $993,000 in grants to dig private wells for private property owners; $10 million for USDA high-energy cost grant program to go to subsidize electricity bills in Alaska and Hawaii; $5.9 million for economic impact initiative grants. The list goes on and on.

I say to my friend from Illinois that we were trying to examine this legislation—the 587 pages or whatever it is—to find this sort of issue. It is our obligation to do so. We have found these things, and we are still finding additional elements.

I see my old friend, the distinguished majority leader, on the floor. We are ready to move forward with amendments. I was saying to my friend from Illinois that we found numerous additional provisions in this legislation that we think are important for debate and discussion. I won't go through all of them, but some of the items include $120 million for Guam; $5 million for the National Guard STARBASE Youth Program; $154 million for alternative energy resource. It goes on and on. In the meantime we have ships that cannot deport, planes that cannot fly, and men and women we cannot train and equip. Yet we have this kind of stuff on the appropriations bills.

I want to share with my colleagues that the Senator from Oklahoma and I finished examining this bill yesterday. We are prepared with amendments and moving forward with vigorous debate. If there was any misunderstanding about that, I apologize to the majority leader and my friend from Illinois.

The ACTING PRESIDENT pro tempore. The majority leader.

Mr. REID. Mr. President, as I said yesterday on the floor, I have nothing but the highest respect for my friend from Arizona. I know he looks into things very deeply, and I appreciate his peacemaking. Even though he is a famous man in America and the world because of his wartime experiences, he is also a peacemaker, and I am grateful for that.

Mr. President, I ask unanimous consent that the motion to proceed be agreed to.

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

DEPARTMENT OF DEFENSE, MILITARY CONSTRUCTION AND VETERANS AFFAIRS, AND FULL-YEAR CONTINUING APPROPRIATIONS ACT, 2013

The ACTING PRESIDENT pro tempore. The Senate will proceed to H.R. 933.

The clerk will report the bill.

The bill clerk read as follows:

A bill (H.R. 933) making appropriations for the Department of Defense, the Department of Veterans Affairs, and other departments and agencies for the fiscal year ending September 30, 2013, and for other purposes.

AMENDMENT NO. 26

(Purpose: In the nature of a substitute)

Mr. REID. On behalf of Senators MIKULSKI and SHELBY, I call up their substitute amendment, as modified, which is at the desk.

The ACTING PRESIDENT pro tempore. The clerk will report the amendment.

The bill clerk read as follows:

The Senator from Nevada [Mr. REID] for Ms. MIKULSKI and Mr. SHELBY proposes an

amendment numbered 26, as modified, as follows:

On page 1, strike lines 3, 4, and 5.

(The text of the amendment is printed in the RECORD of Monday, March 11, 2013, under ''Text of Amendments.'')

The ACTING PRESIDENT pro tempore. The majority leader.

Mr. REID. I withdraw the cloture motion.

The ACTING PRESIDENT pro tempore. The cloture motion is withdrawn.

Mr. REID. The first two amendments we will go to on this bill, according to the two managers, are the amendments by HARKIN and CRUZ. If Senator HARKIN is not available immediately, then Senator CRUZ can do it. These are the first two amendments, and I ask that both of them come to the floor at the earliest possible time. In fact, soon. The two managers, Senator SHELBY and Senator MIKULSKI, will be here shortly.

In the meantime I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The bill clerk proceeded to call the roll.

Mr. REID. Mr. President, I will withdraw my request for a quorum call. I didn't know my friend, the distinguished Senator from Illinois, was here wanting to talk, which is a rare occasion.

Mr. MCCAIN. Mr. President, if we could continue our dialogue.

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

Mr. MCCAIN. Mr. President, I want to thank the majority leader before he leaves the floor. I look forward to amendments and debate. Again, I apologize to all my colleagues if we held up this legislation, but we did want time to examine this legislation as we had previously requested. I thank my colleagues and look forward to moving forward with amendments. The Senator from Oklahoma and I are prepared with amendments whenever they are in order.

I thank my friend from Illinois, and I appreciate the enormous responsibility he has in his new position.

Mr. DURBIN. Mr. President, I thank my colleague from Arizona as well. I think we have a rare moment of peacemaking and harmony in the Senate. It may not last for long, so I want to speak while we have that moment and say for the Record that I don't dispute any of the statements made by the Senator from Arizona nor do I question his right to do so, including his responsibility to raise questions about spending.

We are at a time when we are cutting spending right and left—even at the Department of Defense. I do want to put on record the following: This bill, which we are considering as it relates to the Department of Defense in its entirety, is the bill that was passed by the House Republican majority. This is not a bill which was written on this side of the Rotunda. We have received it. That doesn't mean we should not ask questions about what the House did, but I don't want to be assigned the blame or asked to take responsibility for provisions which I did not author. We took the House version and brought it to the floor in an effort to get this moving in an expedited manner.

I know some of the questions the Senator from Arizona has raised are not new. There was a longstanding debate here in the Senate about whether to expand the notion of minority contracting to include Native Alaskans and Native Hawaiians. Understandably, Senator Stevens of Alaska, who chaired the subcommittee for a long time, and Senator Inouye, who also chaired the subcommittee—and unfortunately he passed away just a few weeks ago—believed that the minority status for contracting should include their native tribes people. They fought for it, and it was included. I know the Senator from Arizona perhaps took exception to that and debated with them. To renew that debate is perfectly appropriate, but it is not a new provision in the bill. It is something that has been there for some time. I welcome the debate. I think it is a fulsome debate and an important one, but I wanted to say that for the Record.

This is the House Republican bill and the measures which the Senator from Arizona addressed have been debated for a lengthy period of time. Some issues that were raised are new to me. I have to look more closely—and I should—to find out the merits of the provisions.

Before we go any further with that, I——

Mr. MCCAIN. Mr. President, could I briefly respond?

Mr. DURBIN. Mr. President, if I could ask any time that we use from now until the managers arrive on the floor be for debate only. I ask unanimous consent for that purpose.

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

Mr. MCCAIN. Mr. President, I say to my friend I had no assurance that what came from the House—the defense portion of this bill—was going to be ''preconferenced,'' and that it was going to be the final bill. So to expect for me to honestly examine the House-passed bill without knowing what the disposition of it would be on the Senate side is a little much. During the intervening time, the Senator from Oklahoma and I have found items in this bill that have nothing to do with the defense bill. For example, $65 million for Pacific coast salmon restoration for States including Nevada. I know there are rivers coursing through Nevada all the way to the Pacific Ocean, but the point is there is $993,000 in grants to dig private wells for private property owners.

We have a list of provisions which we were able to uncover which we find controversial and should be open for debate and discussion. But it is over, and we are moving forward.

I hope the Senators whose amendments have just been made and ordered will come to the floor so we can debate and vote.

I thank the Senator from Illinois, and I yield the floor.

Mr. DURBIN. I see my friend and colleague from the State of Rhode Island, who serves on the Defense Appropriations Committee as well as the Armed Services Committee, and I will yield to him next.

I do want to say a word about the Department of Defense appropriation contained in this bill. This act provides $604.9 billion, including $87.2 billion for overseas contingency operations. That is a reduction from the 2012 level of $633.2 billion. There were no changes in the bill that passed the House last week. The bill fully complies with the spending caps in the Budget Control Act. It contains no Member-requested earmarks in compliance with the earmark moratorium. Congress has cut the defense budget to find programs which we believe are excessive to accommodate scheduling delays, budget errors, and unspent funds.

The bill includes 671 cuts to programs in the budget request that have funds that are not needed for the remaining 6½ months of the year. I believe everyone should agree with the notion that if we are going to replicate last year's budget—for goodness' sake, we are not going to build the same ship twice, so we are trying to avoid those obvious misappropriations and waste of Federal tax dollars.

The bill also rescinds $4 billion in unspent prior-year appropriations for 87 programs that have been delayed or terminated.

There has been talk in the press that the Defense appropriations bill included here gives an advantage to the Pentagon when it comes to sequestration, but that is not true. Until this bill is enacted, the Defense Department is dealing with two challenges: sequestration and the threat of defense being under a full-year continuing resolution for the first time in our Nation's history.

This bill does nothing about sequestration. Nearly $42 billion in defense cuts have already been ordered by the President, and this bill does not change that at all.

Some people think the Defense Department is being afforded special treatment in being able to transfer money to deal with sequestration. In fact, this bill keeps a tight rein on the Pentagon's transfer authorities. The bill actually provides less transfer authority than what the Defense Department requested in February of 2012.

The Defense Department asks for $5 billion in general transfer authority. The bill allows $4 billion. The Defense Department asks for $4 billion in transfer authority for overseas contingency accounts. The bill provides $3.5 billion. All these transfer authorities are subject to congressional approval processes.

The perception that this bill gives the Pentagon excessive flexibility to deal with sequestration is not correct.

The other challenge facing the Department of Defense is the threat of a year-long continuing resolution if we fail to pass this bill—a bill that would do nothing more than extend the authority of last year's spending bill. Some of the Department's most pressing fiscal challenges relate to trying to live in today's world using last year's budget. Passing a defense bill will give the Pentagon relief from the threat of living under a full-year continuing resolution for the very first time. But that is not because of flexibility, that is because an appropriations bill is a better steward of taxpayer dollars than a continuing resolution.

Here are five reasons why a continuing resolution would be harmful to our national defense: Readiness. Readiness is the way to measure whether our troops are properly trained and equipped to do their mission. Under last year's funding bill, operation and maintenance accounts would be underfunded by $11 billion. In other words, if we just took last year's bill, we would be short $11 billion in preparing our troops for battle. I will tell my colleagues that these operations and maintenance accounts which result in readiness training mean survivability for our men and women in uniform. It is that basic. That directly translates into less training, if we don't do something about it, and delayed repair of equipment. Every member of the Joint Chiefs of Staff has warned us that readiness is on the verge of plummeting because of fiscal uncertainty. That is disgraceful and unacceptable. Once readiness goes down, it takes years to rebuild it.

Spending on unneeded programs is also a concern. Continuing last year's bill would fund $17 billion worth of programs that are no longer needed—specifically 31 programs that have ended.

For example, a continuing resolution would provide $2.6 billion for MRAP armored vehicles. The Pentagon has already bought these vehicles, and with our troops beginning to draw away from Afghanistan, we don't need more at this moment. This bill would not provide funds for unneeded programs such as this.

Third, no new starts or multiyear authority. A simple extension of last year's bill would extend the prohibition on new programs and multiyear contract authority. A multiyear contract must be specifically authorized by law and only when the government would save approximately 10 percent compared to buying each year's requirements.

If this authority is not provided, the taxpayers stand to lose $150 million in cost savings for the V–22 *Osprey* and as much as $373 million in savings on the Army's Chinook helicopter. To put that in simple terms, if we can enter into multiyear contracting and get discounts on what we will need in the future, it is in the best interests of our national defense and the taxpayers. Losing that multiyear contracting results in the opposite. We overpay for things we know we will not need.

When the government needs to be finding ways to make taxpayer dollars stretch further, a simple extension would require the government to turn away from cost savings that have already been negotiated.

On the fourth point, shortfalls will go unaddressed. There is a long list of shortfalls in the defense budget that are not controversial but wouldn't be fixed by a continuing resolution. Here are just a few examples we are considering: $1.5 billion for National Guard equipment; $2.3 billion for ship operations; $271 million to close the shortfall in TRICARE health care programs; $211 million added for the Iron Dome missile defense program that protects Israeli cities from short-range rockets.

The President of the United States visited us yesterday for lunch and talked about his upcoming trip to the Middle East to meet with our allies in Israel. I will tell my colleagues the President, as well as the leaders in Israel, know how important the Iron Dome missile defense program is and we should not shortchange it.

Another example: $45 million is added to focus intelligence efforts on finding Joseph Kony, the notorious leader of the Lord's Resistance Army in Uganda.

I recently visited Africa. I have been in the field with our troops who are stalking this man and they will find him. He is a notorious murderer. The President has said we will put an end to his reign of terror and we will. This bill, the bill we are considering, will provide the funds to finish that.

Let me summarize by saying this bill is a compromise solution that meets budget caps, does not unfairly help the Department of Defense compared to other agencies. It eliminates wasteful and unneeded spending, lowers the risk to readiness and the threat of a hollow force, takes care of our troops and their families, and addresses the priorities of our national defense.

I will not quibble or argue with my colleague from Arizona or any other colleagues. If there are provisions in the House bill—which is included here in its entirety—that need to be challenged, addressed, debated or changed, so be it. That is why we are here. But we are starting with this and with the good intention of finding funds for the Department of Defense in very challenging times.

I yield the floor to my friend from Rhode Island.

The ACTING PRESIDENT pro tempore. The Senator from Rhode Island.

Mr. REED. Mr. President, first, let me commend the Senator from Illinois for a very thoughtful statement about the pending appropriations bill, particularly with respect to the funding of the Department of Defense.

I wish to spend a moment to talk about another looming issue that is beyond appropriations but is rapidly approaching.

In June of last year, as we commemorated the 40th anniversary of legislation to establish the Pell Grant Program, we narrowly averted a doubling of the interest rate on need-based student loans.

Back in January of 2012, Congressman COURTNEY and I introduced legislation to permanently extend the 3.4-percent interest rate that has helped make college loans more affordable for millions of students across the country. But my colleagues on the other side of the aisle instead voted for budgets that effectively called for the doubling of the rate. They did this at a time when students are struggling—and I will point out some of the difficulties we face—at a time when college costs are increasing and at a time when college is becoming more and more essential for obtaining any type of long-term, stable employment and ability to contribute to the continued economic growth of the country.

It took thousands of calls and letters and rallies from students and parents across the country and President Obama himself getting involved in this issue to bring everyone to the table to negotiate. However, we were only able to get a temporary, short-term fix. Essentially, we were able to keep the interest rate at 3.4 percent but only until July 1 of this year. Interest rates will again double then on these need-based loans unless we act.

One of the other ironies, of course, is that even at 3.4 percent, that is a substantial interest payment at a time when Federal fund rates are closer to 1 percent and when large financial institutions can borrow at these very low rates, et cetera. So given that factor also, it is essential we once again respond, prior to July 1, to the anticipated doubling of the student loan rate.

Now is the time to develop not just a short-term solution but a long-term solution to this growing burden of student loan debt, the rising cost of college, and the need to improve higher education outcomes so students complete their degrees and get the full benefit of their investment in education and we get the benefit as a society and as an economy of their education.

Everyone agrees college costs are too high and are climbing higher. There has to be real reform by higher education in terms of the way they deliver services. They cannot continue to pass on increased costs. If that continues to happen, families will be priced out of a college education, even with our grants and loans; so we have to do something.

Student loan debt is the next big financial crisis we are facing. Even if we act now, we are looking at some very sobering statistics about the growth of student loan debt already. That should prompt, again, action now to prevent the doubling of the interest rate and longer term action to control the costs of higher education and the ability of families to respond to those costs.

Student loan debt continued to rise throughout the recession. In fact, one of the ironies of the recession is people can't find jobs; they are going back to college to get more training and sometimes they are going back to college because that is what they can do. So the irony, of course, is we are adding to the student debt. In fact, today, student loan debt is the second largest outstanding balance after mortgage debt. It eclipses credit card debt. It is the second largest outstanding balance in our economy behind mortgage debt. Borrowers are struggling under that debt.

The Federal Reserve Bank of New York recently reported that 17 percent of student loan borrowers are more than 90 days past due on their payments—a large increase from under 10 percent in 2004. So in roughly a decade, we have seen an increasing amount of students unable to shoulder the burden of their debt. Even worse, if we consider that 44 percent of student loan borrowers are not in repayment—these are people who statutorily don't have to start paying—the effective delinquency rate rises to more than 30 percent. That is stunning.

This is affecting also the lives of these young people at a time when they are beginning to establish or are hoping to establish households. A recent Pew Research Center survey illustrates what is happening. As the percentage of young adult households with student loan debt climbed from 34 percent in 2007 to 40 percent in 2010—again, a huge increase in debt—the share of younger households owning their home has declined sharply from 40 percent in 2007 to 34 percent in 2011. Home ownership, which is one of but not the only measure of the American dream, is also one of the strongest supports of the American economy, but it is rapidly being priced out of the reach of young students because of their student debt. They literally can't qualify for mortgages.

Car ownership shows a similar trend. In 2007, 73 percent of households headed by young adults owned or leased at least one vehicle. By 2011, that figure dropped to 66 percent.

Students are caught literally between a rock and a hard place. Huge financial debts for their college education prevent them from buying homes, buying cars, and prevent this economy from growing as it has in the past because of new households, young households coming into the marketplace, buying homes and buying cars and starting families.

We can't do away with education. It is more important each day in a global economy. We have to deal with this issue of rising costs. The cost of attending college has increased by more than 550 percent since 1985. Let me repeat that: 550 percent. That is rising faster than gasoline, health care, and other consumer items. It is skyrocketing. Again, the universities, the colleges, education leaders at every level—Federal, State, and local—have to begin to respond to this rising cost of education. But keeping student loans affordable and interest rates low is one part of the solution, particularly this immediate crisis facing us by July 1.

The Federal Government should price student loans based on our actual costs of operating the student loan programs. We should set the student loan interest rates in a way that minimizes the cost for students while covering most of the cost for the taxpayer. The Federal Government provides student loans to increase the number of Americans who can obtain college degrees. We do not and should not run these programs to generate revenue. They should be to increase the capital—the human capital—of our country. I plan to introduce legislation to set student loan interest rates based on the principles of keeping costs low for both students and taxpayers.

Providing more grant aid through Pell grants and other programs is another way to tackle these college costs. However, if college costs continue to rise at the current rate, students relying on the Pell grant will continue to lose ground. We need States and institutions to partner with us to make college affordable. Again, it has to be a cooperative effort.

With respect to the Pell grant, I have talked about the loans, but the Pell grant is just an outright grant of funds to the student without the need to repay. It was for a long time the backbone of our Federal support to students in college and families trying to put their children through college.

In 1976 the Pell grant maximum was $1,400. That was enough to cover 72 percent of the cost of attendance at a public 4-year college. In fact, in those good old days, with a Pell grant and a summer job and a little help, you were usually able to emerge from college after 4 years without a huge debt, and you could start your family and buy your car at a younger age.

In 2010 the maximum Pell grant was increased to $5,550, but that is only enough to cover 34 percent of the cost of attendance at a public 4-year college.

In my State, we have been particularly hard hit by this recession and economic downturn, and students and families are feeling this pressure of increased tuition and higher fees at schools and colleges acutely. They need these resources, and we have to ensure that they get these resources.

As I indicated, I am planning to introduce legislation to strengthen our higher education system and student aid programs by reestablishing a strong Federal-university-State partnership for college access and affordability and by requiring institutions to assume more of the risk in the student loan programs and to do so in a way that I think will vindicate our best principles and our soundest economic rationale.

I look forward to working with Chairman HARKIN. He has been a leader on these issues for so many years, both as the chairman of the HELP Committee and chairman of the Appropriations subcommittee. We want to start by preventing, obviously, the doubling of student loans by July 1. That is step 1, but it cannot be the last step.

Mr. President, with that, I yield floor.

The ACTING PRESIDENT pro tempore. The Republican whip.

Mr. CORNYN. Mr. President, I come to the floor on the 1,414th day since the Senate has passed a budget and on a day where, amazingly, the President of the United States is reported to have said: ''We don't have an immediate crisis in terms of [our] debt.''

Well, we do have a debt crisis that threatens both future generations—because somebody is going to have to pay that debt back, and thanks to abnormally low interest rates, right now they are not spiraling out of control, but if interests rates were to return to historic norms, I believe for each additional percentage point in interest we would have to pay on our national debt, it would result in roughly $1.7 trillion more we would have to pay back. So in many ways the United States is lucky, even though we are on the brink of what scholars such as Reinhart and Rogoff have said—we are on the precipice of a debt crisis because once interest rates begin to rise, the creditors lose confidence in our ability to repay that debt, and our economy spins out of control, resulting not only in a severe recession or worse but also harm to some of the most vulnerable people in our society who depend on the safety net that government provides.

It is also, in a debt crisis, impossible for the Federal Government to do what it must do in terms of national security. Indeed, that is what led the former Chairman of the Joint Chiefs of Staff, Mike Mullen, to say that the single greatest threat to our national security is our debt. And it keeps getting worse and worse because the President seems unwilling to deal with the obvious and to enter into what he likes to call the grand bargain but one that can only occur if the President is willing to talk about the entire economy and not just raise taxes.

The President has said that we must embrace a balanced approach to deficit reduction. Of course, reasonable people can disagree on what a balanced approach looks like, but we all know what a balanced budget looks like.

Yesterday morning House Republicans released a plan that balances the Federal budget over the next 10 years. We still do not have the President's proposed budget even though it was due on February 4, and we are now advised that we may not see the President's own proposed budget until sometime in April, which, coincidentally, is after the time that the House and the

Senate will act on their proposed budgets. It seems once again that the President has taken to leading from behind.

For that matter, White House Press Secretary Jay Carney has told us that the President's proposed budget will not even try to balance the budget but, instead, put us on what he calls a ''fiscally sustainable path.'' But that cannot be true. Unless the Federal Government adopts serious reforms to Medicare and Social Security, mandatory spending programs which occupy roughly 61 percent of all Federal spending—the kinds of reforms the President has constantly rejected—we cannot put our country on a fiscally sustainable path by definition.

As the President knows because his own bipartisan fiscal commission told him so in December 2010, to save Medicare we must make structural changes that ensure the program will be affordable over the long term. I do not know any young person the age of my two daughters—30 and 31—who actually believes Medicare and Social Security are going to be there for them when they retire. They simply do not believe it because they see the irresponsibility of the present generation in not only racking up bills they are going to have to end up paying, they are seeing us do nothing to address the fiscally unsustainable path for Medicare and Social Security.

Any of us who have studied the problem understand what the problem is with the Medicare system. Right now, an average couple will put, let's say, $1 in the Medicare trust fund for every $3 they will ultimately take out of it. This is not a pay-as-you-go system by any means, as opposed to Social Security, where basically you will get $1 out for every $1 you put in Social Security—but not Medicare because of its unique problems.

The current Medicare system incentivizes quantity over quality, and its price controls distort the entire health care market. In my State, in Texas, about one-third of the doctors will not even take a new Medicare patient because of government price controls that basically provide compensation to them roughly one-third less than what private health insurance plans would provide. Expanding those price controls, as the President has proposed, would only make Medicare's problems worse.

For all the challenges Medicare has, Medicaid—which is designed to provide health care to low-income Americans—is even worse in terms of the compensation provided to medical providers, hospitals, and doctors, and so many of them simply will not take Medicaid patients, leaving Medicaid-eligible beneficiaries ''coverage'' but no access in many instances.

By restructuring the Medicare Program and increasing competition, we can hold down cost growth in Medicare and make it available not only to the present generation of seniors but also to future generations of seniors. That is the sort of serious issue that is not going to go away that the Senate budget should deal with.

It should also provide a framework for sensible Tax Code reform. We all know the Tax Code is way too complicated. We also know it is riddled with tax credits, deductions, credits—what the Simpson-Bowles Commission called tax expenditures. Yet the President does not want to eliminate those tax deductions, credits, and expenditures for the purpose of reforming the Tax Code, bringing down marginal tax rates not only for businesses and individuals, he wants to use it to raise taxes again.

There is a bipartisan consensus, however, that tax reform should lower the rates and broaden the base. Indeed, those are the recommendations of the Bowles-Simpson Commission and the Domenici-Rivlin panel as well. But, as I said, the President wants to use what he calls tax reform as a Trojan horse to raise taxes again. He argues that we will not have a balanced approach to deficit reduction unless we pass another massive tax hike, and that is after the President raised taxes by $600 billion in January.

From what I understand, our friends across the aisle—Senator MURRAY, as the chairman of the Senate Budget Committee—are about to unveil a budget proposal that would raise taxes again by at least $1 trillion.

I realize that if you think government is the answer to almost every question that comes up in America today, you are going to need bigger government, more intrusive government, funded by higher tax revenue. But they seem to be forgetting a few things. First of all, the Congressional Budget Office tells us that Federal tax revenues in 2014 are already projected to exceed the historical average. Secondly, the President's health care law, ObamaCare, already contains another trillion-dollar tax increase that is discouraging job creation and hurting our economy. Finally, as I pointed out, Democrats in this body already got a $600 billion tax increase earlier this year, while hard-working Americans—the middle class in America—got a tax increase with the return of the payroll tax.

By my view, no one should be talking about another tax increase until the Federal Government quits wasting so much taxpayer money. My colleague from Oklahoma, Senator COBURN, who was just on the Senate floor, has singlehandedly worked tirelessly to expose frivolous and unnecessary spending, and the numbers are remarkable. For example, when Senator COBURN asked the Government Accountability Office to investigate how much Federal spending was duplicative, the Government Accountability Office found that more than $364 billion of duplicative spending existed. And the President wants to close down tours at the White House because of the budget sequester. Give me a break.

How can anyone support another massive tax increase when the Federal Government is literally spending hundreds of billions of dollars on redundant services? For that matter, how can anyone support another massive tax increase when we are spending nearly $15 million each year to give millionaires unemployment checks? How can anyone support another massive tax increase when we are spending $½ million on shampoo products for dogs and cats? That is your Federal Government at work for you. How can anyone support another massive tax increase when we are spending $181,000 studying the effects of cocaine on Japanese quail? I know these sound ridiculous to the extreme, but that is the whole point. The Federal Government is littered with spending that we simply do not need, and yet, rather than do something about that, our friends across the aisle want to raise taxes once again, along with the President of the United States.

No one said cutting spending or reforming entitlement programs or overhauling our Tax Code would be easy. But if the President truly wants a balanced approach to our fiscal and economic challenges, he will stop leading from behind and start leading from the front.

I am shocked the President would say in an interview with Jon Karl, ABC News, that there is no immediate crisis in terms of the debt. What he might be forgetting is what economists tell us: When the debt gets so large, it retards economic growth. Forget the debt crisis part. That has an immediate impact on job creation in America.

We are all wondering why the recovery from the recession of 2008 has been the slowest since the Great Depression. Well, one reason is people are worried about tax rates going up because they see debt upon debt being piled up. They are sitting on the sidelines waiting to see what is going to happen. They are also experiencing additional costs in terms of health care, when they were told by the President back in 2008–2009 if we passed ObamaCare, the average family would see a reduction in their health insurance premiums by $2,500. They were also told a lot of other things, such as if you like what you have, you can keep it. That did not end up being true either.

The President needs to listen to his own experts, such as the bipartisan fiscal commission he himself appointed. Not only do we risk a debt crisis if we do not deal with the $16.5 trillion debt we have if interest rates were to go up, it is having an immediate impact on unemployment. More than 20 million people in this country are either out of work or working part time and want to work full time. That ought to be enough to get the President to act.

Should he choose to act, should he choose to lead, we will be happy to meet him halfway to deal with the single most important issue facing the

country today. But it starts with passing a budget, something Senate Democrats have not done for 1,414 days.

I yield the floor, and I suggest the absence of a quorum.

The PRESIDING OFFICER (Ms. HEITKAMP). The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Ms. MIKULSKI. Madam President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

Ms. MIKULSKI. Madam President, thanks to the cordiality and cooperation of Members on both sides of the aisle, but particularly those who initially had an objection to us going forward, we now can move forward. We are waiting for the junior Senator from Texas, Mr. CRUZ, to come to the floor. He will be offering the first amendment. As soon as he gets here, we are off and running.

I am going to thank everybody for getting us to this point: Senator SHELBY for working with me on the bill, Senators REID and MCCONNELL, and particularly now Senators MCCAIN and COBURN. We have a way of addressing their concerns. So we are ready. We are waiting for the Senator.

I note the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

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

The PRESIDING OFFICER. Without objection, it is so ordered.

The Senator from Texas.

AMENDMENT NO. 30 TO AMENDMENT NO. 26

Mr. CRUZ. Madam President, I call up my amendment No. 30.

The PRESIDING OFFICER. The clerk will report.

The legislative clerk read as follows:

The Senator from Texas [Mr. CRUZ], for himself, Mr. LEE, Mr. INHOFE, Mr. PAUL, Mr. RUBIO, Mr. CORNYN, Mr. JOHNSON of Wisconsin, Mr. RISCH, Mr. VITTER, Mr. COBURN, Mr. SCOTT, Mr. HELLER, Mr. TOOMEY, and Mr. JOHANNS, proposes an amendment numbered 30 to amendment No. 26.

Mr. CRUZ. I ask unanimous consent that the reading of the amendment be dispensed with.

The PRESIDING OFFICER. Without objection, it is so ordered.

The amendment is as follows:

(Purpose: To prohibit the use of funds to carry out the Patient Protection and Affordable Care Act)

At the appropriate place, insert the following:

SEC. ___. PROHIBITION ON FUNDING.

None of the funds made available in this Act may be used—

(1) to carry out any provision of the Patient Protection and Affordable Care Act (Public Law 111–148) or title I or subtitle B of title II of the Health Care and Education Reconciliation Act of 2010 (Public Law 111–152), or the amendments made by such Act, title, or subtitle; or

(2) for rulemaking under such Act, title, or subtitle.

Mr. CRUZ. Madam President, I rise to deliver my first official speech on the floor of the Senate on an issue which I believe is the most urgent issue facing the country; namely, the dire need to restore economic growth to our Nation.

I will note at the outset this is the second opportunity I have had to speak on the Senate floor. The first was last week during the historic filibuster led by the junior Senator from Kentucky for nearly 13 hours.

I will note a particular debt of gratitude I owe to Senator PAUL. The very first time I spoke on this floor was in a colloquy with Senator PAUL. I had the opportunity to read Travis's letter from the Alamo, to read Shakespeare's ''St. Crispin's Day Speech,'' to read the opening monolog from ''Patton,'' and to read Ronald Reagan's 1964 speech, ''A Time to Choose.'' This is a debt I will always owe Senator PAUL. As they say in the beer commercial: ''It don't get no better than that.''

Sadly, I promise my colleagues in the rest of my tenure, I am confident we will not have an opportunity to rival those glorious words William Barret Travis penned as he was standing for principle 177 years ago.

This being said, the topic of the day is, in my judgment, a topic of exceptional importance. Every elected Member of Congress, whether Republican or Democratic, should have as their very first priority restoring economic growth in this country. In the last 4 years we have seen stagnant growth. In the last 4 years our economy has averaged 0.8 percent growth each year. To put that in context, this is a fraction of historical levels. Since World War II, our economy has enjoyed 3.3 percent growth per year.

Last quarter the economy was struggling along and grew 0.1 percent. It was effectively stagnant.

If we want to solve the great many fiscal and economic challenges facing this country, growth is the critical precondition. If we want the 23 million people who are struggling to find jobs to get back to work—and I know every one of us wants those 23 million people to get back to work—we must restore economic growth. If we want to turn around the train wreck which is the balance sheet of the Federal Government, our perennial recurring deficits and debts, this can't be done without restoring growth.

In my view we should be working across the aisle in a bipartisan way to focus on bringing growth back. This should be our No. 1 priority. Given that, the purpose of this amendment is to advance economic growth and, in particular, to delay funding of ObamaCare until economic growth returns.

Let me be clear. In my view ObamaCare should be repealed in its entirety, which was the very first bill I introduced in the Senate. At a minimum, in my judgment, ObamaCare should not be funded and implemented at a time when our economy is gasping for breath, at a time when our economy is struggling to such a degree that implementing it right now could well force us into a recession.

It seems to me every Member of this body should stand together in acting decisively to prevent this economy from being pushed into a recession. Implementing ObamaCare at a time when the economy is so weak could do just that. ObamaCare hurts the economy. It hurts jobs. It hurts young people. It hurts Hispanics. It hurts African Americans. It hurts single moms. It hurts everybody struggling to climb the economic ladder.

I would like to initially talk about four promises which were made when ObamaCare was passed and the reality we have seen as it has begun to be implemented. It is ironic the law is called the Affordable Care Act. In the 3 years it has begun to be implemented, it has proven to be neither affordable nor caring.

No. 1, before ObamaCare was adopted, President Obama promised the American people ObamaCare would reduce the cost of insurance. In particular, the President said American families would pay $2,500 less for their insurance premiums by the end of his first term. I would note his first term ended not long ago. Today, American families are not paying $2,500 less in health insurance premiums. They are not paying a penny less. Indeed, today American families are paying $3,000 more in health insurance premiums than they were. That is a $5,500 swing out of the pockets of hard-working Americans who are struggling make ends meet. The reality has not lived up to the promise.

The management consulting firm Oliver Wyman issued a new study recently which predicted people aged 21 to 29 could see a 42-percent hike in premium costs. The higher premiums in particular are hitting young people. Indeed, I would point out, if you are a young person, this law going into effect right now when the economy is struggling is particularly problematic. If you are a young person coming out of school today, you are facing: No. 1, fewer jobs. If you didn't graduate from high school, you are facing an unemployment rate today of over 12 percent. You have less opportunity. If you are between 16 to 19, you are facing an unemployment rate of over 25 percent.

If you are a minority, if you are Hispanic, you are facing an unemployment rate of nearly 10 percent. If you are African American, you are facing an unemployment rate of over 14 percent.

What are you seeing actually in the job market if you are lucky enough to get a job? More and more employers are dropping health care coverage because of the burdens of ObamaCare. More and more employers are forcing employees to work fewer hours because of the burdens of ObamaCare. More and more individuals are seeing their premiums climb, especially young people.

If you are a young person coming out of school today, you may not find a job.

It is harder to find a job because of economic growth right now. If you do find a job, there is a real possibility that job will not have health insurance and you will find your hours reduced. If you do have health insurance, you will pay higher premiums. The promises have not lived up to the reality.

The second differential between promise and reality is President Obama repeatedly told Americans, ''If you like your health plan, you can keep it.'' This unfortunately has not proven to be the case.

The latest forecast from the Congressional Budget Office estimates some 7 million people are expected to lose or be dropped from their employer-provided health insurance by the year 2020. Indeed, health insurers in 34 States have stopped carrying child-only insurance policies. In my home State of Texas, one of the largest insurance markets in the country, every single carrier has dropped its child-only health insurance coverage. The same is true for other large States such as Florida and Illinois. The promise, if you like your health care coverage, you will be able to keep it, has not lived up to reality, as more and more Americans are losing their health insurance.

No. 3, President Obama pledged repeatedly not to raise taxes on families making less than $250,000 a year. That promise has not materialized. Within ObamaCare, there is a tax on those who do not maintain government-approved health insurance. There are increases on the threshold of the deduction for unreimbursed medical expenses. There is an increase in taxes on distributions from Health Savings Accounts and from flexible spending arrangements. Indeed, in total, over $1 trillion in tax increases are contained within ObamaCare. The promise has not lived up to the reality.

The fourth promise which has not lived up to the reality is in February of 2010, former House Speaker NANCY PELOSI said ObamaCare would create 4 million jobs, 400,000 jobs almost immediately.

This was in 2010. By 2011, the CBO Budget Director testified before a House Budget Committee that ObamaCare would result in an estimated 800,000 fewer jobs in the United States by 2021. The promises have not lived up to reality.

I wish to talk about five distinct harms which have come from ObamaCare and made life more difficult for Americans.

No. 1, ObamaCare harms the poor and those who are struggling to climb the economic ladder. Right now, 60 million people are enrolled in Medicaid. Medicaid is a program which is struggling, which is challenged and desperately in need of reform to improve how it operates. ObamaCare, by raising the eligibility age and trying to incentivize and pressure States into expanding Medicaid, is designed to move at least an additional 18 million people onto Medicaid over the next 10 years.

The data demonstrates Medicaid beneficiaries face worse health outcomes than just about anybody else in the marketplace.

In 2010, the ''Annals of Surgery'' issued a landmark study which examined the outcomes from nearly 900,000 individuals undergoing surgery from 2003 to 2007. The conclusion of this study was Medicaid patients were almost twice as likely to die as those with private insurance. Medicaid patients' hospital stays were 42 percent longer and cost 26 percent more.

Even more striking, Medicaid patients, when compared to people without health insurance, people who were uninsured, Medicaid patients were 13 percent more likely to die. They stayed in the hospital for 50 percent longer and cost 20 percent more.

In 2011, Johns Hopkins did a study of patients undergoing lung transplantation. Their conclusions were very much the same. They found that Medicaid patients were 8.1 percent less likely to be alive 10 years after the transplant compared with those with private insurance and also compared to those without any insurance at all. Overall, the Johns Hopkins study found that Medicaid patients faced a 29-percent greater risk of death, and yet ObamaCare is moving more and more of the economically disadvantaged onto Medicaid, which subjects them to those worse health care outcomes.

No. 2, ObamaCare hurts seniors. ObamaCare took $716 billion from Medicare, a large portion of which came from the Medicare Advantage Program which serves a great many seniors, and especially poor seniors. According to the Office of the Actuary at the Center for Medicaid and Medicaid Services, the Medicare Advantage cuts in ObamaCare will reduce enrollment from 14.8 million to 7.4 million by 2017. It will cut it in half. Seven million people will lose their coverage under Medicare Advantage.

I would remind everyone that the President said, ''If you like your health insurance, you can keep it.'' Yet 7 million seniors are losing Medicare Advantage.

The Heritage Foundation found the substantial cuts to Medicare Advantage in particular hurt seniors in the States of Texas, California, New Mexico, Louisiana, Alaska, New York, Massachusetts, and also in the District of Columbia. Those States are expected to lose more than 50 percent of their enrollees by 2017.

I would suggest that each of us, as we return to our constituents, as we return to address seniors, any in this body who vote today to implement ObamaCare despite the difficult economic times, should be prepared to answer to seniors in our States who say: Why did you vote to damage the Medicare Advantage Program that I was relying upon?

Also, the harm to Medicare Advantage in particular is visited upon minorities. Hispanics are twice as likely to enroll in Medicare Advantage than the average Medicare beneficiary. African Americans are 10 percent more likely. So ObamaCare targets a program that is helping seniors and in particular is helping those seniors who are most vulnerable. In addition, 31 percent of African-American Medicare beneficiaries and 38 percent of Hispanic beneficiaries are enrolled in Medicare Advantage plans.

So those of us who return to our States that have substantial minority populations need to be prepared to explain to Hispanic seniors and African-American seniors why this body, why the Federal Government is damaging a program they are relying upon for essential health care.

No. 3, ObamaCare is harming jobs. In March 2013, the Federal Reserve said, in its annual ''beige book''—which analyzes economic data from across the country—that ''employers in several Districts cited the unknown effects of the Affordable Care Act as reasons for planned layoffs and reluctance to hire more staff.''

Added health care costs are making it harder for businesses to hire new workers and especially low-skilled workers. This is a point that is worth underscoring because the detrimental effects of ObamaCare are not uniformly distributed throughout our population. They fall the hardest on those who are most vulnerable among us. The Heritage Foundation found that ''workers who cannot produce at least $20,000 per year'' for a single plan ''or $27,500 per year'' for a family plan ''of value to employers will have serious difficulty finding full-time jobs.''

Madam President, when I read those statistics, those are not simply empty words on a page. Those are data that strike very close to home because 55 years ago that precisely described my father. When my father came as an immigrant from Cuba in 1957, he was 18, he was penniless, and he could not speak English. The very first job my father received in Austin, TX, was washing dishes making 50 cents an hour.

The reason—he told me—he got that job was, he said: Look, I couldn't speak English. I couldn't interact with people as most jobs required, but I could wash dishes. So he worked 7 days a week. The reason he worked 7 days a week is because when you washed dishes, they allowed the employees to eat, and he didn't have the money to buy food. So by working 7 days a week, he ensured he ate 7 days a week.

So when I read statistics like this and the words, ''those who cannot produce $20,000 per year in value to an employer will find themselves unable to find jobs,'' I can't help but think about my dad as that 18-year-old kid just beginning to climb the job ladder, not speaking English, not having yet developed skills, but what he could do

was wash dishes. And working at 50 cents an hour is what enabled him to pay his way through the University of Texas. It is what enabled him to graduate, to get a higher paying job, and eventually to start a small business. Then, today, to become a pastor.

My father is here today visiting me, and I think about the impact these burdens would have had on him, and I tell you I am grateful that in 1957 this so-called Affordable Care Act had not been implemented because it could well have shut down the opportunity for him to survive and pay his way through school and begin climbing the economic ladder.

Additionally, ObamaCare keeps small businesses small. ObamaCare is designed so that its principal burdens are triggered when a business has 50 employees or more. As a consequence, there is an incredible deterrent to small businesses hiring more than 50 employees because hiring that 50th employee triggers enormous burdens and expenses. That has particular implications for everyone in this economy struggling to find work because two-thirds of all new jobs come from small businesses. By keeping these businesses small, what we are doing is stifling the ability to grow the economy, and in particular to grow the economy by creating opportunities for those who need to begin and want to begin climbing the economic ladder.

By hiring the 50th employee, if a small business does not provide government-approved insurance, it faces a penalty of up to $3,000 for each uncovered worker beyond 30 employees. Thus, as the Wall Street Journal explained:

> If a company with 50 employees hires a new worker for $12 an hour for 29 hours a week, there is no health insurance requirement. But suppose that worker moves to 30 hours a week. This triggers a $2,000 Federal penalty. So to get 50 more hours of work a year from that employee, the extra cost to the employer rises to about $52 an hour—the $12 salary and an ObamaCare tax of what works out to be $40 an hour. Moving to 33 hours a week costs the employer about $10 more in ObamaCare tax.

The result is small businesses are staying smaller, and the opportunities for those struggling to achieve the American dream are limited. That leads to the fourth harm: ObamaCare hurts workers.

One of the consequences we are seeing over and over is that in order to avoid the crushing costs of ObamaCare, employers are limiting the hours employees can work. So, for example, in January, a Wendy's franchise in Nebraska announced it would cut the hours of nonmanagement employees to 28 hours a week. As a result, about 100 employees' hours were cut. That is a direct impact of ObamaCare for those 100 employees who were working at Wendy's.

Now, some may say: Well, is Wendy's a career? So many kids, so many young people, so many Hispanics and African Americans begin, as my father did, washing dishes or flipping burgers, and they use those jobs to gain skills and advance up the economic ladder. To have a law that forces small business owners to reduce those hours, to limit the hours those workers can work, is particularly harmful.

A Taco Bell in Guthrie, OK, has also cut worker hours. A single mother of three told Oklahoma News 9:

> They informed everybody that nobody was considered full time any longer, that everybody was now considered part-time, and [they] would be cutting hours back to 28 hours or less due to ObamaCare.

She went on:

> Several of the people I work with, some of them are single parents, and we do the best we can, and 28 hours a week just isn't going to cut it for the bills.

For those who are struggling, for the single moms in this country who are working as hard as they can to provide for their kids, seeing their hours reduced because of the consequences of this law is a real and material hardship, and that, sadly, is happening all over the country.

Stephen Caldeira, president of the International Franchise Association, predicts that ''many stores will have to cut worker hours out of necessity.''

Let me point out, by the way, it is not hard-heartedness on the part of those small business owners. It is the simple reality of trying to survive in this economy. As Caldeira continues, it could be the difference between staying in business or going out of business.

Indeed, a 2011 Hudson Institute study estimates that the insurance mandate will cost the franchise industry $6.4 billion and put 3.1 million jobs at risk. That is worth underscoring: 3.1 million jobs at risk of kids flipping burgers, of single moms struggling to provide for their kids who are facing hard times because of ObamaCare. It is those who are most vulnerable who are hit the worst.

Indeed, if we look at the premium increases, in particular for young people, they have been significant. If ObamaCare is fully implemented, they are likely to be extraordinary. According to a 2013 staff report from the Senate Finance Committee and the House Energy and Commerce Committee, the ObamaCare impact on young adults in the individual market is expected to be staggering.

If we look at the city of Austin—a city I have lived in for many years, a terrific city, a city whose slogan unofficially is ''Keep Austin Weird.'' It is a young, hip, vibrant——

Ms. MIKULSKI. Weird?

Mr. CRUZ. Weird, which in Austin is very fitting. It is a young, hip, vibrant city. It is referred to as the ''Live music capital of the world.'' Right now, a young adult in Austin in the individual health insurance market pays an average premium of $648. Under ObamaCare, that is anticipated to rise to $1,836. That is a 183-percent increase.

I wish to repeat that, to underscore it. Today, they are paying $648. That is expected to rise to $1,836. An additional $1,200 out of the pocket of a young person struggling to survive is substantial. And, indeed, nationally, that is consistent with the pattern that is expected all over the country. That is the average annual increase. It is parallel to what is expected in Chicago, Phoenix, Atlanta, and Milwaukee.

Madam President, I have been informed that the Senator from Utah has a time issue. I ask unanimous consent to yield to the Senator from Utah, and thank him for joining me.

Ms. MIKULSKI addressed the Chair.

The PRESIDING OFFICER. The Senator from Maryland.

Ms. MIKULSKI. Madam President, as the manager of the bill, I thought we were going to—of course Senator CRUZ has offered his amendment—but we were going to rotate speakers from the Democrats and Republicans. There was no agreement to do roundrobin here, where the Senator from Texas would yield to the Senator from Utah. I think there is some confusion. I wish to follow the traditional regular order, where the Senator from Texas, the proponent of the amendment, has full and ample time; then other Senators respond, and then Senator LEE. I am not going to make a scene, but that is the way we usually do it.

Has the Senator from Texas concluded his remarks?

Mr. CRUZ. In terms of my remarks, I have about an additional 10 minutes I wish to give. But I was just informed that the Senator from Utah had a scheduling issue, and asked if we could show him consideration. I am being told now that—if the Senator from Maryland would prefer, I am happy to continue my remarks.

Ms. MIKULSKI. And for the Senator from Utah, we all have scheduling issues. What we would want to do is make sure everybody has their say. If the Senator from Utah has a statement he wishes to put into the RECORD or wishes to return, we welcome him back. We in no way want to impede his ability to speak.

Mr. CRUZ. Madam President, the issue has been obviated. So if I may simply continue my remarks, and when I conclude, I will yield the floor.

The PRESIDING OFFICER. The Senator from Texas.

Mr. CRUZ. The fifth impact of ObamaCare is that it imposes a substantial harm on the economy. On the economy altogether, ObamaCare includes more than 20 tax increases. The Joint Committee on Taxation estimates that over the next 10 years ObamaCare will raise $1 trillion in taxes. That is $1 trillion from the private sector that is not going to be available to be used to hire new workers.

Job losses just in the medical device industry, as a result of the medical device excise tax, could total as much as 47,100 or 10 percent of the medical device industry employment. Those jobs are needed. Those job losses are not

driven by market conditions. Those job losses are driven by one thing, which is the policy decisions of the Federal Government to implement ObamaCare.

On March 5, 2013, Russell George, the inspector general for the IRS, testified in the House Committee on Appropriations:

> It is unprecedented in recent history the amount of responsibility the IRS is being given in an area that most people don't think of as an IRS function.

He went on, ''This is going to lead to problems.''

The Congressional Budget Office expects ObamaCare penalties to total $130 billion over the next 10 years. That is up $13 billion from previous forecasts. And more taxpayers will be hit with ObamaCare taxes as time goes on. There is a 0.9-percent tax surcharge on individuals' earned income, and a 3.8-percent surcharge on investment income for individuals making more than $200,000.

But those taxes are not indexed for inflation. And so as inflation raises the nominal income of Americans, it will push more and more from the middle class into paying those taxes. The Tax Policy Center estimates that by 2013, 2.4 percent of households will pay one or both of those taxes; by 2022, 4.6 percent of households will pay; by 2032, 9 percent of households will pay. That is a significant additional tax burden falling on Americans.

In addition, one of the most problematic short-term and long-term implications of ObamaCare is less innovation. The United States has enjoyed tremendous advantages because our free-market system encourages investment in innovation. In health care in particular we have seen incredible innovation—whether in medical devices or whether in pharmaceuticals—because the incentives are there to invest in new health care treatment. As a result, millions have lived better lives, have lived longer lives, have not died from diseases that previously were incurable and previously were untreatable. Because of the innovation we have had in the medical field, it has led to the United States enjoying a world-class health care system. ObamaCare is substantially diminishing innovation in health care.

Venture capital, the seed money that funds new research and development in health care, has dropped precipitously. In 2010, venture capital in health care services was $1.2 billion. By 2011, it had dropped more than in half, to $541 million. According to Dr. Scott Gottlieb of the American Enterprise Institute, only about 30 venture stage health care services companies got funded last year, compared to hundreds from previous years.

If we want to continue the incredible medical innovation we have seen over the last century, we can't be drying up the capital that is devoted to research and development, that is devoted to new and innovative companies. And that is exactly what ObamaCare is doing.

Then there are the compliance costs. The compliance costs from ObamaCare are, quite simply, massive. ObamaCare will require American businesses, families, health care providers to spend more than 127 million hours per year in compliance costs. What could be done with 127 million hours? The problem with big numbers is it is hard to get your mind around them. What does it mean that 127 million hours are being spent on complying with ObamaCare?

To put that into perspective, Mount Rushmore—which took 14 years to build—could be completed over 1,000 times, and that is each and every year. That underscores how staggering; we are talking about 1,000 Mount Rushmores each and every year. I would note there may be some Members of this august body who would like to see themselves on those 1,000 or more Mount Rushmores.

But rather than needless compliance, we should be putting that energy into productive endeavors. None of that compliance cost is productive. As we say in Texas, it produces neither trucks nor tortillas. It is simply wasted time dealing with the burdens of government.

To give you a sense of the volume of burdens, as of today the administration has created more than 19,000 pages of regulations, bulletins, and guidance since ObamaCare became law. If the IRS and HHS and the Department of Labor continue at their current pace, we can expect an additional 3,000 pages of rules—which is what I have here, 3,000 pages—in the next 6 months, the period covered by this continuing resolution.

This is 3,000 pages right here. I will tell you, I am very glad I don't have to sit down and read these 3,000 pages. But I will tell you also, yesterday I held a tele-townhall with thousands of Texans. A small business owner asked a question. She said, Look, in our small business, we are struggling to make ends meet. How do we ascertain what these regulations contain? I will tell you, I was very frustrated that I could not give her a good answer, because on my desk here is 3,000 pages, and yet what has already been promulgated is over 19,000 pages. So take this stack and send it six times up in the air. It would reach nearly into the gallery.

I told her, I don't have a good answer for how you, struggling to make payroll, to make sure your employees keep their jobs, possibly digest 19,000 pages of regulations, with new pages coming out without ceasing.

Why is our economy struggling? It is not hard to figure out why our economy is struggling when you think about the compliance costs and regulations that are being heaped on small businesses, when they are told, Figure out what is in the 19,000 pages of regulations, and if you get it wrong, you can be assured the hammer of the Federal Government will come down upon you.

That is why I am introducing this amendment today. This amendment to the continuing resolution is a very simple amendment. It simply provides that none of the funds within the continuing resolution shall be spent to implement ObamaCare or to engage in rulemaking under ObamaCare.

Let me be clear. In my view, ObamaCare should be repealed altogether. I think the harms from ObamaCare—and particularly the harms of the most vulnerable among us—are significant enough that we should repeal it in its entirety. I recognize that is not a view shared by every Member of this body. At a minimum, however, I would submit that every Member of this body will agree that restoring economic growth should be a critical priority. And with our economy gasping for breath—last quarter, we were at 0.1 percent growth—allowing ObamaCare to be fully implemented right now has the potential of pushing this economy into a recession. I know no Member of this body wants to see the economy go into a recession. No Member of this body wants to see the American people pay the price for damaging economic growth. If we allow ObamaCare to be funded and implemented right now, each of us who votes to do so will bear a significant amount of responsibility for the economic damage that comes.

I would submit that every Member of this body, Republican and Democrat, should stand together and say, at a minimum, let's restore growth first; at a minimum, let's wait until we get back to historic levels of growth—3.3 percent—before implementing such an incredibly antigrowth, job-killing omnibus bill.

Let me close with a simple observation of the power of growth. If we could get back to historic averages, 3 percent to 5 percent, every other problem this body wrestles with becomes much simpler to resolve. Four percent growth for a decade would create over 10 million new jobs. Four percent growth for a decade would produce over $3 trillion in additional tax revenue. I would note, that exceeds the tax increases. The revenue from the tax increases that have been proposed by President Obama exceeds the revenue from the tax increases that, my understanding is, the Budget Committee will include in its budget before this body.

I am all for new revenue to pay down our debt. I just believe the revenue should come from economic growth and not from higher taxes that hammer small businesses, kill jobs, and restrict growth.

Most importantly, 4 percent growth over a decade would lift over 3 million out of poverty and into the middle class. Growth sometimes seems to be an abstract number that only economists worry about, but sustained growth is what has led to the unprecedented prosperity of our great Nation. It is the reason why for centuries millions of people have come to America seeking a better life, because there has

been no country on Earth that has allowed so many people to start with nothing and achieve anything.

A stagnant economy hurts, first and foremost, those struggling to climb the economic ladder. And, in my opinion, every one of us should come in to work every day fighting for those struggling to climb the economic ladder to make sure we remain the land of opportunity; to make sure we remain the hope and beacon to the world; to make sure that every American has a fair chance to achieve the American dream. With stagnant growth, millions are shut off from that American dream. And I know no Member of this body wants to see that happen.

Respectfully, I would urge my colleagues to restore growth first. Do not allow this bill to be implemented, to kill economic growth, to kill jobs, and to potentially push this economy into a recession. Instead, let's get growth back, let's maintain our economic strength and security, and let's make sure opportunity remains—not just for us but for the next generation and the generations after that.

I yield the floor.

The PRESIDING OFFICER. The Senator from Iowa.

Mr. HARKIN. Madam President, I guess I am compelled to say: Here we go again. We have been down this road a few times before since we passed the Affordable Care Act. Let me see, my notes tell me it is 33—this makes the 34th time that someone on the Republican side has tried to do away with the Affordable Care Act. This is the 34th time, and they failed every time. But they are free to offer amendments, I understand that. I respect the Senator's right to do that, but we have already made our decisions on this and we are moving ahead.

I have said many times as the chair of the HELP Committee, if someone has suggestions on how to improve the Affordable Care Act, to make it work better, be more efficient, I am open to that. That should be allowed, and we should have a constant exchange on maybe how we can improve it. But this idea that we are going to repeal it? I would also say I wonder if my friend, the Senator from Texas, saw the last election. The Senator from Texas got elected, that is for sure, and I congratulate him on that. But the Presidential candidate of the Republican Party who said he wanted to repeal the Affordable Care Act lost. President Obama, who was the President who initiated this and signed it into law won, I think quite convincingly.

So the American people basically have said it is time to move on with the Affordable Care Act. Yet here this amendment basically would repeal it.

I wonder if the Senator from Texas understands it is not just the Affordable Care Act his amendment would hit, it would hit a lot of other things. When we passed the Affordable Care Act there were authorizations for other programs that were included with it. When the amendment says we cannot fund any of the provisions of the Affordable Care Act, I just made a note that we also reauthorized the Nurse Training Partnership Act. So a lot of the funds there go for training nurses.

Does the Senator really believe we should stop funding training for nurses in America at this time when we need more nurses and more nurse practitioners than ever before, at a time when our nursing profession is facing a kind of age cliff? We have a huge cohort of nurses now who are going to be retiring. We need to bring in new nurses. Yet his amendment would cut funding. He says nothing we can do could support nurse training yet in America.

Medicare fraud and abuse—fighting fraud and abuse in Medicare; that was also included in the Affordable Care Act. Again, they have tried frontal assaults on getting rid of the Affordable Care Act. Now this amendment says we are going to not fund it. It would be strange. We have a law in effect but no funding to take advantage of it.

It is almost like some people on the other side of the aisle have an obsession with tearing down health care reform. I think it is unfortunate that some missed the results of the last election, so it is time to move on. This amendment really is the equivalent of repeal. It would turn back the clock on all we have accomplished in the past year. The administration would not be able to build the insurance exchanges or enforce the act's requirements on private insurers.

Again, if this amendment were adopted, it would mean we would go back to the good old days when the insurance companies were in the driver's seat, telling you what kind of health care you are entitled to and when you are entitled to it.

Ever since we passed the Affordable Care Act, and during the time we debated it on the Senate floor, we kept asking our friends on the Republican side: What is your alternative? Basically, what we got was the status quo: Let's just stay with what we have.

I think the American people got pretty fed up with what we had, where insurance companies could turn people down at the very moment when they got sickest; when people had preexisting conditions and could not get insurance or had to pay exorbitant prices for it.

I had a note, we had a family, the Grasshoffs, from Texas—the Senator's home State. They were unable to find coverage to pay for their son's hemophilia treatment. Why? Because they had reached their lifetime limit on insurance payments.

The Affordable Care Act bans lifetime limits, so now they can get treatment. More than 100 million Americans are currently protected by this provision. This amendment would take it away. So the Grasshoffs' treatment for their son with hemophilia would end, and they cannot afford to pay for it out of their own pockets. Keep that in mind when you vote on this amendment.

The Affordable Care Act allows young people to stay on their parents' policies, we know, until they are age 26. More than 3 million young people are taking advantage of this right now. Repeal would take that away from families. The adoption of the Cruz amendment would take that away because, obviously, we could not fund anything to help make this work.

I mentioned preexisting conditions—people who have high blood pressure, diabetes, heart disease, previous bouts with cancer. Right now the Cruz amendment would say no. The insurance companies can say: No, we are not going to insure you or if we do, you are going to pay sky-high prices for insurance.

One of the big things we put in the Affordable Care Act was prevention and wellness programs that would prevent illness. So we provided for free preventive services such as mammograms and colonoscopies, so people can get those without paying copays, sometimes as much as $300 to as much as several hundred dollars for these essential services. The Cruz amendment would put us back where we would have to pay for those preventative screenings.

The Cruz amendment would deprive States and localities of vital funding to combat chronic diseases such as cancer, diabetes, and heart disease, as well as funding to make sure our kids have access to lifesaving vaccines. Thanks to health reform, the Prevention and Public Health Fund is saving lives. The Cruz amendment would stop that.

I picked up a little bit of what the Senator from Texas said about young people; that their insurance rates are going to go sky high. Has the Senator ever heard of the marketplace? It is where people compete. Under the Affordable Care Act, all of these insurance companies now will have to go on the exchanges in the open market, with full transparency, and they are going to have to compete. We have not had that in the past, but under this we do. The Cruz amendment would take that away—a real market out there for insurance, for individuals, small businesses. They would have the same purchasing power and choice that only big companies had before.

I guess what is most important is these exchanges that we are setting up will bring coverage to 32 million Americans who do not have coverage right now. They live in the oppressive fear that they are just one illness away from bankruptcy, losing their homes, not knowing if they can afford another doctor visit.

Did anyone tell States to stop this, stop what they were doing to help serve our citizens? That is what this Cruz amendment does. The Cruz amendment would take us back to the days of the doughnut hole for the elderly because the Affordable Care Act

closes that doughnut hole. We are closing it year after year; 6.1 million seniors have already saved more than $5.7 billion in discounts on drugs purchased in the doughnut hole. The Cruz amendment would stop that. It would increase seniors' drug prices by an estimated $3,500 per person over the next 10 years.

One of the key features we put in the Affordable Care Act was going after Medicare fraud, preventing Medicare fraud. We have increased criminal penalties, we have launched innovative technologies to detect and pursue those who would defraud Medicare, and we have put more cops on the beat to preserve Medicare funds for beneficiaries and not those who would scam the system. The Cruz amendment would stop all that, stop our efforts we put in there to get a handle on Medicare fraud.

Something that is very important to so many of us is what is happening in rural areas. Right now, under the Affordable Care Act, there are incentive payments paid to rural primary care providers in rural America—States such as North Dakota and Iowa and Texas. Right now the Cruz amendment would stop that incentive payment for primary care providers in rural areas.

I mentioned preventive services—right now every senior gets a wellness visit once a year. More than 34 million seniors got that last year, a free preventive service in Medicare so they can go in and get a wellness check to find out if they need to do something to take better care of themselves. They do not have to pay for that. The Cruz amendment would say if they want to do it now, they have to start paying for it.

Since this is kind of a blunt instrument, this amendment we have before us would defund all activities related to health reform, including paying the Federal employees who administer Medicare. Secretary Sebelius has informed us payments to Medicare providers would be significantly disrupted by this. You just cannot separate the Affordable Care Act from all the other provisions of Medicare that are being run by Health and Human Services or by CMS, the Center for Medicaid and Medicare Services.

Oh, yes, the Senator also talked about the deficit, reducing the deficit. I don't understand why someone would want to stop something which the Congressional Budget Office said would reduce the deficit. I guess we are going to reduce the deficit by increasing the deficit? That is sort of the logic of this amendment.

The Congressional Budget Office affirmed that the Affordable Care Act reduces the deficit by more than $100 billion in the next 10 years, and more than $1 trillion in the decade that follows. So the Cruz amendment would roll that back. I guess the Senator wants to reduce the deficit by increasing the deficit. Go figure that one out.

It is time to stop the silly games, but I guess it will continue. After all, in 1935 the Congress and President Roosevelt passed the Social Security Act. Seventy-five years later there are still some on the Republican side who would like to get rid of that.

I guess we will continue to have a few voices—not everyone—who will still be fighting the Affordable Care Act a year from now.

In 1965 Congress passed Medicare—the Republicans fought it bitterly, by the way—and 45 years later a few on that side are still trying to undo Medicare by voucherizing it, and that sort of stuff. I just have to say: Here we go again.

William F. Buckley was the founder of the National Review and sort of the godfather of the modern conservative movement in America. He was a very intellectual kind of guy. He was very intellectual and a good writer and speaker. I always enjoyed watching William F. Buckley. He once said: ''A conservative is a fellow standing athwart history yelling: Stop!''

Well, is that really the role? I think there should be a different role, and that is to stand with liberals, moderates, and everybody else to figure out what is best. We need to figure out what is best for moving ahead and not to just yell ''stop'' or repeal something. We need to do something that is so meaningful and so broadly supported, then figure out how to make it work the best.

I kind of conclude where I began. If people have suggestions on how to make the Affordable Care Act work better, smoother, be more efficient, more cost effective, fine. That would be a good debate and discussion. Just to say: No, we are not going to fund it is an ideological approach. It is not based on budget considerations, it is not based on reducing the deficit, which I just pointed out. It is not based on a rational reading of the bill and what is happening out there in terms of setting up the exchanges and all the other things I mentioned. It is just an ideological approach. It is sort of tearing it down and sort of going after President Obama, I guess, one more time. I don't want to take the position that somebody cannot offer an amendment such as that. Sure, they can offer an amendment. They can do anything. However, reasonable, rational people in the Senate don't need to follow that. We need to do what is best for the American people and leave the ideology behind.

I hope the Cruz amendment will be seen for what it is, an attempt to repeal ObamaCare at this moment in time when we are on the cusp of actually having it fully implemented. States have already moved ahead. Even very conservative Republican Governors have joined in and said: Yes, we want to extend Federal Medicaid coverage in our States. Conservative Republican Governors are setting up exchanges. We are moving ahead. Now is not the time to say: Well, we are going to cut the funding.

Again, keep in mind, this doesn't just defund the Affordable Care Act. I said there were other things, such as the Nurse Professional Training Act, which we put in the Affordable Care Act, which would also be defunded. It was reauthorized along with the Medicare fraud and abuse and the area health education centers. There are a number of things that were put in with the Affordable Care Act that would also be defunded under the Cruz amendment.

I hope everyone will see the amendment for what it is, and I hope the Senate will soundly reject it.

With that, I yield the floor.

The PRESIDING OFFICER. The Senator from Maryland.

Ms. MIKULSKI. Madam President, we will be alternating on both sides of the aisle. I regret Senator LEE had to leave, and we welcome those who support the Cruz amendment to speak before we have to take a break.

I have to go to a meeting with Senator REID and other members of the committee at 12:30 p.m. We ask those who have views on this to come forward and speak. I do have some comments on the Cruz amendment.

First of all, we welcome Senator CRUZ. He is the new Senator from Texas. He replaced a very dear friend, Senator Kay Bailey Hutchison. Senator Hutchison and I were close friends and we usually agreed on goals, but there were times we didn't agree on methods. With Senator CRUZ we agree that we do need a job-creating strategy. We know we need to promote economic growth in whatever we do and even follow the physician's adage of ''do no harm.'' That is why I absolutely disagree with the Senator's amendment. The very things he wants to accomplish and his underlying premise—though obviously well argued from his view in a persuasive way—I totally disagree with.

First of all, let's talk about what the Cruz amendment does. It prohibits discretionary funds from being used for the Affordable Care Act. It is affectionately known by some of us as ObamaCare, because Obama does care. So the Cruz amendment would prevent the Department of Health and Human Services from implementing the Affordable Care Act. This would mean the staff, for example, CMS, could not issue or enforce regulations on insurance abuse practices, such as gender discrimination. Quality reforms that improve the care that everybody does and actually lowers cost would also be affected. For example, Johns Hopkins lung transplants were cited as one study—Madam President, I could go on, but if the Senator from Utah is ready to speak, I will yield the floor. We were alternating, so it is actually the Senator's turn.

Madam President, as robust as my remarks would be, I will yield to give the Senator from Utah his rightful chance to speak.

The PRESIDING OFFICER. The Senator from Utah.

Mr. LEE. Madam President, I wish to extend my gratitude to my colleague from Maryland for allowing me to speak at this time. I appreciate that.

I rise in support of the amendment proposed by my good friend, the Senator from Texas, that would defund the implementation of the Patient Protection and Affordable Care Act for the remainder of this fiscal year. Almost everything the American people were told about ObamaCare by the bill's proponents has turned out to be incorrect. We were promised it would save money. Now we know it will cost us more money. In 2 short years, the projected cost of the government health care takeover has ballooned from $940 billion to $1.76 trillion. We were told it would help a struggling economy. Now we know it will help smother a still struggling economy.

Employers cite ObamaCare as a principal reason and reluctance to hire new employees. According to the National Federation of Independent Business, ObamaCare's unconstitutional mandate—which the Supreme Court salvaged only by rewriting it as a tax—will kill between 125,000 and 249,000 jobs over the next 10 years. According to the Congressional Budget Office, ObamaCare will reduce total American employment by 800,000 jobs by 2021.

In fairness, these are only projections. Although I believe even those projections are optimistic, they certainly contradict the fairytale arguments in favor of ObamaCare in 2009 and 2010, but they are still just best guesses.

The reason Senator CRUZ introduced, and the reason why I support, this amendment is that the case against ObamaCare is rapidly moving from fears about tomorrow to pain that is felt today—right now.

In 2008, then-Senator Obama promised that his policies would lower health care premiums for the average American family by $2,500; 4 years later—and 2 years after President Obama signed ObamaCare into law—the Kaiser Foundation reports that family health insurance premiums have actually risen by $2,370. This is one of the things we were told we needed to pass the bill in order to find within the bill a $5,000 premium hike on working families.

What else have we found? We found that when the Federal Government requires businesses to provide health insurance for their full-time employees, businesses respond by cutting employee hours. Other companies have chosen to go farther and have simply laid employees off altogether or shifted those jobs overseas. Other companies have admitted that the cost ObamaCare adds to their business will have to be passed on to their customers in the form of higher prices.

Then there is the devastating impact ObamaCare has had on our medical device industry, which is targeted for a special punitive tax under this law. Companies from Boston Scientific, Stryker, Smith & Nephew and others are laying off workers and shipping their jobs overseas.

It is important to remember that each of these layoffs is, in a sense, a double strike against our economy. On the one hand, when people lose their jobs and their health insurance, the economy suffers in and of itself because of that impact. On the other hand, at the very same time this is occurring because ObamaCare and the rest of the President's failed agenda are weighing down our economy quite heavily, there are not enough new jobs being created for the recently unemployed Americans to fill. So the unemployed are not only staying unemployed for longer than normal, but they are also increasing demand for already overburdened government assistance programs. Thanks to ObamaCare, fewer people are working and paying into the system to support people ObamaCare is preventing from finding work and health insurance in the first place.

The beauty of the Cruz amendment is that we don't have to pass it to discover what it would do. We already know exactly what it would do. It would delay the implementation of ObamaCare and thereby save taxpayer money and American jobs. It would also restore a semblance of democratic accountability to a process that is badly in need of precisely that. After all, the various departments of the Federal Government have already issued some 20,000 pages' worth of regulations to formalize the ObamaCare system. In other words, the 2,700-page monstrosity Congress passed in 2010 was only a fraction of the final deforesting product.

Does anyone—literally anyone in the entire country—know what those 20,000 pages of regulations say? For all we know, we could be violating ObamaCare right now. Somewhere in those 20,000 pages there might be something saying we cannot do what we are doing at the moment.

Some might think I am exaggerating, but as we were all shocked to learn recently, 98 percent of individual health insurance policies in the United States right now are in violation of ObamaCare's standards. When ObamaCare goes into full effect, those Americans who own those policies will have to either buy more expensive insurance than they have now or pay the unconstitutional fine. The unconstitutional fine was, according to the Supreme Court, unconstitutional as a fine and could be sustained by the Supreme Court only because the Supreme Court rewrote the law as a tax instead of a fine.

To recap, ObamaCare is already costing us jobs that we need badly. It is raising health care costs. It is adding to our deficit and debt. It is forcing families off their health insurance policies they have and like. It is a Trojan horse for 20,000 of new law that no elected official wrote and not a single citizen in the United States has read.

Then, of course, there is the slow-motion train wreck of the law's implementation. A majority of States in the Union have already refused to set up their own ObamaCare exchanges. The bill has been passed and the American people now see what is in it and they want no part of it. So the Department of Health and Human Services is now charged with setting up Federal exchanges in those States, but they don't know how.

The clock is ticking. People are losing their health insurance. The exchanges are supposed to be ready to handle the massive influx of people dumped by ObamaCare onto those same exchanges, and the exchanges are not going to be there.

What will be there? Well, according to a report issued by the Associated Press, uninsured Americans will find a 15-page, 21-step application that will need approval from three separate Federal agencies. There are expected to be more than 4 million of these applications next year alone. Even as an advocate of the program says in this same AP story: The form will take a considerable amount of time to fill out and will be difficult for many people to be able to complete. That part of the process ''does not get you to the selection of a plan.''

ObamaCare is going to make doing your taxes feel like a round of golf. For this reason, there are some who believe the only way to expose ObamaCare and rescue the health care system is to let nature take its course, to let it go into effect as soon as possible. They say that the sooner it collapses, the sooner we can repeal it and start over.

The Senator from Texas and I and everyone else supporting this amendment reject that logic. We cannot in good conscience send millions of innocent Americans into a dangerously dysfunctional health care system run by unaccountable, if well-intentioned, bureaucrats. We will not sacrifice millions of families to prove a political point. People's lives and livelihoods are at stake. The American people are not pawns in Washington's partisan political game. We work for them, not the other way around.

As public servants we have an obligation to protect the American people—those who elected us to serve. ObamaCare is going to hurt our country, our economy, our constituents, our friends, and our neighbors. It is the single greatest threat to our economy and to our health care system. Eventually, ObamaCare will be repealed. The American people will see the damage it does and demand that we scrap it and start over. But for now we must at least defund it, at least for the life of this continuing resolution—for the remainder of this fiscal year.

Senator CRUZ and I have been assured that this amendment will fail and ObamaCare will move ahead as planned. If that is the will of the Senate, then so be it. But when ObamaCare does start to break down—when waiting times start to grow, when costs start to explode, when taxes start to rise, when doctors and nurses start to quit, when hospitals start to close,

when businesses start to shutter, when take-home pay falls and jobs disappear, when patients and families truly find out what is in this bill, then the American people will know who is responsible for the catastrophe of ObamaCare and who, like the Senator from Texas, tried to help.

A few years ago, when then-Speaker of the House NANCY PELOSI famously told Members of the House that you have to pass this 2,700 page bill in order to find out what is in it, she perhaps saw what we would be experiencing today or at least some aspect of it. But either way, today we now see what is in what they passed back then. We, as Members of the Senate, have had an opportunity to review this piece of legislation over the last few years. We know what economic impact this law is already having as its still massive implementation has moved forward.

We need to make ourselves accountable to the American people for what is in this law and what we now know is in this law. I, therefore, respectfully urge each and every one of my colleagues to support this amendment.

Thank you, Madam President. I yield the floor.

The PRESIDING OFFICER (Ms. BALDWIN). The Senator from Maryland.

Ms. MIKULSKI. Madam President, I rise to speak on the Cruz amendment. I am glad Senator LEE had a chance to speak.

As I said, the Cruz amendment would prevent the Department of Health and Human Services from implementing funding for the discretionary spending aspects of the Affordable Care Act. Since the Presiding Officer knows the Affordable Care Act so well and played a major part in it when she was a Member of the House of Representatives, she knows this amendment would have disastrous consequences. It would essentially defund the Affordable Care Act. They call it ObamaCare. I call it ObamaCare. As I said earlier, Obama does care, and that is why we passed the legislation in the first place.

The Cruz amendment means that CMS couldn't do their job to, for example, issue regulations on ending gender discrimination. It has been said that there are all these pages of regulation. But why should we pay more for health insurance than men of comparable age and health status—as much as 50 percent more?

The Affordable Care Act also ends discrimination on the basis of preexisting conditions. As the Presiding Officer knows, in eight States women were denied health insurance because domestic violence was deemed a preexisting condition. They were battered in their own home, and then they were battered by their insurance agency. What are we doing here? This is not where we are going.

Excuse me. I promised I wouldn't try to incite; I would try more to inspire. But I feel very strongly and passionately that the Cruz amendment should not pass. It should not pass.

I wish to speak to what the Senator said about economic growth. He said he is for economic growth. I want to be on that list. He is a progrowth Senator. I want to be on that list too. I think it is a committee of 100. What I want him to know is that without a form of health care that provides universal access but insisting on delivery models of reform, we will have a catastrophe and not only in an earned benefit program such as Medicare. What happens is if people don't have health insurance, it gets shifted onto other people who do have health insurance and the employers who have the generosity and wherewithal to pay for it.

So if we want to be for economic growth, the first thing we need to do is clean up our own act here. This is what we need to do here. The politics of brinkmanship, ultimatum politicians, shut down, show down, and slam down must end. That is what we are trying to do here. What we are trying to do is move legislation so there is no government shutdown.

Businesses don't invest in creating jobs because they don't have certainty. They don't have reliability. Where is the Federal Government going? What is it going to do? How is it going to get its act together so businesses can invest, whether it is in their own employees or perhaps bringing money back home from overseas, legally earned profits, to put into infrastructure? So if a person is progrowth, they want to have health insurance.

The two costs business cannot control are the cost of health care and the cost of energy. We can control the impact on reforming the cost of health care through ObamaCare. Why do I say that? First of all, if a person doesn't have health insurance, they get sick and go to the emergency room. Do my colleagues know what the average cost of an emergency room visit is? It is $1,000. Do my colleagues know what a primary care doctor gets? He gets $40. Now, what is wrong with that picture? He gets $40, not $400, by the time all of it is taken out.

I wish to bring to the attention of my colleagues a fantastic documentary that was on CNN on Sunday night. It was called ''Escape Fire.'' It was a complete 2-hour documentary from CNN, not some lefty think tank or nothing like the Institute of Medicine. This was a CNN documentary on the cost of health care and how the system we have now increases costs but does not increase or improve health outcomes.

I am not going to argue all those dynamics here today, but if we really want to lower the cost of health care, we want to have President Obama and our Affordable Care Act. This is what businesses want. What they don't want is cost-shifting. Because some people don't have it or because they got it too late in their own situation, the cost is actually greater.

The other side has talked about small business. Senator CRUZ just told this wonderful story about his father—a Cuban refugee, essentially—who came to this country. Because he couldn't speak English, he took a job where it wasn't required, washing dishes. And then here we go, one generation later, Senator CRUZ is a Senator. I think that is a wonderful personal story. He then went on to talk about business.

His story is a lot like my own family's story. We came from Poland. When we came from Poland, it was not because we were rich; we came because we thought that Lady Liberty and her shining light really meant something. My family started small businesses. My grandmother ran one of the best Polish bakeries in Baltimore. My father had a small grocery store. Because of a large family, he left school in the eighth grade, but through his own grit and determination, with my mother at his side, he served a community. Over 700 people came to my father's funeral because they loved him as much, in their own way, as we did. My father, through his grit, determination, and working—the same as Senator CRUZ's father—my father worked 6 days a week, 12 hours a day. He sent his three daughters to college to be sure they had an education in post-high school.

He wanted to have health care. My father was crazy about Social Security and BlueCross and BlueShield. My father couldn't get on Social Security until the 1950s because small business was excluded. The reason he liked Social Security was that he worried about my mother and he worried about his girls. He was worried that if he died, would his own insurance—my father had insurance. My father was a planner and a provider—a planner and a provider—but he worried about whether that would be enough to take care of us. So when he was eligible for Social Security, he said: I will pay my fair share so if anything happens, fine, and if nothing happens, I am glad to pay my fair share.

As a small businessman, he didn't have access to big markets, but through the Maryland Grocers Association—again, in the 1950s—he could come in on BlueCross and BlueShield. He wanted health insurance for himself, for my mother, for his daughters, and, if he could, for the few people who worked for him because he knew that people were one financial bankruptcy away if a big illness happened.

What my father faced in the 1950s America is facing now in 2013.

So what does ObamaCare do? It improves access for 35 million Americans who are without health insurance. It ends the punitive practices of insurance companies, one of which is gender discrimination. The other is the preexisting condition denials. It also strengthens Medicare in a way that actually reduces health costs. Data has been released in the last several days that actually shows health care costs are going down, and it is not because of the recession. It is because our reforms

are going into effect, such as the famous Pronovost checklist developed at Johns Hopkins University that was quoted in another study: If we wash our hands and take care of certain things in the OR, we won't get an infection. And if we don't get infections, we don't stay in the hospital longer than necessary.

I chaired the quality initiatives committee that examined how we could, through improvements in quality, not only save lives but would it save money, and the answer was a resounding yes. I didn't make that up.

They said: MIKULSKI, you are a social worker. What do you know about delivering health care?

It wasn't my idea. I went to learned societies, such as the Institute of Medicine, that said to err is human, but it is also costly. I am not talking about the medical malpractice stuff—infections, returning admissions to hospitals within 10 days or 30 days because of the way people are often discharged, the issue of prevention.

I am the author of the so-called preventive amendment that went into the health care bill.

What was that all about? It meant that early detection and screenings save lives—early detection and screenings save lives. That means if you get your mammogram, if you get your PSA test for a man, you are more likely to find it.

But it is not only for that dread, awful ''C'' word. Let's take a ''D'' word: diabetes. A lot of people walk around and do not know they have diabetes or high blood pressure. Both are silent killers. They can result in strokes or death. If you have undetected diabetes, it can kill you through a coma and other things, but it can also kill you slowly. The consequences of prolonged diabetes can result in the loss of eyesight, the loss of a kidney, diabetic myopathy, where you cannot walk. And if you come in so late, you are often—rather than facing an amputation, wouldn't it have been better to find it 10 years before and get you into the right program, with the right diabetic educator, to make sure we not only control your diabetes but we are not paying for amputations, which is a heartbreak for the family and the person and a budget buster to us?

This is what prevention is all about. It is not some gooshy-pooh thing. It is not like a slogan on a cereal box. This is the real deal. If you find certain of these chronic conditions sooner, you can manage their escalation. That helps the family and the patient. It also helps control our costs.

This is what we are talking about. This is why we care so much. And for women, we were helped through this bill, dealing with gender discrimination, preexisting conditions. Children were helped. And now, right now—because ObamaCare is not fully implemented—it stops insurance companies from denying families health insurance or charging sky-high premiums because their child has a preexisting condition.

What are we talking about here? We are talking about autism. We are talking about type 1 diabetes. We are talking about even children who have arthritis.

The other day I had such a poignant thing happen. I was dashing to the elevator, and there was a family with a young lady, a young girl about my height, but about—well, she was 13 and a tween. When they showed me their picture of the last time we met, that tween, that young lady, was in a wheelchair. We do not think of someone around 11 or 9 having arthritis, but she does. This is going to be a chronic condition with this young lady. But through the work of NIH, other great research, and working with a biologic that was used for other medical issues but allowed under FDA to work with her, under very strictly controlled conditions, with parental consent, of course, this young lady stood next to me. We laughed and we joked, back to back, because the little girl that was in the wheelchair is now a tween, and she is a lot taller than I am. We had a good laugh. But I will tell you, when I got on that elevator I had a good cry, and I was so emotional about it, I even feel it today.

What are we doing here? Don't we want to give this little girl a break? When her mother and father applied for health insurance, do we want the schoolmarmish no—the nos of the insurance company saying: No, that kid has arthritis. We cannot insure you.

That kid does have arthritis, but she is walking today. She is standing proud with her mother and father, joking with a U.S. Senator, doing well in school. Isn't that what we want for our country and for our young people? Why would we want to repeal legislation that does that?

I could talk a lot about this bill. I feel so strongly about the incredible infrastructure we have in our United States—NIH, academic centers of excellence, learned societies from IOM to the American Academy of Pediatrics that have advised us along the way—all of us working together. The biologic was developed by the private sector—the private sector—working with doctors, working with FDA, to say: Can we try an off-label that meets all the ethical things where children are involved?

We did it, and look at the story. That is just one story. We are a country of 300 million people. That story is being acted out every single day, and it is being acted out right now in the ER. If you came to the ER with me at Johns Hopkins, the University of Maryland, at Mercy Hospital, are there people who are there from trauma? Yes. Are there people there who were in an automobile accident? Yes. I was there 3 years ago myself with a fall coming out of church. Yes. But over 70 percent who are there are there because they do not have health insurance. And they are using a thousand dollars a visit being in there. What kind of system is that?

So if we repeal the President's Affordable Care Act, the consequences on families, the consequences on business, will be horrific. We are simply shifting the cost rather than solving the problem.

Are there reforms necessary? Yes. Do the Senators from Texas and Utah, who spoke, offer suggestions? Yes. But let's let ObamaCare go forward. Let's evaluate, let's do due diligence, and let's do oversight and make sure health reforms we have instituted are working, but do not repeal it. We will endanger lives, and we will endanger our economy.

I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Ms. MIKULSKI. Madam President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

Ms. MIKULSKI. Madam President, I ask unanimous consent that the time until 2 p.m. be equally divided between Senator CRUZ and myself or our designees; that at 2 p.m. the Senate proceed to vote in relation to the Cruz amendment; that there be no amendments in order to the Cruz amendment prior to the vote; further, that upon the disposition of the Cruz amendment, the next amendment in order be an amendment offered by Senator HARKIN relative to Labor-HHS appropriations.

The PRESIDING OFFICER. Is there objection?

Without objection, it is so ordered.

Ms. MIKULSKI. Madam President, I ask unanimous consent that the time in the quorum call be equally divided.

The PRESIDING OFFICER. Without objection, it is so ordered.

Ms. MIKULSKI. I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

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

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. RUBIO. Madam President, I rise to speak on the pending question, which is the Cruz amendment, to defund ObamaCare. I appreciate him offering the amendment on this very relevant issue. I am glad we are talking again about it.

When I ran for office 2 years ago, this was one of the central issues. There has been a court decision since then. We need to understand, court decisions are about the constitutionality of something. They do not speak to its policy wisdom. That is what this debate is about today. I think it is important because since the election—and even going into the election—we had lost some view on this.

But let me begin by saying health insurance is a problem in the United States. There is no doubt about it. I think that to be in opposition to the health care bill is not to say that we think nothing should happen. On the contrary, I know health insurance is a major problem for millions of Americans. Its affordability is a problem. Its access is a problem, the ability of people to get the kind of health coverage they want.

In fact, when I was speaker of the Florida House—I had the honor of being that for 2 years in Florida—we actually worked on some ideas that created a marketplace where the private insurers and others could come together and create creative packages for people. That is the kind of insurance you need. Not everybody needs the same health insurance. Let me give you an example.

A family of four with two children—I have four children—I promise you, you are going to wind up in the pediatrician's office quite a bit, for everything and all kinds of stuff. We are very blessed. My children, thank God, are very healthy. And even then, there are issues where you need to bring them, whether it is primary care, whether it is vaccinations, whether it is a cold that does not go away—whatever it may be. I think it is so critically important to have that. So families in that circumstance need a certain type of coverage.

Then there are other people, people I know who are in their mid to late twenties. They never go to the doctor. But if they ever get sick, it is probably going to be, unfortunately, something very bad. So those folks maybe would rather have a plan that covers them upfront with some primary care coverage—maybe a higher deductible that you could pay with a health savings account—but on the back end some catastrophic hospitalization costs so if you truly get sick, God forbid, you have the opportunity to have the kind of coverage you need.

The point is everybody needs different kinds of health care coverage. My hope is that this country and the Federal Government—to the extent it has a role to play in all this—would help incentivize the creation of marketplaces for those sorts of innovative health ideas.

As I said, not everybody needs the same health insurance. That is why there are some principles that should have guided us when this was debated before I got here and should guide us going forward.

For example, I think one of our guiding principles should be that Americans should be able to buy health insurance from any company in the country that is willing to sell it to them. Right now, health insurance is regulated at the State level. In essence, these States have mandates as to what insurance companies must offer in order to sell insurance in that State, and you cannot buy insurance if it does not have all of those. The equivalent would be of saying: You either have to buy a Cadillac Escalade or you have to buy nothing. Some people do not want a car that is that big and that fancy. They need something that is a little different.

The point is those choices are not available to consumers. We should start with an organizing principle by saying every American should be able to buy health insurance they want from any company in America that is willing to sell it to them.

Another part of that is you should be able to buy health insurance for yourself. Let me tell you why that is problematic. If your employer buys the health insurance for you, they do not have to pay taxes on the money. Taxes are not paid on the money that is used to buy that health insurance. But if you buy it for yourself, it is income, it is treated as income. You have to pay tax on it. That is problematic for a couple reasons. No. 1, some businesses and some employers would rather give them the health care money so they can go out and buy the plan they want. Others would want to buy you plans or give you options among different plans.

Federal employees know very well what that is like. Let me tell you what a Federal employee gets. A Federal employee gets a book. In that book you get to choose between—depending on where you live—a bunch of different plans. You go right down the graph, and it tells you: This is how much this plan offers, this is how much you have to pay in premiums per month, this is how much you are going to owe in copayments if you go to a doctor, if you go to a specialist, if you go to a hospital.

How many people in America get that choice? How many people in America get the same choices on buying health care that their Congressmen and their Senators get? Very few. To me, that is a serious problem.

The good news about this—imagine now, for a moment, a country where people control their health care dollars, where you got to buy the insurance you wanted from the company you wanted. Let me tell you what the market is going to do. It is going to react to that. What the market is going to do—when there are people out there who are going to have choices over how they spend their health care dollars—they are going to start creating insurance packages that people want to buy. They are going to realize: We have a bunch of 25, 27, 29-year-olds in the United States who do not get sick. We should create special packages of insurance for them. They are going to realize: We have a lot of families out there who can afford to pay ''X'' amount of money for a family coverage plan. We should go out and create a special plan for families like them.

By the way, along the lines of this level of flexibility, you could see where small businesses all of a sudden can get together with other small businesses. As an example, a small chamber of commerce in a midsize city somewhere can decide to bring all of those companies together. Together they can buy health insurance for their employees. It is hard to buy group coverage if you only have four or five employees. But if you can get together with a bunch of other companies that have three, four, five employees, all of a sudden you have a buying pool. That buying pool gives you leverage and power to go out and create plans for all of your employees.

There is no one size fits all. We should have that kind of flexibility in our insurance marketplace. We do not. These are not going to cure everything, but these are important steps forward.

By the way, I would be remiss in talking about medicine to not talk about the malpractice insurance rates, especially for specialties. Do not underestimate what a significant impediment that is for some people to go into the medical profession or to stay in the medical profession.

Right up front, let me tell you, if a doctor is negligent, if a doctor commits malpractice, you should have a right to recover your economic damages, and there should be some level of punitive damages to encourage people not to do that in the future and to be careful. The problem is it has gone beyond that. In many States we have a crisis when it comes to litigation and medicine. People are not just suing because, unfortunately, something went wrong. They are suing on outcomes. They are not just suing because the treatment was bad. The result is that doctors practice defensive medicine.

You go to a doctor, you go to a hospital, they order a slew of tests. It is not because you need them, but because they want to make sure they are covered; that if they ever wind up in a court they can be able to say to the jury: Look at all of those tests I ordered—even though most of them might not have been necessary. Who do you think pays for that? We do.

It is worse than that. There are places like in Florida where obstetricians do not even have coverage at all. They go bare. They hire lawyers to protect their assets so they cannot be sued. I know true stories of obstetricians who will not see certain patients anymore because they are afraid of the outcome of what may happen.

So I think we need to look at, perhaps, not as a part of the insurance situation but in health care across the States, a way to incentivize States to pass medical malpractice reform that protects patients. People should always have the right to access the court system for wrongdoing, and especially to be compensated for their economic damages. If a doctor commits malpractice and you cannot work anymore, all of those lost wages that you are not going to be able to work for in the future, you should be able to be rewarded for that.

If we allow doctors to continue to be sued in this country as an industry,

which is what it has become, people are not going to go to medical school.

Here is another problem we are starting to see. A lot of young people in medical school do not want to go into the complex issues anymore. They do not want to become brain surgeons. They do not want to become OB–GYNs. They want to go into some other specialty that in addition to offering better hours—your beeper does not go off if you are a plastic surgeon at 3:00 in the morning. In addition to that, they do not have to worry about liability. Let me tell you, that is a problem. In Florida, most of our cardiologists are over the age of 50. What does that mean 10 years from now? That means we are not going to have enough cardiologists. It is discouraging people from going into very important professions in medicine because they are afraid they are going to get sued—not for doing something wrong but because things did not turn out well in treatment.

Let me put on the record that I am not against people being able to sue a negligent doctor. In fact, I think negligent doctors should not only be sued, they should lose their license. I am just saying, if we go too far, like anything else in the world, you are going to lose people from medicine. They are going to decide not to go in it.

Let's talk about this issue for a moment and the amendment that is before us. The problem with ObamaCare is that it is a one-size-fits-all approach to the entire country. The health care needs of Americans are very different. No. 1, they are very different geographically depending on where you live; No. 2, they are very different depending on your family situation, your health situation, et cetera.

Now, some people are very sick. They are chronically ill. That is where we can have a conversation about high-risk pools because these people are very difficult to insure. If someone is sure to get sick, it is hard to find an insurance for them because you are guaranteed to be sick. So we have to find a solution for that problem. That is where conversations about high-risk pools at the State level are a valid thing to talk about. But beyond that, I think people should have flexibility. That is not what ObamaCare does.

I understand that people read the newspapers and say: This is good. We are going to get a health care plan. We are going to be able to buy insurance. My boss is going to be forced to give me health insurance.

That is not how it is going to work out, guys. That is not how things work out in the real world. We are already starting to see the impacts of it. What is amazing to me is as this law begins to develop, as people start to see the true impact and the unintended or maybe even the intended consequences of this law, I predict right now that the number of people who were excited about ObamaCare is going to dwindle dramatically.

The proof is how many groups have come here already and asked to be exempted. How many unions, how many other groups have raised their hands and said: Please do not make us live under the laws that we supported. Do not make us live under their laws that we held rallies for. Do not make us live under these laws that we bragged about because it has a negative impact on us. And some of them are coming to bear right now.

No. 1 is the cost. When this bill was passed, they said it would be about $1 trillion—$940 billion to be exact. Now we know it is $1.7 trillion in gross cost over the next few years.

How about tax hikes? Absolutely, because starting in 2014, the IRS is going to create a problem for millions of Americans and small businesses. Basically, if you are not buying health insurance of the kind they want, of the kind the law requires—not just health insurance, a specific kind of health insurance—you are going to owe the IRS a fine. Think about that for a moment. If you are a small business owner or an individual, and you are not buying the health insurance the government says you must have, you now are going to have to pay a fine every year to the IRS.

Some people are going to do the math. They are going to say it is cheaper to pay the fine than it is to buy the health insurance. That is problematic, but it is a cost.

We are trying to grow our economy. That is the only solution to our problems. Over the next couple of weeks, we are going to debate budgets, we are going to debate continuing resolutions, and the word ''debt'' is going to come up. We cannot tax our way out of this debt. There is no tax increase that gets us out of this debt. To my own party, I say while we always have to have fiscal discipline, you cannot cut your way out of this debt alone either. The only real solution to our debt problems—and the debt matters because it is killing jobs in America—the only real solution to our debt problems is a combination of two things: rapid, robust economic growth.

If we can grow our economy at 4 percent a year, we could generate $3 trillion for debt reduction over the next decade, and we would create millions of jobs and pull people out of poverty and strengthen our middle class, which is the source of our exceptionalism as a country.

The second thing we need is fiscal discipline on future spending. This bill violates both. This bill violates both. It hurts economic growth because the only way you are going to grow your economy is if you make America a better place to create jobs and start businesses. That is how economic growth is created. When someone takes money they have or money they borrowed or money someone invested in them, and they use it, they risk it to open a new business or to grow an existing one, as the idea works, they start hiring people, and those people now are making a middle-class salary. Those people are now buying things and spending money, creating jobs and opportunity for others.

That is the formula for growth and prosperity. This hurts that because what you are now saying is, in addition to everything else you have to put up with in America—all the State and local regulations, all the complicated Tax Code stuff, the natural downturn in the economy, globalism and the changes that it has brought—in addition to all of that, here is one more thing you are going to have to do: You are either going to have to offer health insurance of a certain kind or you are going to owe the IRS a fine.

I promise you that is not the kind of thing chambers of commerce put on their pamphlets when they try to attract businesses to their communities or their States. This is not going to help in job creation. The tax hikes are a big problem. It is especially bad for small businesses because they have this arbitrary number of people—50 employees or more—who have to do certain things. OK. So what do you think a lot of businesses are going to do? I know people. They have already told me about this.

If you have 51 employees, this is a huge incentive to only have 49 employees. So you think about that for a moment. If you own a small road-paving company with 50 full-time employees or 51 full-time employees, you sit down with your accountant to do your math for next year. Your accountant will tell you: By the way, if you get rid of a couple of employees, this is how much money this is going to save you because of ObamaCare.

So do we want to have an incentive in our laws to have businesses get rid of workers because it helps them avoid certain costs mandated by government? This is happening. This is not pie in the sky, this is going to happen. There are people planning to do that already. It is happening right now.

Here is another thing. How about part-time workers versus full-time workers. We have already seen evidence of this across the board. But I will tell you where you are seeing it already is in people who own a bunch of franchises. So you own a chain of Kentucky Fried Chickens or a chain of McDonalds, and all of a sudden you have incentive to move as many of those people as you can to part time because they do not trigger the ObamaCare mandates either. So now you have all of these businesses across America that have an incentive that we have created in this law—I say ''we,'' the people who were here when this passed—a perverse incentive to cut people's hours so they do not trigger the mandate. These are horrible consequences that are going to have an impact on our country at a time when we should be growing our economy and creating middle-class prosperity, not working against it.

So my prediction is that when they start to fully implement this over the next 12 to 18 months, it is going to be an epic disaster. Not because it was ill-intentioned, per se. I think the goal of providing an environment where everybody can buy affordable health insurance is something we should take very seriously and something we have to work on. You cannot have a strong, stable middle class if people cannot afford the cost of living. You cannot have a strong and stable middle class if people do not have access to quality health care at an affordable price. We should work on that. We should work on that very hard. But we have to do that with balance.

This is not balanced. This is an across-the-board application to the entire country that is going to hurt a lot of people. There are people in America who are going to lose hours at work because of this bill. There are people in America who are going to lose the health insurance they have which they are happy with because of this bill. There are people in America who are going to have to lay off people, and therefore there are people in America who are going to lose their jobs because of this bill. Our debt is going to grow.

I hope we will pass this amendment. I hope we will defund this program. It was ill-designed. As the true ramifications of this bill begin to apply over the next few months and the next couple of years, we are going to be right here on this floor trying to fix it because this country cannot be what it is meant to be if it has to deal with something like this hanging around its neck.

I yield the floor.

The PRESIDING OFFICER. The Republican leader.

Mr. MCCONNELL. Before the Senator from Florida leaves the floor, I just wanted to commend him for his observations. I listened carefully to what the Senator from Florida had to say. It reminds me of the prediction many of us made when it was passed: It would be the single worst piece of legislation in modern times.

Everything the President predicted would happen has not happened. Premiums have gone up; jobs have been destroyed. The single biggest step in the direction of Europeanizing our country that we could possibly have taken we took with ObamaCare.

So I just wanted to commend the Senator from Florida for his comments. They are right on the mark.

I also want to thank Senator CRUZ for offering this amendment. I offered it in the last Congress myself. There is no way to fix this thing, no way to fix it. It needs to be pulled out by its roots. The Senator from Florida pointed out it is also destroying jobs.

I was on a tele-townhall the other night. A restaurant manager called in and said exactly what the Senator from Florida just said, that they were moving to lower their employment and to have more part-time workers in order to try to deal with the impending ObamaCare explosion.

So I am sure the Senator from Florida is running into that in his State as well.

Mr. RUBIO. Let me say a couple of things—actually, a true world example. Here is the startling thing about it. A lot of people are not fully aware of what this means yet. This may surprise some of us who are here every day or the people who cover politics on a daily basis, but most Americans are not tuned into C–SPAN 24 hours a day. They get their news in tidbits in the morning when they are making their coffee. They have the radio on. They hear some stuff on the radio on the way to work. Then they go to work for 10, 12, 14 hours to run a business. They get home, they have to do homework with the kids, make dinner, put them to bed. Maybe they get to watch an hour or two of TV. They wake up tomorrow morning and they do it all over again. They are not in touch with all of this on a daily basis. They have lives to lead.

You will be surprised how many small business men and women and how many employees around the country are not even aware of this yet, do not even realize the decisions they are going to have to make next year. So if you are in a business that has anywhere between 45, 55, 60 employees, when you sit down at the end of this year with your planner—be it your accountant, your lawyer, whatever it is you use, your human resources people—and do next year's planning, they are going to tell you: OK, next year we have this new law. This new law says we have to offer this kind of insurance. Here are your choices: Option No. 1 is you can offer the insurance, and this is how much more it is going to cost than what you are paying right now. Option No. 2 is do not offer any insurance and pay a fine to the IRS every year from now on. Here is how much that is going to be. Option No. 3 is to let some people go so you do not have to do any of this.

I am telling you, a lot of these people are going to say: You know what. It breaks our heart; we do not want to do it; it is not good for our business, but of the three options, the only one that is going to allow us to survive is to let some people go. That is not good for us. That is not good for us.

Mr. MCCONNELL. Well, the Senator from Florida may have mentioned that earlier in his remarks. But so far there are 20,000 new pages of regulations—so far—a stack this high.

This is absolutely indecipherable by very intelligent people, and they are just getting started.

I want to thank the Senator from Florida for his comments. I think they are right on the mark. This is a huge mistake for our country. Hopefully, someday, maybe even beginning with this amendment, we may begin to undo this massive mistake we made a few years ago.

Madam President, we have been saying for 3 years this bill will be too expensive; it won't do what it promised. Every day we are seeing further proof of that.

The Federal Reserve said it will cost jobs—the Federal Reserve not the RNC. We predicted that. Yesterday we had a glimpse of the application process for ObamaCare. It turns out applying for it will be as difficult as doing your taxes.

Today there is another AP story saying some folks will see their insurance bill double next year as a result of this law. As I indicated, so far there are 20,000 pages of regulations and many more are expected. This bill is an unmitigated disaster for our country, an absolute disaster.

I applaud Senator CRUZ for offering this amendment. I strongly support his efforts. Not a single Member of my party in the House and the Senate voted for this bill in the first place. We need to get this bill off the books and straighten out our country. This would be a big step in the direction of achieving that.

I yield the floor.

The PRESIDING OFFICER. The Senator from Ohio.

Mr. BROWN. Madam President, I assume a number of my colleagues have seen the movie ''Lincoln.''

One particularly brief but poignant moment of that movie showed the President's staff discouraging him from spending so much time talking to regular people, leaving the White House and inviting normal people who weren't involved in politics every day or didn't work in the White House into the White House to talk.

They were saying: Mr. President, you need to run this war. You have so much to do. You shouldn't be meeting with people as much.

President Lincoln said to his staff: I need my regular public opinion baths.

Just listening to the last few speakers, particularly the Republican leader, I think it is more important more people in this institution go out and talk to real people who are affected by this health care law. There is the 25-year-old who has already benefited from staying on her mother's health care plan, the person in the high-risk pool who has insurance now—such as a friend of mine in Port Clinton in Ottawa County, Ohio, does—because of this law. People have seen the consumer protections. They haven't lost their insurance because they were expensive for an insurance company.

My colleagues need to get a public opinion bath, walk around their States a little more and listen to people outside of the country clubs and outside of the trade associations who are charged ideologically and not really particularly open about these kinds of issues.

I rise to oppose the amendment offered by Senator CRUZ, the badly named ''Restore Growth First'' amendment, which would prohibit resources included in the continuing resolution to implement the Affordable Care Act.

Specious claims about how the health law will harm our economy have already been debunked by the hundreds of Ohioans who are able to have annual wellness visits, by the tens of thousands of young adults staying on their parents' insurance plans, by the seniors who are seeing the doughnut hole coverage gap closing with real savings on prescription costs.

It has been debunked by Americans who are no longer denied coverage because of a preexisting condition, by the Americans who are not forced to pay more for insurance because of a preexisting condition, by women who may now rely on affordable, accessible reproductive health services; and starting in 2014, Americans who have not been able to afford health insurance in the private market will be able to comparison shop, if needed, to purchase insurance.

These much needed health care reforms which will benefit Americans next year are already benefiting Americans and have been for a couple of years. Continued implementation of these reforms is crucial for improving the quality of care and bending the cost curve.

I agree with Senator CRUZ on one thing: health spending is related to the economy and to the deficit. Let's be clear. We know the health care law will reduce the deficit by over $100 billion over the next decade. These are Congressional Budget Office numbers, not Republican numbers or Democratic numbers. On the Cruz amendment, repealing the health care law would increase, not reduce, the deficit.

We know how it is helping people. There are 100,000 reasons in my own State of Ohio to stand up for this health care law and reject this amendment: Nearly 97,000 of Ohio's young adults are now able to stay on their parents' plan until age 26.

Mr. INHOFE. Would the Senator yield for a unanimous consent request?

Mr. BROWN. I yield to the Senator from Oklahoma.

Mr. INHOFE. I ask unanimous consent to be recognized at the end of the Senator's remarks.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. BROWN. Almost 100,000 of Ohio's young adults are now able to stay on their parents' health plan. Seniors have saved almost $300 million in prescription drugs just since the passage of the health care law, with an average per beneficiary savings of $774. And up to 147,000 small businesses in Ohio are eligible for tax credits.

Finally, thanks to the health law, more people in my home State and across the Nation have access to free preventive services. As I said, there are 100,000 reasons for Ohioans to like this law and oppose this amendment.

There are 2 million Ohioans with private insurance who have gained preventive health services with no cost sharing. This means major illnesses may be detected earlier. It means decreasing treatment costs and human suffering over the long term.

The Affordable Care Act was the most promising initiative to control health care costs in decades. The health care law is about reducing health costs for consumers and investing in more affordable preventive care for Americans.

The health care law is about containing costs as we extend insurance. It means people, rather than going to the emergency room with a sick child, may go to the family doctor and receive preventive care prior to the child's ear infection becoming serious. Under the new medical loss ratio rules health insurance plans must spend at least 80 percent of premium dollars on health care costs, not executive bonuses, not other administrative expenses. In Ohio, 143,000 received over $11 million in rebates.

The Prevention and Public Health Fund is the part of the health care law which will give us test data about how to bend the cost curve through preventive programs. Ohioans received more than $17 million already to prevent chronic diseases and decrease smoking rates.

Mr. DURBIN. Would the Senator yield for a question?

Mr. BROWN. Certainly.

The PRESIDING OFFICER. The Senator from Illinois.

Mr. DURBIN. I would ask of the Senator, pending before the Senate is the Cruz amendment which would literally remove any funding to implement the Affordable Care Act, as I understand; is that correct?

Mr. BROWN. That is correct.

Mr. DURBIN. We have heard from the Republicans on the other side of the aisle that they oppose this intrusion of government into health care and creating health insurance exchanges so Americans who currently don't have a choice in health insurance and want to get a different policy, if they care to get one, would have a choice through the exchanges?

Mr. BROWN. This is what they have been saying, yes.

Mr. DURBIN. The premise behind this is the government shouldn't be involved in this, as I understand the Republican argument; is that correct?

Mr. BROWN. That is what they say.

Mr. DURBIN. Did I hear the Republican leader come to the floor and speak about thousands of pages of regulations, government regulations, which will now be part of health care?

Mr. BROWN. You did.

Mr. DURBIN. I would like to ask the Senator from Ohio, is he aware of the fact every Member of the Senate has a government-administered health insurance plan?

Mr. BROWN. I am aware of it. I assume my colleagues are too.

Mr. DURBIN. Is the Senator aware of any Senator on the Republican side who has come forward—and there may be one, I don't know—who has said: I am so opposed to government-administered health care, and as a Senator I will not take advantage of the Federal Employees Health Benefits Program?

Mr. BROWN. I have not heard any say that.

Mr. DURBIN. The same Senators who are critical of ObamaCare because the government is involved in health care have themselves, their families, and children protected by a government-administered health insurance plan?

Mr. BROWN. It is my understanding this has been sort of the hypocrisy we have woven through this debate over the last 3 years.

Mr. DURBIN. What is good enough for these Senators apparently is not good enough for the rest of America?

Mr. BROWN. Apparently not good enough for a senior, not good enough for somebody who is low income but working two $10-an-hour jobs, I guess it is not good enough for them.

Mr. DURBIN. Is it not true the amendment by the Senator from Texas is breathtaking because it says we eliminate all funding for the Affordable Care Act in terms of, for example, the extension of the availability of health insurance for children up to the age of 26?

As I understand the Cruz amendment, we couldn't fund that aspect of the Affordable Care Act.

Mr. BROWN. The Cruz amendment doesn't just anticipate changes in the future, it takes away all these services which have been out there that I have been talking about: the thousands of people in Illinois, Ohio, and Wisconsin who have benefited; 25-year-olds, 22-year-olds, such as somebody who graduates from Champagne, Urbana, Madison, or Columbus and don't have insurance but have a job, are 23 years old and may stay on their parents' health plan. All of the preventive care literally hundreds of thousands of seniors in Ohio now receive with no copay or no deductible would all be wiped away. All the provisions people have benefited from already would be taken away by this amendment.

Mr. DURBIN. This breath-taking Cruz amendment would actually say to these families with children who are currently on the family policy up to the age of 26: It is over. Those kids are now on their own.

Mr. BROWN. These kids would be on their own, but the Senators who are pushing this amendment would still have their health insurance, just to reiterate that.

Mr. DURBIN. The Cruz amendment does not eliminate the government——

Mr. BROWN. It doesn't take away the insurance for those people voting on this amendment; that is correct.

Mr. DURBIN. The Federal Employees Health Benefits Program, which protects Senators and Congressmen, is not affected by the Cruz amendment?

Mr. BROWN. My reading of it is it is not affected.

Mr. DURBIN. They don't hate that aspect of government-administered health insurance?

Mr. BROWN. Apparently not.

Mr. DURBIN. Is it also true the seniors who would receive benefits under the Affordable Care Act, for example, annual physicals which are available, those would be eliminated as well?

Mr. BROWN. In my State and the Senator's State, since his State is slightly larger than mine—over 1 million seniors in each State and hundreds of thousands in the Presiding Officer's State of Wisconsin—millions of seniors have received some kind of preventive care, such as screenings for diabetes, screenings for osteoporosis, and not paid a copay or deductible. They have received their physicals and not had their deductibles, copayer deductibles, waived as a result of the Affordable Care Act.

The Cruz amendment would, while still protecting health insurance for Senator CRUZ and others, wipe away those benefits for seniors.

Mr. DURBIN. Is it also not true in the U.S. Capitol we have an Attending Physician's Office run by the U.S. Navy, a government entity, which makes itself available to each Senator if they care to pay a monthly fee for annual physicals—a government-administered annual physical for Senators?

Mr. BROWN. It is true. That is true. This is open to people regardless of how they vote on the Cruz amendment.

Mr. DURBIN. Does the Cruz amendment eliminate this government-administered physical exam which is available for Members of the Senate?

Mr. BROWN. It does not.

Mr. DURBIN. I am starting to note a pattern here. The Senators who wish to do away with government-administered health care for everyone else want to keep it for themselves. Does that pattern emerge from the Senator's analysis?

Mr. BROWN. We had this discussion back in 2009 and 2010 when we debated this health care law, that Members of the House and Senate continue to receive health insurance.

I recall one House Member was unhappy during campaigning against the Affordable Care Act, as he recently came to the House. He didn't get his insurance for the first month paid for by the government, as he tried to take away insurance for low-income, moderate-income people in my State, my district and the Senator's State.

Mr. DURBIN. I would say Senator CRUZ would certainly be able to offer an amendment which eliminated all government-administered health insurance as it applies to any person in the United States. If he did that, he would be consistent. Instead, what he has done is go after those today who are struggling to find their own health insurance, cannot afford it, and are simply asking for the same option as Members of Congress have today: to be able to go to an insurance exchange and choose the insurance plan that is best for them and their families. I think it would be more consistent.

I ask the Senator from Ohio if he thinks it would be more consistent?

Mr. BROWN. I would like to see Senator CRUZ or one of the supporters of the Cruz amendment offer an amendment.

Mr. DURBIN. I thank the Senator from Ohio.

Mr. BROWN. I appreciate the words of the Senator from Illinois.

To close, Senator DURBIN's comments accurately explain that there is a bias in this institution on tax policy and health policy for some Senators to take care of themselves and people like them, a little more than paying attention to the rest of the country. I think this amendment shows this and is one more good reason to vote against the Cruz amendment.

I yield the floor.

The PRESIDING OFFICER. The Senator from Oklahoma.

Mr. INHOFE. Madam President, we have been discussing and debating ObamaCare for 3 years—several years anyway. I have not heard the argument before where they say you have the same government-run plan. That is not true. That is not true at all.

I have worked in the corporate world and been on the leadership part where we were making decisions and offered our employees the benefits of different companies. It could be Aetna, Blue Cross-Blue Shield or anybody else. We could make that determination as to what we wanted and then we paid for it.

I don't think that argument has ever been used, to my memory. I wasn't coming down to talk about that, but I will, since I am a cosponsor of the Cruz amendment. I think anything you are able to do to get rid of ObamaCare is in our interests.

Right now, the attorney general in the State of Oklahoma is Scott Pruitt. I spoke with him this morning. He has a lawsuit with an amended complaint challenging the implementation of ObamaCare. Scott Pruitt is arguing the IRS is attempting to redefine ObamaCare's mandate tax in order to hike taxes on Oklahoma employees. That is what is happening right now in my State of Oklahoma. I don't know how the polling goes. I would only say this: I sense an air of anxiety with a lot of these people trying to support ObamaCare right now, because people have caught on. People in the State of Oklahoma have caught on. In Oklahoma, we would have to spend an additional $400 million over the next 10 years on Medicaid in order to cover those who already qualify and will be forced into the program—this government program we are talking about—due to ObamaCare and the mandate. This money will be diverted from schools and from roads and other needs, public safety, in the State of Oklahoma. Our research shows that premiums in Oklahoma could increase anywhere from 65 to 100 percent due to the coverage mandates required by ObamaCare. It is as if we are having this debate all over again, but they are bringing up things now I have never heard of.

I want to mention one thing, and that is there is a friend of mine in Oklahoma whose name is David Green. David Green several years ago started with one store, a thing called Hobby Lobby—1 store in the State of Oklahoma—and now he has 500 stores in 41 States and he has, I don't know, I think it is over 50,000 employees. He is now facing a new type of intimidation he has never faced in his life, and it is the intimidation of saying because of David Green's religious convictions against providing his employees with abortion-inducing drugs his company now faces fines amounting to $1.3 million a day.

All those pro-abortionists out there like this. This is wonderful. But he is someone who has hired thousands of people in 41 States in this country and is now providing all these benefits for Americans, and all he is saying is his religious convictions don't allow him to participate in abortion-inducing drugs. So he is under the threat right now, if you do the math, of a $1.3-million-a-day fine. And I guess I am more sensitive to this than I should be because I have known him from the very beginning.

I want to speak briefly, because I know I have a couple of colleagues who wish to speak. Does the Senator wish to make a UC to get in line?

The PRESIDING OFFICER. The Senator from Wisconsin.

Mr. JOHNSON of Wisconsin. Yes, I came to the floor today to support the Cruz amendment. Does the Senator from Oklahoma still wish to speak?

Mr. INHOFE. Yes, I just wanted to ask whether the Senator wanted to lock himself in with a unanimous consent request while I finish on another subject.

Mr. JOHNSON of Wisconsin. Yes. Madam President, I ask unanimous consent to speak for up to 5 to 7 minutes.

The PRESIDING OFFICER. Is there objection?

Without objection, it is so ordered.

The Senator from Oklahoma.

Mr. INHOFE. Madam President, I do cosponsor this amendment, and I will be voting for it at 2 p.m. today. But there is another one that will come up, amendment No. 28, and it could be coming up in a very short time this afternoon, and I was afraid I wouldn't have a chance to make a couple of comments about it.

I am cosponsoring this amendment by Senator PAUL, and it withholds funding to go to Egypt until Egypt's President Morsi declares he intends to abide by the Camp David peace accords, which have kept the peace between Egypt and Israel for over 30 years.

If you talk to any of your Israeli friends, they will tell you this is significant, and I appreciate the fact he recognizes that. In fact, the bill I had

introduced back in—well, I actually introduced it earlier, but reintroduced it on January 25 of this year—S. 207—calls for the suspension of the shipment of F–16s and other military equipment and services to Egypt until Morsi agrees to continue to uphold Egypt's commitment under the 1979 Camp David peace accords.

A lot of people don't realize they have been our friend, and if you ask any of your Israeli friends, they will tell you they are. It happens that this President is a Muslim Brotherhood president. He is not like the ones we have had in Egypt before. People who think of other countries having the same kind of system we have, they do not. Right now the military is a military we trained. There is a Major General Elkeshky, who happens to be here now and who is a friend of mine, and he was trained at Fort Sill in Oklahoma. The majority of the middle-grade officers in Egypt have been trained in the United States. They are our friends. And that is what we are getting at here.

So I made that qualification when I said we want to reduce the things we are doing, and I was talking about military equipment—the F–16s—way back in January, until they make that commitment. I think that is a very reasonable commitment.

The amendment that will be coming up, amendment No. 28, will be by Senator PAUL and myself and it will talk about support for Egypt and go into other areas of support over and above military equipment, saying that until such time as they agree with what they have agreed to over the last 30 years or so—that they will continue to be our friends—then we want to withhold this. It is the only leverage we have. I said this back in January, that the only leverage we have, in order to encourage them to come with us, is to say we are going to withhold some things, and that is what we are doing.

So when that amendment comes up—of course, I still have my bill, S. 207, and it is essentially the same as the Paul-Inhofe amendment. It is not necessary to have them both in terms of a vote, but I think on one we will have to have a vote, but it should tie in to what their behavior has been in the past, what it should be in the future, so that we don't have a Muslim Brotherhood guy running a country and we don't know how our equipment is going to be used.

Our F–16s and other equipment, our tanks, have been used to participate in the defense of our friends in the Middle East, primarily Israel and of ourselves. I am hoping we will get to that when we have a chance to have a vote on it.

With that, I yield the floor.

The PRESIDING OFFICER. The Senator from Wisconsin.

Mr. JOHNSON of Wisconsin. Madam President, I thank the Senator from Oklahoma for his comments.

I came to the floor to voice my support for the Cruz amendment. I want to concentrate on the cost of the health care law, which is why we are asking in this amendment to defund that bill because we simply can't afford it. So much of our budget already is not considered. Frequently, during negotiations on how we stabilize our deficit and our debt situation, there are many items off the table, things such as Medicare and Social Security. As unsustainable as those programs are, they are off the table in terms of negotiation. But if you want to take a look at the problem with the health care law—ObamaCare—it is the fact that it is simply not affordable. I know the name of the bill is the Affordable Care Act, but we simply can't afford it. Basic economics 101 describes the problem, because ObamaCare will dramatically increase the demand for health care. Thirty million more Americans—and let's face it, we all want those Americans to have access to affordable health care—will be accessing health care or trying to, demanding health care through some kind of program, such as Medicaid, while at the same time the supply will be dramatically reduced. That is going to be an economic disaster.

What I wish to do is put up a couple of charts and graphs showing the true cost. We don't talk about the true budget window when ObamaCare fully kicks in in the year 2016. This is based on the CBO estimate, and all we have had to do is extrapolate the final 3 years. Basically, it shows that ObamaCare won't cost the $1 trillion it was originally estimated to cost when it is fully implemented between 2016 and 2025. It will actually cost $2.4 trillion, at a minimum. And, of course, it will be paid for by these taxes, fees, and penalties, which I guess now are taxes, equaling about $1.4 trillion.

So given the $2.4 trillion worth of cost, we have $1 trillion worth of taxes—and, by the way, the majority of those or a great portion of those taxes will be indirect on middle-income Americans—that leaves about a $1 trillion hole in the current budget window. That is the $716 billion that will apparently be taken out of Medicare providers. We are not sure what will be happening in the full budget window, but that is a $1 trillion deficit risk.

Again, these are all estimates, and I would argue in general that the Federal Government is not particularly good at estimating anything. Back when they first passed Medicare in the mid 1960s, they projected out 25 years and said Medicare would cost $12 trillion in 1990. In fact, it cost $110 trillion—over nine times the original estimate. I don't believe the Federal Government has gotten better at estimating in that intervening time period.

As a matter of fact, President Obama famously repeatedly said that if we passed a health care law, by the end of his first term the cost of a family plan would actually decline by $2,500. Unfortunately, that guarantee has not come true. When President Obama took office, the average cost of a family plan was a little over $12,000. If his promise had come true, we would be looking at a family cost of $10,000. In fact, the cost of a family plan today is now $15,000. Again, that is somewhat of a broken promise.

But let's take a look at what I think is the greatest risk in terms of cost projections by the CBO in that estimate of the total cost of ObamaCare—the $2.4 trillion we are talking about in the true budget window. The CBO estimated only 1 million people net would lose their employer-sponsored care and get dumped in the exchanges with the subsidies. But it is going to be far worse than that, because 160 to 180 million Americans access their health care through their employers. I was one of those employers. I purchased health care for more than 31 years. The decision employers are going to be making in terms of whether to carry health care has dramatically changed under the health care law. Now the decision is going to be: Do I pay $15,000 for a family plan and then try to comply with the now 20,000 pages of law—rules and regulations?

Leader MCCONNELL printed out those 20,000 pages. You can see it in the hallway. It is an enormous burden for anybody trying to comply with that.

Anyway, the decision is: Do I pay $15,000 trying to comply with 20,000 pages of rules and regulations or do I pay the $2,000 to $3,000 fine—the penalty—and in so doing I am not exposing my employees to financial ruin, I am making them eligible for huge subsidies in the exchange? If an individual has a median household income of $64,000, they will be eligible for $10,000 in those exchanges—$10,000 worth of subsidies. Who isn't going to take that deal?

And that is my point. As employers, we will drop coverage. Employers are incentivized to do so. So rather than 1 million Americans losing their employer-sponsored health care and enjoying those subsidies, there will be tens of millions.

One of the amendments I will be offering in this budget process will be asking the CBO to provide the worst-case scenario: What happens if the McKinsey study is true, 30 percent of employers will drop coverage or 50 or 100 percent? It will be a simple amendment to get the worst-case scenario.

With that, I yield the floor.

The PRESIDING OFFICER. The Senator from Wyoming.

Mr. BARRASSO. Madam President, I come to the floor today to speak in support of the Cruz amendment and I do that as a doctor, as someone who has practiced medicine for 25 years taking care of families all around the State of Wyoming.

When we entered into the discussion about health care, and then ultimately the discussion of what became the Obama health care law, I would come to the floor and say, yes, we need to do

health care reform. Patients know what they want. They want the care they need, from a doctor they choose, at lower cost. Because cost was the driver of all of this.

Then we got into the debate and into the discussions and what we ended up with was a health care law over 2,000 pages long. I said then: Does that make a lot of sense? Let's go back to what one of our Founding Fathers said. James Madison, the father of the Constitution, said: Congress shall pass no laws so voluminous they cannot be read nor so incoherent they cannot be understood. Regrettably, that is exactly what we got with this health care law—a law so voluminous it cannot be read and so incoherent it cannot be understood.

And when you say: Well, how do we know it is so long that it could not be read, how voluminous, well, NANCY PELOSI said it herself. She said: First you have to pass it before you get to find out what is in it. Well, the American people now know what is in the health care law. They know it, and they don't like it.

I have had townhall meetings all around the State of Wyoming. When you go to a community and talk about the health care law and ask the simple question, Do you believe that under the President's health care law you will be paying more for your health care, all the hands go up. And then you ask the question, Do you believe that under the President's health care law the quality of your care and the availability of your care will actually go down, and again all the hands go up. That is why as of today this health care law continues to be very unpopular. Nationwide, more people think the health care law is doing harm than believe it is doing well.

Let's take a look at what the President promised during the discussion and why some people supported it.

First of all, the President said that under the health care law, if you like the plan you have, if you like the care you have, you can keep it.

We now know from many studies and reports that is not the case. It seemed in having just read the law as it was being discussed that you weren't going to be able to keep it, but it wasn't until now that people realize more and more that they are not able to keep what they had if they liked it.

The other thing the President promised is that under his health care law, insurance premiums for a family would drop by $2,500, he said, by the end of his first term in office. The first term has come and gone, and what families around the country are seeing is that health care premiums didn't go down, they actually went up—up quite a bit, up by over $3,000 per family.

Why is it that the law is so unpopular? There are many reasons, but part of it is this so-called individual mandate—the mandate that the government can come into your home and tell you that you have to buy a government-approved product. Many people around the country believe it is unconstitutional. It actually went to the Supreme Court, and the Court ruled. The Court ruled that it was not unconstitutional. But it is still unworkable, it is still very unpopular, and it is absolutely unaffordable for us as a nation.

I talk to physicians and I talk to the nurses who take care of patients. This health care law is bad for patients, it is bad for providers—the nurses and doctors who take care of those patients—and it is terrible for the American taxpayers.

The most interesting thing to me in the last week has been the report called the ''Beige Book,'' which the Federal Reserve comes out with every month. They travel around the country and ask their Federal Reserve people what is happening in this community, that community, in this part of the country, in that region of the country. And what is happening to the economy? In this past month's report, it said that specifically as a result of the health care law, businesses aren't hiring. The Federal Reserve has called this a drag on the economy—the health care law.

How can that be? Well, there are a couple of things. One is the huge uncertainty—businesses not knowing what the impacts of the health care law specifically in terms of dollars and cents are going to be. But there are a couple of components of the health care law that are really hurting in terms of businesses hiring people. One is that things kick in for businesses once a business has 50 employees. So if a business has 49 full-time employees and they are trying to expand and they have more business and they want to hire more people, they have to decide, what is the cost of that additional 50th employee?

Well, the costs are dramatic because it then kicks that business into the huge expenses of supplying government-approved health care—not necessarily health care or insurance at a level that those employees might need or want or that business can afford, no; a government level of approved health care that may be much more than that individual needs or wants or can afford because the government is saying: We know what is best, the government knows what is best for you, the family in this community or that community and people working for that business. So that is part of it. So those folks aren't hiring.

Remember, I said full-time employees. They define full time as 30 hours or more a week. So we have the businesses known as the 29ers, where they are, for purposes of not having additional full-time employees, hiring people for 29 hours a week. There have been reports in the press of different businesses where people are working two different jobs at two different businesses because they can only get part-time work, and the reason they can only get part-time work is because when they are part-time workers, the businesses aren't mandated to pay for very expensive health care which makes it much more difficult to be successful as a business and to keep hiring more people.

There was a report of a Five Guys hamburger chain in one community. They said: We are not going to expand, we are not going to build another, we are not hiring any more full-time people, and we are going to cut the hours of the people we have. We are putting in more part-time people.

This is one of the unintended consequences of the health care law—hurting the economy directly through impacting jobs.

The President says he wants to improve the economy, get people back to work, get America on the road to recovery. Yet the health care law is—according to the Federal Reserve in this month's ''Beige Book''—hurting the economy, dragging down the economy.

So I come to the floor today to support the amendment by Senator CRUZ because the American people know what they were looking for in health care reform, which was, of course, the care they need from a doctor they choose at lower cost, and that was not at all provided under the President's health care law.

Madam President, I yield the floor, and I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The bill clerk proceeded to call the roll.

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

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. REED. Madam President, I rise to speak today in opposition to the Cruz amendment, which would prohibit any funding in the continuing resolution from being used to carry out the goals of the Affordable Care Act.

The broad scope of this amendment clearly indicates that anything anticipated under the Affordable Care Act would be subject to defunding, and that is a broad category of activities. In fact, we already have seen the Affordable Care Act produce demonstrable positive results in my State of Rhode Island, and those results could be eliminated or reversed.

For example, because of the Affordable Care Act, there are protections in place today for children with preexisting conditions to ensure they are no longer denied coverage. There are over 15,000 children who have a preexisting condition who could have been dropped from insurance coverage prior to the enactment of the Affordable Care Act. Their parents and other adults—approximately 200,000 Rhode Island adults also living with preexisting conditions—will gain protection from being dropped from coverage beginning in January. We began with children, and now we are expanding it to adults. If we don't do that, then we are going

to have a whole category, a huge segment of my population who may lose access to insurance, and the inevitable result will be that they will go to expensive emergency rooms, and they will cost all of us more money. Rather than saving money and dealing with the deficit in a responsible way, this will just add to our deficit problems and deny people health care.

The law, the Affordable Care Act, included new tax breaks for small businesses to make health insurance more affordable. Small businesses have been able to access a tax credit of up to 35 percent of their health care costs every year since 2010. Beginning in 2014, these businesses may receive a tax credit of up to 50 percent of their health care costs for any 2-year period. Again this support under the Affordable Care Act could be jeopardized or eliminated under the proposed amendment.

Also in jeopardy are discounts on covered brandname and generic prescription drugs for seniors who have reached the prescription drug coverage gap known as the famous or infamous doughnut hole. Already in Rhode Island, seniors have saved—individual senior citizens of Rhode Island have saved $20.5 million as a result of these discounts since the law was enacted. These discounts will continue until the coverage gap—the doughnut hole—is eliminated in 2020. The Cruz amendment will stop that. Essentially we are telling seniors go back to the time of the doughnut hole, more money out of your pocket at a time when you can afford less and less for prescription drugs.

Many of my colleagues on the Republican side say they support these aspects of the Affordable Care Act, yet this amendment would effectively do away with them or cast so much doubt or confusion that they would not be effectively implemented. We have to, I think, continue to effectively implement the Affordable Care Act, not only in terms of providing access to quality care for all of our citizens but because within the Affordable Care Act were significant efforts to improve health care efficiencies. Indeed, through these reforms, we were able to extend the Medicare Program by, I believe, 8 years, to 2024, in terms of our funding models. All of that would be jeopardized by this amendment.

There are some other examples, too. For example, the Affordable Care Act would reauthorize funding to help immunize uninsured and underinsured children and adults. Every year my State of Rhode Island receives $3 million to immunize this population. Funding for immunizations is critical for the child and the family, but it also benefits all of us, because if you can immunize 75 to 95 percent of the population, immunologists and health specialists will tell us we are all protected through something that is technically known as herd immunity. It makes sense, if you have a sufficient number of people who are vaccinated against the disease, when an outbreak occurs the likelihood of it spreading is diminished dramatically. This is another example of a public health initiative under the Affordable Care Act, which, if it is repealed or defunded, will leave us all vulnerable to diseases. That is not a benefit, that is a detriment to all of us.

We have to, again, I think, consider other aspects of the Affordable Care Act. One other aspect I wish to mention is the critical area of health care workforce programs, programs that help train doctors and nurses. Many of these programs are funded in the continuing resolution and they, too, would be either eliminated or so uncertain as to be unreliable for the institutions. In my home State, colleges and universities, such as at the University of Rhode Island, are using these programs to help train a new generation of health care professionals, not just physicians but physician's assistants and nurse-practitioners. Indeed, what we are seeing, because of the Affordable Care Act, is a refocus to more emphasis on family practitioners, primary care that is less expensive and more effective over the long term in terms of prevention—all that would be jeopardized under this proposed amendment.

There are countless other examples of not only interfering with health care access for a vast number of Americans, but actually setting back our efforts to reduce the deficit and to sustain programs such as Medicare. The burden might be particularly felt by seniors because one of the things that was most compelling in the debate about the Affordable Care Act was closing this doughnut hole. Seniors believe we have taken a positive step to do that. This would be an about-face for the seniors of America, causing them to see more and more costs in their limited budgets.

These are not the messages we want to give to seniors or families. I urge my colleagues to oppose this amendment.

I yield the floor and suggest the absence of quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The bill clerk proceeded to call the roll.

Mr. JOHANNS. Madam President, I ask unanimous consent the order for the quorum be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. JOHANNS. I ask for 3 minutes to speak on the Cruz amendment.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. JOHANNS. Madam President, today I rise to speak on behalf of the Cruz amendment. I want to spend a couple of minutes explaining my thoughts behind the amendment and why I am proud to be a cosponsor of this amendment.

All across Nebraska I do roundtable meetings, where I sit down with hospital communities, I sit down with medical professionals, I sit down with small businesses. I have done this for years and years.

Over the last couple of years since the Affordable Care Act was passed, I have had a number of opportunities to sit down with small businesses. Invariably the first issue that comes up is the crushing effect of the regulatory environment. Businesses will tell me they simply are afraid to grow or cannot grow because of what Washington is burdening them with. More specifically, they talk to me about the Affordable Care Act and the toll it is taking on their businesses.

I will give you a perfect example: a small business, a franchise business. They have a franchise in Lincoln, they have a franchise in Omaha. The owner of that business said to me: You know, my business is not too bad. We could actually grow this business. We look out there in the future and see some opportunities to grow this business.

They went on to say: We have about 48 employees now, and we are not going to grow. I said: Why would that be? Why have you decided you are not going to grow this business? Their answer was straightforward. They said: When we grow to over 50 employees, we become subject to the requirements that are impossible for a business our size to meet under the Affordable Care Act. The owner said to me: Mike, I met with the accountants and the lawyers. We have looked at this in every possible way we can, and we decided we are going to stay a business of this size.

It was not isolated to that business. I went down the interstate and sat down with another business in a different community and the story was the same. I was told business was pretty good and that business was there for them to grow. They had about 47 or 48 employees, and they made the decision they will not grow. This is at a time in our Nation's history where we are desperate for employment in the United States.

In Nebraska, we have been fortunate. We pay our bills. Our unemployment never got over 5 percent because we are a conservative State. Having said that, when we hear businesses say the greatest impediment to their growth is not the competition down the street or across the street, the greatest impediment to their growth is the Federal Government, when we hear that, we have to realize we have done something very seriously wrong.

I want to wrap up with another thought, and it is on a different area of the Affordable Care Act.

Madam President, I ask for an additional minute to finish this thought.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. JOHANNS. Madam President, I met with a group of young people today. They have their whole lives in front of them. They are talking and thinking about what they are going to do in terms of going to college and what their careers might be. They

asked me about the Affordable Care Act. I said: One of the things that is important to point out is that my generation is going to do very well under this act. We have caps on how much our premiums can go up, and we have Medicare out there. Then I said: Your generation is not going to do well. Why? Because your premiums are going to go straight up and you are at a point in your lives where you are not going to use a lot of health care. I am at a point in my life where I will use a lot of health care.

This imbalance is going to be devastating to the younger generation. When they start thinking about starting their families, buying their first home and making an investment, what is the Federal Government going to do? It is going to place a crushing blow upon them in terms of higher premiums, and that is the reality of the situation.

I will wrap up with this thought; I could go on and on. As a former Governor, I can tell everyone that adding 24 million people to Medicaid is such a flawed policy approach. I could talk about the impact this is going to have on accessibility for care by people who desperately need that care, but the bottom line is this: This was a flawed policy. I was here when it was passed. It is a policy that needs to be defunded. We need to do the right thing with health care, and this is not it.

I yield the floor and suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The bill clerk proceeded to call the roll.

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

The PRESIDING OFFICER (Mr. HEINRICH). Without objection, it is so ordered.

Ms. MIKULSKI. Mr. President, could we just have quiet. We are going to have our first vote on this bill.

The PRESIDING OFFICER. The question is on agreeing to the Cruz amendment.

Mr. SHELBY. Mr. President, I ask for the yeas and nays.

The PRESIDING OFFICER. Is there a sufficient second?

There appears to be a sufficient second.

The clerk will call the roll.

The assistant bill clerk called the roll.

Mr. DURBIN. I announce the Senator from New Jersey (Mr. LAUTENBERG), the Senator from West Virginia (Mr. MANCHIN), and the Senator from Rhode Island (Mr. WHITEHOUSE) are necessarily absent.

The PRESIDING OFFICER. Are there any other Senators in the Chamber desiring to vote?

The result was announced—yeas 45, nays 52, as follows:

[Rollcall Vote No. 34 Leg.]

YEAS—45

Alexander	Enzi	McConnell
Ayotte	Fischer	Moran
Barrasso	Flake	Murkowski
Blunt	Graham	Paul
Boozman	Grassley	Portman
Burr	Hatch	Risch
Chambliss	Heller	Roberts
Coats	Hoeven	Rubio
Coburn	Inhofe	Scott
Cochran	Isakson	Sessions
Collins	Johanns	Shelby
Corker	Johnson (WI)	Thune
Cornyn	Kirk	Toomey
Crapo	Lee	Vitter
Cruz	McCain	Wicker

NAYS—52

Baldwin	Hagan	Nelson
Baucus	Harkin	Pryor
Begich	Heinrich	Reed
Bennet	Heitkamp	Reid
Blumenthal	Hirono	Rockefeller
Boxer	Johnson (SD)	Sanders
Brown	Kaine	Schatz
Cantwell	King	Schumer
Cardin	Klobuchar	Shaheen
Carper	Landrieu	Stabenow
Casey	Leahy	Tester
Coons	Levin	Udall (CO)
Cowan	McCaskill	Udall (NM)
Donnelly	Menendez	Warner
Durbin	Merkley	Warren
Feinstein	Mikulski	Wyden
Franken	Murphy	
Gillibrand	Murray	

NOT VOTING—3

Lautenberg	Manchin	Whitehouse

The amendment (No. 30) was rejected.

Mr. REID. Mr. President, I move to reconsider the vote.

Ms. MIKULSKI. I move to lay that motion on the table.

The motion to lay on the table was agreed to.

The PRESIDING OFFICER. The Senator from Iowa.

AMENDMENT NO. 53 TO AMENDMENT NO. 26

Mr. HARKIN. Mr. President, I have an amendment at the desk, and I ask for its consideration.

The PRESIDING OFFICER. The clerk will report the amendment.

The legislative clerk read as follows:

The Senator from Iowa [Mr. HARKIN], for himself, and Mr. CARDIN, proposes an amendment numbered 53 to amendment No. 26.

(The amendment is printed in today's RECORD under ''Text of Amendments.'')

Mr. HARKIN. Mr. President, the spending package we are considering this week I think is a little bit unusual, to say the least. Five of the twelve Appropriations subcommittees get detailed, full-length spending bills: Defense, Military Construction, Agriculture, Homeland Security, and Commerce and Justice. The other seven appropriations bills are basically on autopilot, continuing resolutions. So with a few exceptions, whatever the government spent last year on programs in these seven subcommittees the government will spend this year.

I know for a fact this is not what the chairwoman of the Appropriations Committee wanted. She fought hard for an omnibus that would have included all 12 spending bills. I am very respectful of that. She fought hard for it, but this is where we stand right now.

I am speaking today because the programs under the jurisdiction of the Senate Labor, Health and Human Services, and Education Appropriations Subcommittee, of which I am privileged to chair, would be put on autopilot. I suppose it comes as no surprise I think that is a terrible mistake.

The Labor-HHS bill—or Labor-H, as it is known in the terminology around here—is how we fund the National Institutes of Health, the preeminent biomedical research entity in the world. This bill is how we fund the child care and development block grant, which gives working families access to high-quality childcare. It is how we provide Federal funding to teach students with disabilities—the Individuals With Disabilities Education Act—it is how we help local school jurisdictions meet their constitutional obligation to provide a free and appropriate education to all kids, even kids with disabilities.

These services are critical to this Nation. It has been said before—actually, the first person I ever heard say it was a recently departed and beloved chairman, Senator Dan Inouye, who once said: The Defense Appropriations Committee is the committee that defends America. The Labor, Health and Human Services, and Education Committee is the committee that defines America—who we are as a country, what we are about as a people, what we are going to do for the future of our children in America.

So we need to examine every year whether we are spending the right amounts of taxpayer money for these services. If that makes sense for the Defense appropriations bill, to take a look at it yearly, to see if we are spending the right amounts, if it is right for Homeland Security and Agriculture, why shouldn't the same level of oversight be applied to the Labor, Health and Human Services bill?

As a way of sort of describing where we are, this past December, we negotiated a fiscal 2013 spending bill with Republican and Democratic counterparts, House and Senate. So I, Senator SHELBY, Congressman Rehberg, and Congresswoman DELAURO on the House side all read this bill through in December and signed off on it.

That was going to be in the omnibus bill. Well, as we know, we did not have an omnibus spending bill. So the talks were bicameral and bipartisan. They were difficult talks and we hammered out an agreement and we had a compromise. I got some of what I wanted and I lost some of what I wanted. But that is the nature of compromise. So with an exception, which I will explain shortly, the amendment I have just offered is what was agreed upon in December. No more money, not adding any money. But we are changing some of the accounts to better represent what we decided, both bicameral and bipartisan, should be priorities. That is the amendment I am offering. Again, I repeat, it is what we decided upon in December in terms of what our priorities ought to be. If we just go with Labor-H in a CR, all of that is wiped

out. So what I am proposing to replace that is the autopilot version with a detailed bipartisan compromise.

I want to emphasize this point. This amendment is not my Labor-HHS bill. Now, obviously if I had my druthers, I would have spent dollars as I wanted them to be spent. But compromise does not work that way. This amendment includes the priorities from the other side of the aisle and from the other side of the Capitol. It was a give and take. Even though there are things in the amendment I would like to change, it is vastly superior—vastly superior—to putting all of these programs on autopilot and doing this year exactly what we did last year and the year before, because we were on autopilot last year too.

Let me point out two things that are different in this amendment than what was in December. I said it was the same but there are two things different. The agreement we hammered out in December, with Republicans and Democrats in the Senate, Republicans and Democrats in the House Appropriations Committee, included money for the Affordable Care Act, for ObamaCare. This amendment I am offering today took that out, just took it out. Even though we had agreed upon $513 million for that in December, this is not in my amendment. I want to make that clear.

The second major difference between the December bill and this amendment is the total cost. As I said, the December bill would not fit within our new budget cap. We have a new budget cap since December. So this amendment fits within that budget cap by a very small, across-the-board cut of 0.127 percent. That is one-eighth of 1 percent to every program in the bill. I did not do an across-the-board cut on some at the expense of others. No. We just did it on everything, .127 percent. So the programs that would have received increases in the December bill still get the increases, just minus .127 percent. The programs that were cut in the December cut will still get cut, they will just be cut by .127 percent more. But other than those two changes, no additional health reform money, no other kinds of cuts. The amendment is basically identical to what we agreed upon in December. So I want to take a look at it and see why it is better than what I call the autopilot version or the continuing resolution.

Let's start first with education. Title I is the cornerstone Federal program for helping all students, especially those from disadvantaged backgrounds, helping them meet high academic standards. More than 90 percent of the school districts across America receive title I funds. My amendment, the one that is before us, has $107 million more for title I. What is in the bill before us has absolutely no increase, zero.

We were able to bump that up again by an amount equal to .127 percent, as I said. It is basically the same. That is title I. Special education, I mentioned IDEA, we have a $125 million increase in the amendment I am offering; in the CR, no increase whatsoever.

National Institutes of Health, we are especially proud of this. The omnibus, the Senate CR that is before us, has $71 million more than last year. This amendment bumps it up to $211 million. So the CR has $71 million, we have $211 million for an NIH increase.

Childcare. The underlying CR includes $50 million more than last year. My amendment would increase that to $107 million. That means the childcare subsidy for working families of 10,000 additional children, families who basically depend upon this so they are able to go to work.

AIDS drugs. The Ryan White AIDS Drug Assistance Program provides lifesaving drugs to people living with HIV. My amendment includes $29 million more for this program. The CR has no increase whatsoever.

So far I mentioned only some of the larger programs in the bill. My amendment addresses dozens of smaller priorities as well. At the full committee markup of the Labor-H bill back in July of last year, Senator Inouye, who was chairman at that time, promised Senator MURKOWSKI that the final fiscal year 2013 spending bill would include $10 million for suicide prevention among Alaska Natives and Native Americans. I did not make that promise, but it was made by the chairman of the committee. I am honoring that promise. I honored it when we negotiated this in December. We included that $10 million. That is in my amendment also.

Again, a small increase for suicide prevention is not possible in a CR. But it is in my amendment. If we approve it, that funding will become law.

TRIO Program. It is an important program to many Members on both sides of the aisle. It has had broad support. The TRIO Program makes the dream of a college education possible for low-income students. As we know, this goes basically to students who are the first in their family to go to college. So if your parents had not gone to college, they would be eligible for TRIO, based upon income levels.

The bill we negotiated in December included an increase for the TRIO Program. Again, that is not possible in a CR, the bill that is before us. But it is in my amendment. If Congress approves it, TRIO will get a $14 million increase this year. I just did not have it on my chart.

I could go on and on. There are a lot of things. Food safety, lead poisoning screening for kids in this country, lead poisoning screening, diabetes prevention, worker safety. These are important priorities. They are all addressed in my amendment, because we addressed those in December. But they are not in the bill before us.

Again, let me sort of sum up what we have here in this amendment. It is the same total cost as what is in the bill before us, no additional money. It was a bicameral, bipartisan compromise that we hammered out in December. There is more money for NIH, childcare, education, I mentioned things such as TRIO, I mentioned things such as IDEA and others. I think it fulfills our constitutional duty to be good stewards of the public's money, to do adequate oversight on appropriations, and to mold and shape, again in a bipartisan, bicameral method, to work it out.

There are some who say, gee, if we pass this, the House will not take it. I do not know why not. They agreed upon it in December. I do not mean the whole House, but the House Appropriations Committee, under the chairmanship of Chairman ROGERS, agreed on this in December. It was all signed off on. So I do not know why they would not accept it. They did not put it in their bill when they sent it over here. Okay. They did not. Well, there are some other things they did not put in the bill when they sent it over here too. So I think it is incumbent upon us to do our duty, to make sure we look at these programs and decide where we want to bump some up, maybe some we want to cut down, some we want to modify. That is what we did in December. Well, we finished in December. I think we started working on it back around July, if I am not mistaken. We finally got it worked out in December.

If we had had an omnibus, we would have had this. I would not be here today offering this amendment. Again, to those who say: Well, if we had this, the House would not accept it, is that a reason for us not to do our duty? Is that a reason for us not to do what is right and just and fair, because someone says maybe the House will not take it? I mean, the House would have some serious explaining to do on why they would not take it since it was already in the December compromise that was reached.

I would point out again that the defense bill, the Defense appropriations bill that is here is what they agreed upon in December. If that is the case, then why cannot we do Labor-H and all of the things that we fund the same as what we had in December also? That is my basic point here.

As I say, we did make a couple of changes. One change we did is we took out the funding for ObamaCare, which I think is a good deal. I mean, ObamaCare is something we have to continue to implement. It is going to save us a lot of money. It is going to make lives better for people all over America, already is making lives better for people with preexisting conditions, people with very intricate diseases and conditions that need to be managed, young people who are staying on their parents' policies until they are age 26, the elderly who get their free health screenings every year under Medicare. So it is already making a big impact. I am a big supporter of ObamaCare. I want to make sure it gets funded and implemented. But the

fact is that we could not do that. Well, that is no reason then not to increase NIH and childcare development block grants, IDEA, TRIO Programs, a host of other things. If the will of the body was that we could not do anything to implement ObamaCare, then at least let's do our duty and agree to meet the goals and meet the targets we set in December in our negotiations.

We laid the bill down earlier. As I said, it is basically what we had in December. I am hopeful that Senators and their staffs will take the time to look through it and see what is in there, because I think they will come to the same conclusion. No more money than what we have in the CR. It is basically the same with the exceptions I mentioned of what we did in December. We will have a better result, a better platform going forward the rest of this year and next year by not doing a CR but by doing this bill in a bill form, just as we have done for other bills in this appropriations measure.

Again, I want to thank Chairman MIKULSKI for fighting so hard for this. I know she has done everything possible. But, again, sometimes it falls to an amendment that we have to do to get things done. I am hopeful my friends on the other side of the aisle again will take a serious look at this and support this amendment. As I said, I see no real reason not to support it.

I mean, I am anxious to see if someone has some arguments as to why we shouldn't support this since, as I said, we had hammered out this agreement over a long period of time last fall. We always spoke about how we want to work in a bipartisan fashion, we want to accept the results of bipartisan negotiation.

That is what we did last year. I think we started probably around July, had an August break, at least by September—probably started in July, then September, October, November, December we worked it out in a very bipartisan fashion, although I didn't get everything I wanted in the bill.

If my friends on the other side of the aisle now want to say: No, we are not going to accept this, what is the use of engaging in long, hard, difficult, strenuous bipartisan negotiations where we reach an agreement and they respond: Well, we don't care. We are not going to support it anyway.

I have taken great pride in working with my colleagues in a bipartisan fashion last year on the reauthorization of the Food and Drug Administration bill, the drug user bill, the drug safety bill. We worked long and hard on these for probably almost 2 years and were able to get them through. There were other bills I have been involved in where we did good bipartisan negotiating, and that was the same as this.

This is not something I rammed through and said: This is my bill; take it or leave it. That is not the way I work. I have been the chair or ranking member of this subcommittee since 1989. It is a great subcommittee because it meets the human needs, social needs, educational needs, and, yes, biomedical research needs and disease control needs, as the Centers for Disease Control and Prevention is also funded under our subcommittee.

It keeps Americans safe. The Defense Committee keeps us safe from foreign entities, other entities that would want to do us harm militarily. Homeland Security does the same.

This committee keeps us safe from diseases. It keeps us safe from illnesses. It provides for the kind of research which has overcome so much in the last 20 to 30 years and the great strides we have made in cancer and other chronic diseases. We have made great strides because we have invested in them. This is what the subcommittee does.

It also provides for education, making sure kids who come from the poorest families and poor areas also receive a fair shake in education funds, programs for students who go to college, Pell grants and student loans. It is incumbent upon us, as we can't continue to have continuing resolutions on this type of bill. Times change, circumstances change, and we need to modify the bill and do things which recognize some of the new realities. This is what we have done. I am hopeful we can get support for this amendment. I don't think it is a heavy lift at all for anyone to support this.

I said, and I will repeat, repeat, repeat and keep repeating: There is no new money, no more than what is in the underlying bill. It is basically the same as we hammered out in December through long negotiations.

Hopefully, it may be a little easier for my Republican colleagues, as there is not any money in there for the implementation of ObamaCare. This is something I didn't agree with, but that is life and one of the compromises one has to make. The other items in this bill are vitally important to the health, the welfare, the education, and safety of the American people.

I hope the amendment will pass, and I ask my colleagues for their support.

Mr. President, I ask unanimous consent that an explanatory statement and a detailed funding table accompanying the amendment be printed in the RECORD.

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

DIVISION ___—LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES

Following is an explanation of the effects of this division (hereafter referred to as the ''bill''). Funds for the individual programs and activities within the accounts in this act are displayed in the detailed table at the end of the explanatory statement for this act. Funding levels that are not displayed in the detailed table are identified in this explanatory statement.

In implementing this bill, the Departments and agencies should be guided by the language and instructions set forth in Senate Report 112–176 accompanying S. 3295 unless specifically addressed in this statement. In cases where the language and instructions in the Senate report specifically address the allocation of funds, those that should be implemented have been restated in this explanatory statement.

TITLE I

DEPARTMENT OF LABOR

EMPLOYMENT AND TRAINING ADMINISTRATION

TRAINING AND EMPLOYMENT SERVICES

(INCLUDING TRANSFER OF FUNDS)

The bill provides $84,291,000 for migrant and seasonal farmworker formula grants, including $5,678,222 for migrant and seasonal farmworker housing grants, of which not less than 70 percent of this amount shall be used for permanent housing grants. The Secretary of Labor shall submit annual reports documenting the use of farmworker housing funds. The reports should include information on the amount of funds used for permanent and temporary housing activities, respectively; a list of the communities served; a list of the grantees and the States in which they are located; the number of individuals or families served listed by State; and a list of allowable temporary housing activities.

OFFICE OF JOB CORPS

(INCLUDING TRANSFER OF FUNDS)

The Department of Labor's mismanagement of Job Corps appropriations led to considerable disruptions for current and new students at the end of program year 2011. The Department delayed notification to the Committees on Appropriations of the House of Representatives and the Senate regarding the shortfall once discovered.

In October 2012 the Department began implementing several cost-cutting measures and shall provide quarterly reports detailing its cost-cutting measures and their impact on both centers and students.

The bill includes language allowing the Secretary to transfer up to $30,000,000 for Job Corps operations from unobligated balances. The bill requires the Secretary to transfer not less than $10,000,000 within 30 days of enactment of this act.

Contracts provided for the operation and maintenance of Job Corps facilities are generally let on a 2–year basis, with as many as 3 option years depending on the quality of performance. When evaluating contract renewals or re-bids, the Secretary shall provide due consideration to the Federal investment already made in high-performing incumbent contractors as a part of a full, fair, and open competitive process. As part of this process, the Department shall consider documented past performance of student outcomes and cost-effective administration as key factors in determining fair market value in Job Corps procurements.

OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION

SALARIES AND EXPENSES

The language in Senate Report 112–176 directing the Department to issue a notice of proposed rulemaking on silica stands as a recommendation of the Senate Committee on Appropriations. There is a need to protect workers from developing silicosis. Therefore, not later than 30 days after enactment of this bill, OSHA shall provide the Committees on Appropriations of the House of Representatives and the Senate a report describing its efforts in this area, including a chronology related to its silica standard-setting effort initiated in 1997 and the number of silica enforcement activities the agency has undertaken since that time.

MINE SAFETY AND HEALTH ADMINISTRATION

SALARIES AND EXPENSES

(INCLUDING TRANSFER OF FUNDS)

In order to prepare properly for emergencies, the Mine Safety and Health Administration (MSHA) should continue to devote resources toward a competitive grant activity for effective emergency response and recovery training in various types of mine conditions. The Committees on Appropriations of the House of Representatives and Senate also expect to be notified in advance of any reallocation of funds pursuant to new bill language included in the bill.

The Government Accountability Office (GAO) is directed to provide an additional analysis as a follow-up to its report (prepared in response to a request in last year's conference agreement) concerning MSHA's proposal to lower the permissible exposure limit for coal dust. The follow-up study should discuss the available data and estimates to date regarding trends in the prevalence of coal workers pneumoconiosis and other occupational respiratory diseases among coal miners over the past two decades. The study shall include including the adequacy of the data, methodologies, and conclusions that can be drawn regarding trends in prevalence both nationally and to particular regions or categories of mining. The GAO shall provide to the Committees on Appropriations of the House of Representatives and Senate an interim report not later than 90 days after enactment of this bill.

BUREAU OF LABOR STATISTICS

The Bureau of Labor Statistics shall follow the language under the Bureau of Labor Statistics heading in Senate Report 112–176.

GENERAL PROVISIONS

GENERAL TRANSFER AUTHORITY

The bill includes a provision modified from last year's bill that provides transfer authority of not to exceed 1 percent of the funds appropriated for fiscal year 2013 in this Act for the Department of Labor.

TRANSFER AUTHORITY FOR EVALUATION PURPOSES

The bill modifies a provision that allows up to 0.5 percent of discretionary appropriations provided in this act for all Department of Labor agencies to be used by the Chief Evaluation Office for evaluation purposes consistent with the terms and conditions in this bill applicable to such office.

TEMPORARY NON-AGRICULTURAL EMPLOYMENT H–2B PROGRAM

The bill continues a provision relating to the ''Wage Methodology for the Temporary Non-Agricultural Employment H–2B Program'' regulation published by the Employment and Training Administration and includes a new provision relating to the ''Temporary Non-Agricultural Employment of H–2B Aliens in the United States'' regulation published by the Employment and Training Administration and the Wage and Hour Division.

WORKING CAPITAL FUND RESCISSION

The bill includes a new provision that rescinds $10,337,000 from ''Departmental Management, Working Capital Fund''.

EVALUATION FUNDING FOR THE TRADE ADJUSTMENT ASSISTANCE COMMUNITY COLLEGE AND CAREER TRAINING GRANT PROGRAM

The bill includes a new provision that allows up to 3 percent of funds provided for the Trade Adjustment Assistance Community College and Career Training grant program to be used for evaluation and technical assistance purposes.

TRANSFER OF COMPTROLLER GENERAL RESPONSIBILITIES

The bill includes a new provision that transfers Davis-Bacon Act claims responsibilities from the Comptroller General to the Secretary of Labor.

TITLE II

DEPARTMENT OF HEALTH AND HUMAN SERVICES

This explanatory statement includes tables allocating funding for the programs, projects and activities in this Act. The agencies funded in this act are expected to fully implement these allocations in accordance with this statement, except as permitted by the reprogramming and transfer authorities provided in this act. Any action to eliminate or consolidate programs, projects and activities should be pursued through a proposal in the President's budget so it can be considered by the Committees on Appropriations.

HHS is directed to include in its fiscal year 2014 congressional budget justification the amount of expired unobligated balances available for transfer to the nonrecurring expenses fund (NEF), and the amount of any such balances transferred to the NEF. This should include actual or estimated amounts for the prior, current, and budget years.

HEALTH RESOURCES AND SERVICES ADMINISTRATION

PRIMARY HEALTHCARE

Community Health Centers.—The bill includes statutory language to require all funds provided for the Community Health Centers program to be obligated prior to October 1, 2013. Bill language also provides $48,000,000 for base grant adjustments to existing health centers.

HEALTH WORKFORCE

Within the funds provided for Primary Health Care, HRSA is expected to provide not less than the fiscal year 2012 level of funding for the Native Hawaiian Health Care Program.

Within the funds provided for Training in Oral Health Care, the bill includes not less than $8,000,000 for General Dentistry programs and not less than $8,000,000 for Pediatric Dentistry programs, $12,344,000 for State Health Workforce grants, and $4,048,000 for other programs authorized under section 748 of the Public Health Services (PHS) Act, to include public health dental residencies, dental faculty loan repayment, and geriatric dental training programs.

The bill includes language prohibiting health workforce funds to be used for section 340G–1, the Alternative Dental Health Care Providers Demonstration program.

The bill moves a long-standing general provision regarding the continuation of the Council on Graduate Medical Education to this heading.

Public Health Workforce Development (formerly Public Health and Preventive Medicine).—The program line has been changed to Public Health Workforce Development to better align with the congressional budget justification, which uses this title to encompass a wide variety of training activities authorized in the PHS Act. Sufficient funding has been included to continue all activities at last year's level. In addition, increased funding over fiscal year 2012 shall be used for a center of excellence on integrative primary care for the purpose of developing and disseminating best practices for integrative medicine training for physicians and nurses.

MATERNAL AND CHILD HEALTH

The bill includes a provision setting aside $78,641,000 for Special Projects of Regional and National Significance (SPRANS). The bill provides $551,181,000 for State grants and includes sufficient funding to continue the set-asides for oral health, epilepsy, and sickle cell at not less than fiscal year 2012 levels. The set-aside for fetal alcohol syndrome is funded at $500,000.

The bill provides not less than the fiscal year 2012 funding level for the protection and advocacy services under the Traumatic Brain Injury program.

Within the funds provided for the Autism and Other Related Disorders program, not less than the fiscal year 2012 level shall be provided for the LEND program and for programs authorized under section 399BB of the Combating Autism Act.

The bill includes a $2,000,000 increase for the Heritable Disorders program to support wider implementation of newborn screening for Severe Combined Immune Deficiency and related disorders.

RYAN WHITE HIV/AIDS PROGRAMS

The increase provided for the AIDS Drug Assistance Program is intended to be awarded according to the statutory formula.

Four transitional grant areas changed status in fiscal year 2011 and HRSA transferred funds from Part A to Part B in accordance with Section 2610(c)(2) of the PHS Act. Sufficient funding has been included for these areas within the Part B allocation and bill language ensures that no additional and redundant transfers take place with respect to these four areas. This is intended to fulfill the intent of the authorizing statute. This should in no way preclude the authorizing statute from taking effect for any transitional grant area changes that occur for the first time in fiscal year 2013.

HRSA shall allocate funds for the Minority AIDS Initiative within the Ryan White HIV programs at not less than the fiscal year 2012 funding level.

HEALTH CARE SYSTEMS

The bill includes language that permits the Secretary to collect a fee from each purchase of drugs made through the 340B Drug Pricing Program.

HEALTH EDUCATION ASSISTANCE LOANS PROGRAM

The bill allows for the transfer of the Health Education Assistance Loans Program to the Department of Education.

CENTERS FOR DISEASE CONTROL AND PREVENTION

The bill includes $5,589,285,000 in discretionary appropriations for the Centers for Disease Control and Prevention (CDC). In addition, $386,357,000 is made available under section 241 of the Public Health Service (PHS) Act and $205,925,000 in transfers from the Public Health and Social Services Emergency Fund.

IMMUNIZATION AND RESPIRATORY DISEASES

The bill includes a total of $589,114,000 for Immunization and Respiratory Diseases, which includes $525,201,000 in discretionary appropriations, $12,864,000 that is made available under section 241 of the PHS Act, and $51,049,000 that is made available from amounts in the Public Health and Social Services Emergency Fund.

Within this total, the bill includes the following amounts:

Budget activity	*FY 2013 level*
Section 317 Immunization Program	367,870,000
Program Implementation and Accountability	62,302,000
National Immunization Survey	12,864,000
Influenza Planning and Response	158,942,000

Section 317 Immunization Policy.—Immunizations play an important role in protecting and promoting children's health. On July 10, 2012, CDC proposed a policy that prohibits section 317 funds from being used to vaccinate insured individuals. The transition may require more time. For that reason, the bill directs CDC to delay the policy from

taking effect during fiscal year 2013 to allow CDC and States to review and adjust to the proposed change in a manner that maintains a strong vaccination program.

HIV/AIDS, VIRAL HEPATITIS, SEXUALLY TRANSMITTED DISEASES AND TUBERCULOSIS PREVENTION

The bill includes $1,101,956,000 for HIV/AIDS, Viral Hepatitis, Sexually Transmitted Diseases and Tuberculosis Prevention.

Within this total, the bill includes the following amounts:

Budget activity	*FY 2013 level*
Domestic HIV/AIDS Prevention and Research	$786,176,000
HIV Prevention by Health Departments	392,636,000
Activities to Improve Program Effectiveness.	363,702,000
School Health	29,838,000
Viral Hepatitis	19,694,000
Sexually Transmitted Infections	155,788,000
Tuberculosis	140,298,000

Sexually Transmitted Infections.—The increase provided for the prevention and control of sexually transmitted infections shall be used to expand the Infertility Prevention Program.

EMERGING AND ZOONOTIC INFECTIOUS DISEASES

The bill includes $266,458,000 for Emerging and Zoonotic Infectious Diseases. Within this total, the bill includes the following amounts:

Budget activity	*FY 2013 level*
Emerging and Zoonotic Base Activities	$19,822,000
Vector-borne Diseases	23,083,000
Lyme Disease	9,000,000
Food Safety	39,781,000
Prion Disease	6,000,000
Chronic Fatigue Syndrome	4,707,000
Emerging Infectious Diseases	123,359,000
National Healthcare Safety Network	14,840,000
Quarantine	25,866,000

Food Safety.—Within the increase provided for food safety, $4,300,000 is for a microbiological data program to be undertaken in partnership with appropriate state agencies. The remainder of the increase shall be used to support upgrades to PulseNet, enhance surveillance and response capability, and develop new laboratory tools.

Lyme Disease.—CDC is encouraged to consider expanding activities related to developing sensitive and more accurate diagnostic tools and tests for Lyme disease, including: the evaluation of emerging diagnostic methods; improving utilization of validated diagnostic testing to account for the multiple clinical manifestations of Lyme disease; epidemiological research on tick-borne diseases to include determining the frequency and nature of any long-term complications; improved surveillance and reporting to produce more accurate data on their incidence; and prevention of Lyme and tick-borne diseases through product development, community-based public education, and physician and healthcare provider programs based on the latest scientific research.

Prion Disease.—The bill includes increased support for the prion disease program targeted toward extramural activities.

CHRONIC DISEASE PREVENTION AND HEALTH PROMOTION

The bill includes $797,081,000 for Chronic Disease Prevention and Health Promotion.

Within this total, the bill includes the following amounts:

Budget activity	*FY 2013 level*
Tobacco	$108,077,000
Environmental Health Lab	1,963,000
Nutrition, Physical Activity, and Obesity	48,998,000
School Health	13,522,000
Food Allergies	487,000
Health Promotion	19,984,000
Community Health Promotion	6,106,000
Glaucoma	3,319,000
Visual Screening Education	508,000
Alzheimer's Disease	4,202,000
Inflammatory Bowel Disease	677,000
Interstitial Cystitis	651,000
Excessive Alcohol Use	2,440,000
Chronic Kidney Disease	2,081,000
Prevention Research Centers	17,900,000
Heart Disease and Stroke	54,975,000
Diabetes	74,434,000
Cancer Prevention and Control	359,690,000
Breast and Cervical Cancer	211,490,000
WISEWOMAN	21,304,000
Breast Cancer Awareness for Young Women	5,040,000
Cancer Registries	51,643,000
Colorectal Cancer	44,225,000
Comprehensive Cancer	20,857,000
Johanna's Law	5,134,000
Ovarian Cancer	5,041,000
Prostate Cancer	13,541,000
Skin Cancer	2,208,000
Cancer Survivorship Resource Center	511,000
Oral Health	19,000,000
Safe Motherhood/Infant Health	43,803,000
Arthritis	13,001,000
Epilepsy	7,757,000
National Lupus Patient Registry	2,000,000
REACH	13,940,000

Consolidated Chronic Disease Prevention and Health Promotion.—The proposed consolidation of CDC chronic disease programs is rejected. CDC is expected to demonstrate that funds are spent in the exact amounts allocated and for the purposes specified in this explanatory statement. Although the bill does not provide the 5 percent flexibility included in Senate report 112–176, CDC is directed to explore ways to better achieve overlapping chronic disease goals, leverage resources, and reduce the reporting burden.

Diabetes.—Of the increase provided, $5,000,000 shall be to expand the National Diabetes Prevention Program.

Nutrition, Physical Activity, and Obesity program.—Of the increase provided, $5,000,000 shall be for extension and outreach services at land grant schools for health education in counties that CDC determines have over 40% obesity rate.

Ovarian Cancer.—Within the funds provided for Johanna's Law, $1,500,000 shall be used for a review of the state of the science on ovarian cancer, as described in the Senate report. In addition, CDC and the National Institutes of Health (NIH) are expected to conduct a joint workshop to examine the research gaps that remain in ovarian cancer science.

Oral Health.—Sufficient funding is included for an oral health literacy campaign, a conference on innovative strategies to prevent early childhood caries, and not less than $150,000 for planning and technical assistance to expand public-private media campaigns.

BIRTH DEFECTS AND DEVELOPMENTAL DISABILITIES

The bill includes $132,037,000 for birth defects and developmental disabilities.

The administration's proposal to consolidate disability and health programs is rejected. This bill retains the fiscal year 2012 position that no consolidation will be considered without an assessment of the needs of the populations currently served and an analysis of the impact of a consolidation on those populations. Within the total for Birth Defects and Developmental Disabilities, the bill includes the following amounts:

Budget activity	*FY 2013 Level*
Child Health and Development	$60,161,000
Birth Defects	18,387,000
Fetal Death	806,000
Fetal Alcohol Syndrome	9,862,000
Folic Acid	2,779,000
Infant Health	7,868,000
Autism	21,265,000
Health and Development for People with Disabilities	56,585,000
Disability & Health	17,779,000
Limb Loss	2,820,000
Tourette Syndrome	1,698,000
Early Hearing Detection and Intervention	10,630,000
Muscular Dystrophy	5,828,000
Paralysis Resource Center	6,700,000
Attention Deficit Hyperactivity Disorder	1,715,000
Fragile X	1,681,000
Spina Bifida	5,734,000
Congenital Heart Failure	2,000,000
Public Health Approach to Blood Disorders	7,935,000
Hemophilia Treatment Centers	5,500,000
Thallasemia	1,856,000

PUBLIC HEALTH SCIENTIFIC SERVICES

The bill includes a total of $391,741,000 for Public Health Scientific Services, which includes $129,614,000 in discretionary appropriations and $262,127,000 made available under section 241 of the PHS Act.

Within the total for Public Health Scientific Services, the bill includes the following amounts:

Budget activity	*FY 2013 level*
Health Statistics	$138,683,000
Surveillance, Epidemiology, and Informatics	217,129,000
Public Health Workforce	35,929,000

ENVIRONMENTAL HEALTH

The bill includes $107,316,000 for Environmental Health Programs. Within this total, the bill includes the following amounts:

Budget activity	*FY 2013 level*
Environmental Health Laboratory	$42,383,000
Newborn Screening Quality Assurance Program	6,825,000
Newborn Screening/Severe Combined Immuno-deficiency Diseases	965,000
Environmental Health Activities	33,135,000
Safe Water	7,109,000
Volcanic Emissions	197,000
Amyotrophic Lateral Sclerosis (ALS) Registry	5,869,000
Climate Change	4,800,000
Built Environment and Health Initiative	3,000,000
Asthma	25,298,000
Childhood Lead Poisoning	6,500,000

INJURY PREVENTION AND CONTROL

The bill includes $137,693,000 for Injury Prevention and Control activities. Within this total, the bill includes the following amounts:

Budget activity	*FY 2013 level*
Intentional Injury	$93,282,000
Domestic Violence and Sexual Violence	31,042,000
Child Maltreatment	6,959,000

Budget activity	FY 2013 level
Youth Violence Prevention	14,968,000
Domestic Violence Community Projects	5,411,000
Rape Prevention	39,389,000
Unintentional Injury	30,966,000
Traumatic Brain Injury	6,026,000
Elderly Falls	1,958,000
Injury Control Research Centers	9,974,000
National Violent Death Reporting System	3,471,000

NATIONAL INSTITUTE FOR OCCUPATIONAL SAFETY AND HEALTH

The bill includes a total of $292,588,000 for the National Institute for Occupational Safety and Health, which includes $181,222,000 in discretionary appropriations and $111,366,000 made available under section 241 of the PHS Act.

Within the total for Occupational Safety and Health, the bill includes the following amounts:

Budget activity	FY 2013 level
Education and Research Centers	$24,268,000
Personal Protective Technology	16,791,000
Healthier Workforce Centers	5,016,000
National Occupational Research Agenda	111,366,000
Ag, Forestry, Fishing	23,000,000
Mining Research	52,363,000
Other Occupational Safety and Health Research	82,784,000
Miners Choice	646,000
National Mesothelioma Registry and Tissue Bank	1,020,000

ENERGY EMPLOYEES OCCUPATIONAL ILLNESS COMPENSATION PROGRAM

The bill includes $55,358,000 in mandatory funding for CDC's responsibilities with respect to the Energy Employee Occupational Illness Compensation Program. A longstanding provision, transferring funds to the Advisory Board on Radiation and Worker Health, has been deleted without prejudice. CDC has the authority to transfer funds to the Board under the authorizing statute.

GLOBAL HEALTH

The bill includes $353,794,000 for Global Health Activities. Within this total, the bill includes the following amounts:

Budget activity	FY 2013 level
Global AIDS Program	$117,118,000
Global Immunization Program	160,287,000
Polio Eradication	111,286,000
Other Global/Measles	49,001,000
Global Disease Detection and Emergency Response	41,601,000
International Emergency	5,997,000
Global Disease Detection	35,604,000
Parasitic Diseases/Malaria	19,367,000
Global Public Health Capacity	15,421,000
National Public Health Institutes	7,000,000
Field Epidemiology and Lab Training Program	8,421,000

Global Public Health.—CDC shall provide an operating plan for all international activities funded through this and other CDC accounts to the Committees on Appropriations of the House of Representatives and the Senate.

Global Health Strategy.—CDC, FDA, and NIH are expected to develop, coordinate, and plan jointly global health research activities with specific measurable metrics that are based on sound scientific methods and to track the progress toward these agreed upon global health goals.

Global Health Capacity.—The bill reduces overall funding by $800,000 to reflect the elimination of the Sustainable Management Development Program. Funding for the Field Epidemiology and Lab Training Program shall be maintained at not less than last year's level.

National Public Health Institutes (NPHIs).—The bill includes $7,000,000 to assist other nations in setting up and strengthening NPHIs. This initiative is intended to be an organizational effort, and in no way limit capacity building work in other programs of CDC.

PUBLIC HEALTH PREPAREDNESS AND RESPONSE

The bill includes $1,380,889,000 for public health preparedness and response activities, which includes $1,226,013,000 in discretionary appropriations and $154,876,000 made available from amounts available in the Public Health and Social Services Emergency Fund.

Within the total for Public Health Preparedness and Response, the bill includes the following amounts:

Budget activity	FY 2013 level
Public Health Emergency Preparedness Cooperative Agreements	$642,000,000
Academic Centers for Public Health Preparedness	8,000,000
All Other State and Local Capacity	7,767,000
CDC Preparedness and Response	128,802,000
Upgrading CDC Capacity	100,000,000
BioSense	20,727,000
Lab Reporting	8,075,000
Strategic National Stockpile	594,320,000

Preparedness Administrative Costs.—CDC's proposal to consolidate administrative costs into funding provided for Public Health Emergency Preparedness cooperative agreements is rejected. The bill includes $7,767,000 for these costs, in addition to the funds provided for the cooperative agreements.

Public Health Emergency Preparedness Index.—CDC is expected to work with the States to develop a method to measure the preparedness of each State.

Strategic National Stockpile (SNS).—The bill provides $154,876,000 from the 2009 supplemental appropriations bill to support the SNS in fiscal year 2013. The Secretary is expected to pay particular attention to ensuring the needs of special populations, such as children, are met in the SNS. CDC shall submit a report within 180 days after enactment of this act on steps being taken and resources dedicated to maintain the integrity of the SNS and its effectiveness in an emergency, particularly with regard to the need to rotate old supplies and equipment, and purchase new countermeasures, devices, and equipment to ensure the preparedness level is sustained.

BUILDINGS AND FACILITIES

The bill provides $46,000,000, which includes $6,600,000 of unobligated Individual Learning Accounts balances for Buildings and Facilities activities.

The National Institutes for Occupational Safety and Health facilities that support the underground and surface coal mining safety and health research capacity and the applied technology and occupational hazard evaluation field research capabilities may be becoming obsolete and not fully operational. The bill provides $35,000,000 for CDC to support competitive acquisition, renovation, replacement, or consolidation of these capabilities to save operational costs, improve productivity and support the capacities listed above. CDC is expected to take positive steps to ensure the capabilities are maintained to support mine safety research.

In addition, within the total provided for Buildings and Facilities, $11,000,000 is for CDC-wide repairs and improvements. CDC is expected to ensure future budget requests include resource allocation requests to support appropriate facility stewardship.

CDC-WIDE ACTIVITIES AND PROGRAM SUPPORT

(INCLUDING TRANSFER OF FUNDS)

The bill includes $591,500,000 for CDC-wide activities.

Within this total, the bill includes the following amounts:

Budget activity	FY 2013 level
Preventive Health & Health Services Block Grant	$105,000,000
Business Services Support	380,000,000
Office of the Director	106,500,000

Budget Information.—CDC's value to public health and preparedness is widely recognized and budget processes that link programs and activities to measurable public health and preparedness goals are strongly supported. CDC is directed to explain in the congressional budget request how sound scientific data are linked to measurable public health and preparedness goals and objectives for each program, and how those goals directly relate to the budget request. In addition, CDC is directed to provide the following information in the fiscal year 2015 and future budget requests:

Program evaluations—an identification of the timeframes and criteria used to evaluate each program;

User fee, reimbursement, and other sources of funding—an itemization of the actual and estimated collections for each activity and the actual annual costs related to each associated user fee, reimbursement, and other funding source used to support CDC activities;

Accounting—a more detailed accounting of how funds are spent in each program. The budget justification should not only be an accounting of how funds will be spent in the coming fiscal year, but also how funds have been spent in the previous fiscal years, potentially under different budget structures or organizations;

Types of activities supported—the breakdown of intramural and extramural funding for each program; and

Working Capital Fund (WCF)—The object class breakout of annual WCF resource inputs, assets, expenditures, carry over, WCF-supported FTE, WCF-supported contract FTE, and WCF-supported overhead for the prior actual year, current year and budget year at each Center, Institute, or Office, in addition to the CDC aggregate levels. The budget justification should include the projected and actual reserve with a breakout justification to explain the projected use and identification of any reserve and residual funds for the prior actual year, current year, and budget year. Further, CDC shall brief jointly the Committees on Appropriations no later than July 15, 2013 on the WCF governance structure, rules in place to ensure appropriate activity and accounting, and hypothetical impact of the fund if it were implemented in fiscal year 2013 and funding adjustments for the expected implementation at the beginning of fiscal year 2014.

Repairs and Improvements—the categorization of the needed repairs for CDC facilities in areas such as security, life/safety repairs, condition index, and other repairs.

Data Reporting.—Significant opportunities exist to create administrative and economic efficiencies in the reporting of public health data. For that reason, the Director of CDC is directed to work with State and local health officials, to submit a report to the Committees on Appropriations no later than 180 days after enactment of this act on the opportunities for consolidating the various data collection systems in CDC. The report should

include the opportunities and costs, advantages and barriers, and projected timeline to such a consolidated data reporting system, along with recommendations for adoption. The report should include full consideration of a single Web-based data collection information technology platform.

Individual Learning Accounts.—A longstanding provision extending availability of funds for the Individual Learning Account program has been deleted, as well as a longstanding general provision regarding the management of this program. The training and professional development of CDC staff shall be supported and maintained by the centers and leadership of CDC.

Office of the Director (formerly Public Health Leadership and Support).—The program line has been changed to Office of Director to better reflect the activities these funds support.

Scientific Research Coordination with NIH.—CDC programs are expected to coordinate with the Institutes and Centers of the NIH to identify scientific gaps for ready opportunities to accelerate understanding of diseases and their prevention in NIH and CDC research portfolios. Specifically, updates are requested in the fiscal year 2014 budget request on this effort as it relates to each of the CDC cancer programs.

NATIONAL INSTITUTES OF HEALTH

The bill includes $30,873,259,000 for the accounts that comprise the NIH total appropriation. This amount includes a $40,000,000 increase for Institutional Development Awards (IDeA) within the National Institute of General Medical Sciences and a $15,000,000 increase for the Cures Acceleration Network within the National Center for Advancing Translational Sciences (NCATS). To improve transparency, the bill also includes an increase of $25,300,000 for NCATS to fully fund the Clinical and Translational Science Awards (CTSA) program within that Center; in fiscal year 2012, CTSAs were funded partially through contributions from other Institutes and Centers (ICs).

Other than the adjustments described above, funding for each IC is increased over the fiscal year 2012 level by an equal percentage.

In accordance with longstanding tradition, the bill does not direct funds to any specific disease research area. NIH is expected to base its funding decisions only on scientific opportunities and the peer review process.

NIH is expected to adopt a reasonable NIH-wide policy for non-competing and competing inflation rates that is consistent with the overall funding increase. Further, NIH is expected to support as many scientifically meritorious new and competing research project grants as possible, at a reasonable award level, with the funding provided in this act.

All the NIH ICs are expected to continue to support the Pathways to Independence program, which provides new investigators with mentored grants that convert into independent research project grants. In addition, New Innovator Awards, Director's Pioneer Awards, and the Transformative R01 Program are supported through the Common Fund. NIH should have a reasonable policy for inflationary increases on research training stipends that are not below the federal pay policy. The Office of the Director (OD) shall ensure, as practicable, the programs and offices within OD receive increases proportional to the overall increase, unless otherwise specified.

NIH is expected to limit funding for the Intramural Research Program to the same share of the overall NIH budget as in fiscal year 2012. The percentage of funds used to support basic research across NIH is expected to be maintained.

CTSAs.—NIH shall make no changes to the CTSA program until the Institute of Medicine (IOM) completes its evaluation of the program, due in June 2013. Following the completion of that evaluation, if NIH then determines that adjustments to the CTSA program are needed, the NCATS Director is directed to brief the House and Senate Committees on Appropriations before implementing the changes.

Clinical Trials.—GAO is requested to conduct a review of how NIH has applied the recommendations from the 2010 Institute of Medicine (IOM) recommendations on NCI's clinical trials across all ICs to improve all NIH-wide clinical trial activity. The review should examine the specific recommendations NIH can consider to further improve the efficiency and effectiveness of administering, monitoring, managing, and supporting clinical trials.

Clinical Trials Patient Enrollment.—NIH is directed to host a workshop on the challenges regarding enrolling and retaining patients in clinical trials. The workshop should include public foundations that provide clinical trial navigation services, the NIH Foundation, and other appropriate organizations. Topics should include the development of ways to track, monitor, and improve participation and enrollment in NIH-funded clinical trials, particularly among underrepresented and uninsured populations. The workshop should also discuss potential public-private partnerships that could address these goals.

Common Fund.—NIH is expected to continue the longstanding policy for Common Fund projects to be short-term, high-impact awards, with no projects receiving funding for more than 10 years. NIH is directed to discontinue health economics research within the Common Fund.

Extramural and Intramural Research.—NIH plans to impose an additional level of scrutiny on extramural principal investigators with grants of $1,500,000 or more. NIH is directed to ensure that this policy, and any other new measures which are intended to improve oversight and accountability for extramural researchers, should apply equally to intramural researchers as well.

Peer reviewers for extramural research would benefit from knowing the scope of intramural activities that are related to the subjects under consideration to reduce the possibility of duplication. Therefore, NIH is directed to make such information available to extramural peer review study sections.

Improved Trans-NIH Coordination.—The Director of the Division of Program Coordination, Planning, and Strategic Initiatives is requested to develop a strategic plan to improve coordination and facilitation of trans-NIH research. The plan should include measurable objectives and specific steps that NIH and the ICs will take to reduce duplication and increase the effectiveness and efficiency of research activities occurring in multiple ICs. The plan should be posted on the NIH Web site within 180 days after enactment and updated routinely thereafter regarding progress made toward reaching the objectives.

Kennedy's Disease.—NINDS supports research related to spinal and bulbar muscular atrophy, also known as Kennedy's disease. NINDS is encouraged to continue research into the causes of this disease and animal testing for possible avenues for treatment.

Ruth L. Kirschstein National Research Service Awards.—The number of Ruth L. Kirschstein National Research Service Awards has declined each year since fiscal year 2007. While there is a need to increase stipend levels, NIH should put a higher priority on maintaining the number of awards. NIH is expected to continue efforts to support new investigators.

National Children's Study (NCS).—There have been significant concerns in the scientific community about NIH's plans to change substantially the design of the NCS. Therefore, the bill requires NIH to charter a comprehensive IOM/National Research Council review to evaluate the proposal and make the results public before contracts are awarded for the NCS Main Study. Topics covered by the review should include: the representative sample size, participation of traditionally underrepresented groups, generalizability of the data, participant retention rates, statistical artifacts, required infrastructure, involvement of academia, study costs, and other factors determined relevant by the review experts.

NCATS.—NCATS should make every effort to prevent duplication, redundancy, and competition with the private sector. To that end, NCATS is directed to work with industry representatives to initiate a process that will inform the private sector on a regular basis about the Center's current and planned programs and activities. A plan and timeline to implement this process is requested within 90 days of enactment.

Opioid Drug Abuse.—The June 2011 IOM report on pain indicates that abuse and misuse of prescription opioid drugs resulted in an annual estimated cost to the Nation of $72,500,000,000. Therefore the National Institute on Drug Abuse is urged to support scientific activities that provide companies with the basic science to develop and implement innovative strategies to reduce opioid drug abuse. Such strategies may include new chemical molecule structures, coatings, agents, or other processes with a goal of preventing abuse while still providing the necessary pain relief required for patient care.

Improved Coordination and Dissemination of Research.—The OD is expected to work with the ICs and other HHS operating divisions to establish a systematic means of disseminating research results for the purposes of preventing duplication of effort across the Department and enabling NIH to target its research more effectively.

IDeA.—NIH is expected to maintain the fiscal year 2012 levels for the Centers of Biomedical Research Excellence (COBRE), IDeA Networks of Biomedical Research Excellence, and the IDeA Clinical Trial and Translation Program programs. NIH is directed to divide the increase over the fiscal year 2012 level for IDeA equally between a new COBRE competition and additional awards for the IDeA Clinical Trial and Translation Program. Last year NIH was urged to give the IDeA Director the flexibility to include all States that qualify for the Experimental Program to Stimulate Competitive Research (EPSCoR) program in the IDeA program. An update on this proposal was requested in the fiscal year 2013 congressional budget justification. NIH failed to respond to either request. Therefore, NIH is directed to review whether changes to the eligibility criteria are warranted, including the possible inclusion of all EPSCoR-eligible States, and to present its recommendations in a report to the House and Senate Committees on Appropriations and the relevant authorizing committees no later than 120 days after enactment. In addition, the NIH and IC Directors are requested to work with the IDeA Director to implement a plan to improve coordination and co-funding of IDeA awards and programs to increase opportunities to improve biomedical research capacity and training.

Scientific Management and Review Board (SMRB).—The NIH Director has rejected the recommendation by the Scientific Management and Review Board to create a new Institute on substance use, abuse, and addiction-related research, and has decided that

the National Institute on Drug Abuse and the National Institute on Alcohol Abuse and Alcoholism should pursue ''functional integration'' to advance this research rather than consolidation. NIH is expected to provide specific details on how the two Institutes plan to achieve such integration in the fiscal year 2014 congressional budget justification.

SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION

The Substance Abuse and Mental Health Services Administration (SAMHSA) is expected to provide more detailed information in its annual congressional justification, including budgetary and programmatic information on programs as they existed in prior fiscal years, even if the budget request proposes a new structure or consolidation. SAMHSA shall not make changes to any program, project, or activity as outlined by the budget tables included in this explanatory statement without prior notification to the House and Senate Committees on Appropriations.

SAMHSA and the Department are directed to exempt the Mental Health Block Grant (MHBG) and the Substance Abuse Prevention and Treatment (SAPT) Block Grant from being used as a source for the PHS evaluation set-aside in fiscal year 2013, as was done prior to fiscal year 2012.

MENTAL HEALTH

Within the total provided for Mental Health Programs of Regional and National Significance, the bill includes the following amounts:

Budget activity	*FY 2013 level*
Capacity	
Seclusion & Restraint	2,444,000
Youth Violence Prevention	12,817,000
National Traumatic Stress Network	48,713,000
Children and Family Programs	6,474,000
Consumer and Family Network Grants	6,224,000
MH System Transformation and Health Reform	10,603,000
Project LAUNCH	34,640,000
Primary and Behavioral Health Care Integration	30,749,000
Suicide Lifeline	5,512,000
GLS—Youth Suicide Prevention—States	29,682,000
GLS—Youth Suicide Prevention—Campus	4,966,000
AI/AN Suicide Prevention Initiative	2,938,000
Homelessness Prevention Programs	30,772,000
Minority AIDS	9,265,000
Criminal and Juvenile Justice Programs	4,281,000
Grants for Adult Trauma Screening and BI	2,896,000
Tribal Behavioral Health Grants	20,000,000
Science and Service	
GLS—Suicide Prevention Resource Center	5,550,000
Practice Improvement & Training	7,437,000
Consumer & Consumer Support T.A. Centers	1,923,000
Primary/Behavioral Health Integration T.A	1,996,000
Minority Fellowship Program	5,089,000
Disaster Response	2,950,000
Homelessness	2,302,000
HIV/AIDS Education	773,000

In order to address the high incidence of substance abuse and suicide in American Indian/Alaska Native (AI/AN) populations, the bill provides $20,000,000 for a new Tribal Behavioral Health Grant program within the Center for Mental Health Services. Not less than $10,000,000 shall be used for competitively awarded grants targeting tribal entities with the highest rates of suicide per capita over the past 10 years. Funds shall be used for effective and promising strategies that address the problems of substance abuse and suicide and promote mental health among AI/AN young people.

Within the funds provided for the National Child Traumatic Stress Network, the bill provides $1,500,000 for the targeted collection of new outcome data from selected centers, as well as analyses and reports related to the National Center for Child Traumatic Stress core data set.

All grants awarded for the Primary and Behavioral Health Integration program shall be funded under the authorities in section 520(K) of the PHS Act.

Funds provided to Project LAUNCH should not duplicate activities eligible for funding elsewhere in HHS and should focus on mental health promotion and promotion strategies for children aged 0 to 8.

SUBSTANCE ABUSE TREATMENT

Within the total provided for Substance Abuse Treatment Programs of Regional and National Significance, the bill includes the following amounts:

Budget Activity	*FY 2013 Level*
Capacity	
Opioid Treatment Programs/Regulatory Activities	8,886,000
Screening, Brief Intervention, Referral, and Treatment	28,187,000
TCE—General	13,256,000
Pregnant & Postpartum Women	15,970,000
Strengthening Treatment Access and Retention	1,000,000
Recovery Community Services Program	2,445,000
Access to Recovery	87,666,000
Children and Families	29,678,000
Treatment Systems for Homeless	41,571,000
Minority AIDS	65,863,000
Criminal Justice Activities	70,000,000
Science and Service	
Addiction Technology Transfer Centers	9,064,000
Minority Fellowship Program	546,000
Special Initiatives/Outreach	1,436,000

SAMHSA shall ensure that Addiction Technology Transfer Centers continue to maintain a primary focus on addiction treatment and recovery services in order to strengthen the addiction workforce.

All funding appropriated to the Center for Substance Abuse Treatment for drug treatment courts shall be allocated to serve people diagnosed with a substance use disorder as their primary condition.

SAMHSA shall ensure that funds provided for Screening, Brief Intervention, Referral, and Treatment are used for existing evidence-based models of providing early intervention and treatment services to those at risk of developing substance abuse disorders.

SUBSTANCE ABUSE PREVENTION

Within the total provided for Substance Abuse Prevention Programs of Regional and National Significance, the bill includes the following amounts:

Budget activity	*FY 2013 level*
Capacity	
Strategic Prevention Framework/Partnerships for Success	109,754,000
Mandatory Drug Testing	4,906,000
Minority AIDS	41,307,000
Sober Truth on Preventing Underage Drinking (STOP Act)	7,931,000
National Adult-Oriented Media Public Service Campaign	1,000,000
Community-based Coalition Enhancement Grants	5,931,000
Intergovernmental Coordinating Committee on the Prevention of Underage Drinking	1,000,000
Science and Service	
Fetal Alcohol Spectrum Disorder	9,802,000
Center for the Application of Prevention Technologies	7,511,000
Science and Service Program Coordination	4,082,000
Minority Fellowship Program	71,000

SAMHSA shall make continuation awards for Strategic Prevention Framework State Incentive Grant/Partnerships for Success (SPFSIG/PFS) grantees at amounts not less than what grantees received in fiscal year 2012. Furthermore, SAMHSA shall use any additional funding to provide new grants under SPFSIG/PFS. These new grants shall be awarded as the program was originally designed prior to fiscal year 2011, with similar eligible applicants, a multiyear project period, and reliance on epidemiological workgroups. SAMHSA shall award these multiyear grants on an annual, incremental basis rather than fully funding them in fiscal year 2013.

HEALTH SURVEILLANCE AND PROGRAM SUPPORT

Within the total provided for health surveillance and program support, the bill includes the following amounts:

Budget activity	*FY 2013 level*
Health Surveillance	29,424
Program Management	72,229
Military Families	3,500
Public Awareness and Support	13,545
Performance and Quality Info. Systems	12,940

SAMHSA shall prioritize the award of the Military Families Initiative policy academy service grants to States with higher populations of military families not eligible for or with reduced access to the services provided through the Departments of Veterans Affairs and Defense.

AGENCY FOR HEALTHCARE RESEARCH AND QUALITY

HEALTHCARE RESEARCH AND QUALITY

The bill provides $349,053,000 for the Agency for Healthcare Research and Quality. These funds are made available through section 241 of the Public Health Service (PHS) Act.

Within the total for the Patient Safety Research portfolio, the bill provides $4,000,000 for research grants authorized by section 933 of the PHS Act, as proposed in Senate Report 112–176.

Within the total for the Crosscutting Activities Related to Quality, Effectiveness and Efficiency Research portfolio, the bill provides $38,555,000 for investigator-initiated research.

CENTERS FOR MEDICARE AND MEDICAID SERVICES

PROGRAM MANAGEMENT

The bill includes $3,826,187,000 for the Program Management account. The bill moves the State Health Insurance Assistance Program from CMS Program Management to the

Administration for Community Living. The conferees recommend the following levels within the Program Management account:

Program management	*FY 2013 level*
Research, Demonstration and Evaluation	$21,160,000
Program Operations	2,608,785,000
State Survey and Certification	381,278,000
State High Risk Insurance Pools	44,000,000
Federal Administration	770,964,000

The bill includes funding for Research, Demonstration, and Evaluation activities, including the Medicare Current Beneficiary Survey. CMS is requested to include in its fiscal year 2015 congressional budget justification all programs, projects, and activities authorized in the Affordable Care Act (ACA) intended to be supported, along with amounts expended in the current year and 3 prior fiscal years.

CMS Policy Guidance.—CMS uses Medicare Administrative Contractors (MACs) as its agents in lieu of federal employees to process reimbursement activity. The MACs may develop and implement independent policies, which can be perceived as being inconsistent with CMS guidance. CMS is requested to provide a detailed description in the fiscal year 2015 budget request of the mechanisms CMS has in place or plans to put in place to ensure its contracting agents consistently adhere to CMS policies.

Critical Access Hospitals.—The Secretary is urged to create a review process for those hospitals less than 35 miles by primary road from the nearest hospital for the purpose of improving access to essential health services, including acute medical inpatient care. If changes are required, HHS should work with Congress for approval. CMS is encouraged to work with the Office of Rural Health Policy in HRSA to ensure that rural patients maintain access to necessary health services.

Fungal Meningitis.—The 2012 outbreak of fungal meningitis remains a concern, with more than 500 illnesses and a median patient age in the late 60s. While the primary responsibility for ensuring the safety of drugs lies with other agencies of Federal and State government, CMS should consider whether there are actions it can take to ensure that the providers are operating in a manner that is consistent with State and Federal standards, and report to the Committees on Appropriations within 180 days of enactment of this act regarding its conclusions.

Fraud, Waste, and Abuse.—CMS is urged to implement a process across all operations to increase its focus on preventing improper payments and paying claims right the first time. A 2010 GAO report found that CMS had no formal process in place to ensure that vulnerabilities identified by the Recovery Audit Contractor (RAC) program are addressed. CMS is directed to include in its annual report to Congress the steps it has taken to implement a systematic process across all operations to prevent fraud, waste, and abuse in both federal and contractor-operated program and administrative activities and an accounting of RAC-reported vulnerabilities. Similar language was proposed in the Senate Report 112–176.

Rural Patient Access.—The Committees on Appropriations strongly support efforts to preserve and improve rural patient access to providers and durable medical equipment (DME). CMS is requested to provide an update in the fiscal year 2015 budget request on the steps CMS is taking to ensure changes due to the competitive bidding process will not negatively impact rural patient access to quality DME.

HEALTH CARE FRAUD AND ABUSE CONTROL ACCOUNT

The bill includes $309,790,000 from the Medicare Trust Fund for the Health Care Fraud and Abuse Control account.

Medicare Fraud Prevention.—CMS is expected to develop a more robust set of tools to prevent fraud, for example using the latest technology to ensure only valid beneficiaries and valid providers receive benefits and ensure that payments are for authorized benefits. GAO is directed to review the feasibility, cost, benefits, and barriers for CMS to implement a Medicare transactional system with ''smart card'' type technology. The review must examine technology related to beneficiary and provider validation and authentication at point of entry for provider care within the Medicare program and consider ease of implementation, impact on the beneficiary and provider, ease of use, cost attributes (long and short term), and other criteria relevant decision making, sourcing and implementation. GAO is expected to publish a report within 1 year after enactment of this act.

ADMINISTRATION FOR CHILDREN AND FAMILIES

REFUGEE AND ENTRANT ASSISTANCE

The Department of HHS shall provide a briefing within 45 days of enactment for the House and Senate Committees on Appropriations regarding the rate of expenditure for all Refugee and Entrant Assistance programs, including information on the number of unaccompanied alien children placed into the Department's care, the number of arriving refugees and refugees otherwise receiving services, and how the characteristics of these populations have changed over recent years.

CHILD CARE AND DEVELOPMENT BLOCK GRANT

The bill includes a $110,000,000 increase for the Child Care and Development Block Grant (CCDBG), including a $14,035,000 increase in existing set-asides for quality improvement activities. HHS is encouraged to continue efforts to improve the quality of child care programs, including the early childhood care and education workforce.

Under current law State child care agencies may use CCDBG funding to pay for a wide variety of initiatives, including helping providers with the cost of supplies, such as diapers for infants and toddlers.

CHILDREN AND FAMILIES SERVICES PROGRAMS

Within the funds provided for Head Start, the bill includes $25,000,000 to support the transition costs associated with the Designation Renewal System and $25,000,000 for grantee cost-of-living adjustments.

The bill includes $3,000,000 within Child Abuse Discretionary for competitive grants to support the implementation of research-based court teams models that include the court system, child welfare agency, and community organizations in order to better meet the needs of infants and toddlers in foster care.

The bill includes up to $10,000,000 for the Healthy Foods Financing Initiative within the Community Economic Development Program.

The Department of HHS is encouraged to support efforts that help TANF recipients graduate high school or complete a GED, which is often critical to securing employment.

ADMINISTRATION FOR COMMUNITY LIVING

AGING AND DISABILITY SERVICES PROGRAMS

(INCLUDING TRANSFER OF FUNDS)

The bill transfers the State Health Insurance Assistance Program from the Centers of Medicare and Medicaid Services to the Administration for Community Living (ACL).

Within the funding provided, the bill provides $998,000 to continue the 24-hour call center to support Alzheimer's family caregivers.

The House and Senate Committees on Appropriations received no advance notice that the Department intended to establish the ACL when the fiscal year 2013 budget was submitted to Congress. Carrying out such organizational changes without advance notice ignores the critical oversight role of the Committees on Appropriations. This is not a precedent that should occur again and the Department is urged to provide advance notice of such mergers, particularly when they have an impact on appropriations structures and funding levels. ACL shall provide the House and Senate Committees on Appropriations a briefing within 30 days of enactment on how ACL is balancing the needs of the disabled and elderly communities.

OFFICE OF THE SECRETARY

GENERAL DEPARTMENTAL MANAGEMENT

The Department is directed to include in its annual budget justifications the amount of administrative and overhead costs spent by the Department for every major budget line. Beginning in fiscal year 2015, and each year thereafter, the Department shall include the amount and percentage of administrative and overhead costs spent by the Department for every program, project and activity.

The Department is directed to issue a report identifying which programs throughout HHS address teen dating violence and healthy relationship strategies as a means to prevent teen pregnancy.

The Comptroller General is directed to issue a report within 180 days of enactment on the Department's coordination of activities related to patient centered outcomes research (PCOR), whether funded in this bill or through the Patient Centered Outcomes Research Trust Fund. The report should review the processes and practices used by the Department to ensure that the various operating divisions supporting patient centered outcomes research prevents duplication and is coordinated. Further, the report should review the criteria and procedures used by the Department prior to disseminating or making recommendations based on patient centered outcomes research results. The report should also include a review of the evaluation criteria used to allocate funding and determine research topics, as well as the metrics to measure effectiveness.

The bill provides $250,000 for the Advisory Council on Alzheimer's Research, Care and Services, $1,000,000 for a competitive grant or contract for the principal purpose of providing assistance regarding transportation assistance for individuals with disabilities, $1,000,000 to continue the national health education program on lupus for healthcare providers, and $3,010,000 to continue the preventing violence against women initiative.

HHS is directed to include in future budget requests information on user fees, reimbursements, and other sources of funding available to HHS operating divisions that itemizes the actual and estimated collections for each activity and the actual annual costs related to each associated user fee, reimbursement, and other funding source used to support these activities.

The Department is directed to ensure that all necessary and feasible steps have been taken to ensure that Antideficiency Act violations similar to those reported on July 14, 2011 do not occur in the future. The Department is directed to ensure that future Antideficiency Act violations are submitted in a timely manner with the appropriate account adjustment or other action to remedy the violations.

HHS is urged to work with Congress to propose a special hiring authority in lieu of the

continued expanded use of title 42. The Department is requested to issue a report on the key parameters that would need to be included in a special hiring authority within 180 days of enactment to the House and Senate Committees on Appropriations and the relevant authorizing committees.

The Secretary is encouraged to issue the rules and regulations required by P.L. 111–353 in a timely manner.

The Department is urged to continue existing programs run by the Office of Minority Health that address health disparities in rural and disadvantaged populations.

OFFICE OF INSPECTOR GENERAL

The Office of Inspector General (OIG) is directed to provide a report to the Committees on Appropriations of the House of Representatives and the Senate that provides an update on OIG activities related to the investigation of grantees' use of taxpayer resources to influence laws, regulations or policies at the State or local level. Additionally, the report should include detail as to how HHS is implementing any new policies and how the Department is tracking or monitoring grantee performance.

PUBLIC HEALTH AND SOCIAL SERVICES EMERGENCY FUND

(INCLUDING TRANSFER OF FUNDS)

The Department is directed to issue a report, not later than 90 days after the date of enactment of this act, on the implementation of a 5–year budgetary planning process for the development of medical countermeasures. The report should include end-to-end details of planned investments, including the costs associated with existing and anticipated new research and development, the costs of procuring and maintaining all materials placed in the Strategic National Stockpile, and the costs associated with distribution, dispensing and surveillance. The report should include the costs necessary to ensure sustainability of the multiple Centers for Innovation and Advanced Manufacturing. The report should also include details of the investment and progress made to date in the development of products for diagnosis, protection and treatment for the full range of radiation exposures from nuclear and radiation threats.

GENERAL PROVISIONS

EVALUATION TAP LEVEL

The bill modifies a provision establishing reprogramming requirements for evaluation tap funding.

PUBLICLY AVAILABLE ACCESS REGARDING THE USE OF FUNDS PROVIDED BY THE PATIENT PROTECTION AND AFFORDABLE CARE ACT

The bill includes a modified provision relating to the improvement of a more accessible Web site that details the use of funds made available under section 4002 of the Patient Protection and Affordable Care Act.

PERSONNEL SUPPORT FOR THE PATIENT PROTECTION AND AFFORDABLE CARE ACT

The bill includes a new provision relating to the public disclosure of the number of full-time equivalent Federal employees or contractors assigned to activities to carry out the provisions of the Patient Protection and Affordable Care Act.

TITLE III

DEPARTMENT OF EDUCATION

EDUCATION FOR THE DISADVANTAGED

The bill includes a new provision clarifying that title I funds may be used to address the transportation needs of homeless children and youth, as well as support homeless liaisons.

The bill includes new language under the School Improvement Grant (SIG) program that allows funds to be used to implement a research-proven, whole-school reform model.

New language is also included that will allow a State educational agency, with the approval of the Secretary, to establish an alternative State-determined school improvement strategy that may be used by local educational agencies under the SIG program. The purpose of this alternative strategy is to allow State educational agencies to develop their own flexible models that can be implemented by local educational agencies that receive SIG funds.

It is expected that any approach taken with SIG funds should address school-wide factors, whole school culture, the individual needs of the students and data to inform instruction and for continuous improvement; ensure that the needs of students are addressed through the organization of the school, curriculum and instruction, and social and emotional support services; as well as address teacher and leader effectiveness, including through training and support for teachers and school leaders in school improvement efforts and in the needs of students.

The bill also includes new language to allow local educational agencies that are eligible to receive services under the Rural Education Achievement Program to modify not more than one element required under a school improvement model.

Over the past decade Bureau of Indian Education schools have received approximately 0.7 percent of each year's appropriation for ESEA Title I Grants to LEAs. The Department is urged to continue using its existing formula in allocating these funds and to follow this practice in any relevant future emergency funding that provides it the same authority and discretion.

IMPACT AID

The bill includes language providing for formula grants for Impact Aid construction grants.

SCHOOL IMPROVEMENT PROGRAMS

The bill allows for up to 3 percent of funds available for the State Grants for Improving Teacher Quality program to be used for competitive awards to national not-for-profit organizations for recruiting, training, or providing professional enhancement activities, including in the area of civic education, for teachers or school leaders, particularly for high-need schools most likely to face shortages in these areas. The bill allows up to 10 percent of the set-aside funds to be used for related research, development, evaluation, dissemination, and technical assistance.

The bill provides $380,000,000 for formula grants to States and $9,214,000 for competitive grants to improve the quality and reliability of assessment systems within the State Assessments and Enhanced Assessments Instruments program.

INNOVATION AND IMPROVEMENT

The bill includes $549,284,000 for the Race to the Top program. These funds are available for obligation through December 31, 2013.

The Departments of Education and HHS are directed to use this appropriation for another competition under the Race to the Top—Early Learning Challenge (RTT-ELC). In combination with additional resources allocated for the CCDBG and Head Start programs, it is expected that these investments will help improve early learning and development systems and opportunities for young children.

The bill includes $149,417,000 for the Investing in Innovation program, as described in Senate Report 112–176. The bill does not include the new authority and funding proposed in the Senate bill regarding ARPA-ED.

An opportunity to review the results from the significant investment made in both the RTT and Investing in Innovation programs is expected. The Secretary is directed to continue to provide the Committees on Appropriations of the House of Representatives and Senate the findings from evaluations, including impact evaluations and interim progress evaluations, of activities conducted using these funds.

The bill includes $14,097,000 for continuation costs for the School Leadership program.

Within FIE, the bill includes funding for the following activities in the following amounts:

Budget activity	*FY 2013 level*
Arts in Education	$26,500,000
Data Quality and Evaluation	1,276,000
Full Service Community Schools	11,094,000
National Clearinghouse for Educational Facilities	1,000,000
Peer Review	350,000
Child Literacy Initiative	29,000,000

The bill also includes $10,000,000 for a new STEM initiative, as described in Senate Report 112–176.

SPECIAL EDUCATION

The bill includes new language clarifying provisions of the Individuals with Disabilities Education Act (IDEA). The first provision clarifies that penalties paid by States for violating maintenance of effort under part B of the IDEA shall be reallocated to States by formula to those States that did not violate those requirements. The language further clarifies that both the reduced State allocations due to penalties paid and increased amounts under the reallocation shall not be considered in fiscal year 2013 or future years for allocations under the statutory formula. The bill also includes new language clarifying that the level of effort under part B that a LEA must meet in the year after it fails to maintain its fiscal effort is the level that it should have met in the prior year. This language clarifies congressional intent and is consistent with the Office of Special Education Program's (OSEP's) April 4, 2012, informal guidance letter on the issue.

Additionally, the bill includes language clarifying that funds reserved under section 611(c) of the IDEA may be used to help improve State capacity to meet data collection requirements under the IDEA and improve data collection, quality, and use under the act.

The bill includes new language allowing the Department to use up to $2,710,000 for incentive grants to States that choose to serve children 3 years old until entrance into elementary school, as described in Senate report 112–176.

Within this account, the bill includes $1,996,000 to remain available through September 30, 2014, for the Promoting Readiness of Minors in SSI (PROMISE) program. The bill includes language that slightly modifies the program as it was initially created in last year's bill. The bill also includes new language that allows a portion of the funds provided to be used for Pay for Success awards, as described in Senate Report 112–176. The Committees on Appropriations of the House of Representatives and Senate expect to be notified prior to the issuance of any notice related to the Pay for Success activity.

REHABILITATION SERVICES AND DISABILITY RESEARCH

The bill includes $3,624,226,000 for Rehabilitation Services and Disability Research.

The bill includes $6,075,000 for Demonstration and Training Programs. Within this amount, the bill includes $750,000 to support a new competition for parent training and

information centers. The Rehabilitation Services Administration (RSA) shall coordinate with OSEP in carrying out this activity. The bill does not include funding for new technical assistance activities at RSA.

The bill continues language allowing unmatched funds in excess of any funds requested during the reallotment process to be available for the PROMISE program referenced under the Special Education account. Such funds used for the PROMISE program will remain available for obligation through September 30, 2014.

The bill allows up to $20,000,000 made available to PROMISE after reallotment to be used for Pay for Success, as described in Senate Report 112–176. The Federal Government will use funds to pay for defined outcomes, such as employment or graduation. Philanthropic groups and social impact investors will finance the services and would earn payments if those services lead to the agreed-upon outcomes. Any funds deobligated from Pay for Success projects will be immediately available for programs authorized under the Rehabilitation Act of 1973.

The bill includes $37,771,000 for the Assistive Technology program. This includes $30,492,000 for State grant activities authorized under section 4 of the Rehabilitation Act of 1973; $4,283,000 for protection and advocacy systems authorized under section 5; $996,000 for technical assistance activities authorized under section 6; and $2,000,000 to support alternative financing programs (AFPs) that provide financing mechanisms for loans.

AFPs have had success in providing low-interest loan funds, interest buy-down programs, revolving loan funds, and loan guarantees, and in emphasizing consumer choice and control and other partnerships that help people with disabilities acquire assistive technology devices through loans. Such devices and services enable people with disabilities to live independently and often are the means that enable them to become or remain employed. While many State programs have developed equipment demonstration projects, lending libraries and reuse programs, these do not cover certain types of higher-cost expenses that promote independence, such as adapting vehicles and modifying home entrances and showers to enable people to remain in their homes.

SPECIAL INSTITUTIONS FOR PERSONS WITH DISABILITIES

NATIONAL TECHNICAL INSTITUTE FOR THE DEAF

The bill includes $65,422,000 for the National Technical Institute for the Deaf. Funding for construction will be considered in the future as needs may warrant.

STUDENT FINANCIAL ASSISTANCE

The Department shall provide the same funding in fiscal year 2013 as in fiscal year 2012 for the Work Colleges program authorized under section 448 of the Higher Education Act (HEA) from the Federal Work-Study Program appropriation.

HIGHER EDUCATION

The bill includes $67,432,000 for International Education and Foreign Language Studies—Domestic programs. The increase in funds over the fiscal year 2012 level will support new awards in the Undergraduate International Studies and Foreign Language programs and expand access to study abroad, as authorized by section 604(b) of the HEA.

The bill includes language allowing funds awarded under the Graduate Assistance in Areas of National Need program to be used to fund continuation costs for the Javits Fellowship program.

The bill includes $29,494,000 for the Fund for the Improvement of Postsecondary Education (FIPSE). Within the amount for FIPSE, the bill includes $25,000,000 for the First in the World initiative, with up to $9,000,000 set aside for minority-serving institutions; $1,128,000 for the Training for Realtime Writers program; $2,366,000 for continuations for international consortia projects; and $1,000,000 for the Secretary to enter into an agreement with the National Research Council of the National Academy of Sciences to conduct a study on the impact of Federal regulations and reporting requirements on institutions of higher education as authorized under section 1106 of the Higher Education Opportunity Act of 2008.

The bill includes $854,932,000 for TRIO. The last Upward Bound grant competition may have disadvantaged applicants in rural areas. Many of the rural programs that were not renewed in the last round are located in areas of extreme poverty that would appear to be prime targets for Upward Bound grants. The Department shall provide an analysis within 60 days of enactment of this act of how selection criteria and outcomes changed in the past Upward Bound grant cycle, in order to determine whether applicants from rural areas were put at a disadvantage compared to other applicants.

HISTORICALLY BLACK COLLEGE AND UNIVERSITY CAPITAL FINANCING PROGRAM ACCOUNT

The bill includes language allowing funds for the HBCU Capital Financing Program to remain available through September 30, 2014.

INSTITUTE OF EDUCATION SCIENCES

The bill includes $38,077,000 for Statewide Data Systems. The bill allows up to $10,000,000 to be used for awards to public or private agencies or organizations to support activities to improve data coordination, quality, and use at the local, State, and national levels. Prior to obligating any funds for this purpose, an operating plan describing the proposed purpose and use of such funds shall be submitted to the Committees on Appropriations of the House of Representatives and Senate.

IES is directed to continue support for research and development activities related to gifted and talented education that directly support learning and improve the academic achievement of gifted and talented students, including those who may not be formally identified as gifted and those who are from underrepresented populations, as called for in Senate Report 112–176.

IES also is directed to support a National Research Center on the Gifted and Talented and to ensure that gifted and talented education is reported in national reports produced by IES, as called for in Senate Report 112–176.

GENERAL PROVISIONS

OFFICE OF CAREER, TECHNICAL, AND ADULT EDUCATION

The bill includes a general provision renaming the Office of Vocational and Adult Education as the Office of Career, Technical, and Adult Education.

EVALUATION AUTHORITY

The bill includes a new provision related to the evaluation authority established under section 9601 of the ESEA. Not later than 45 days prior to the submission of the operating plan required under this provision, the Department is directed to brief the Senate Committees on Appropriations and Health, Education, Labor and Pensions and House Committees on Appropriations and Education and Workforce on the programs being considered for inclusion in the plan. Further, the conferees expect the Department to include in future congressional budget justifications a discussion of its planned use of this new authority.

NOT-FOR-PROFIT LOAN SERVICERS AND STUDENT AID ELIGIBILITY

The bill includes a new provision that clarifies eligibility for funding for not-for-profit loan servicers and allows students enrolled in ''career pathways'' programs who do not have a high school diploma or GED to become eligible for student aid if they have passed an ability to benefit test, completed a process designed by the State, or successfully completed six credit hours.

HBCU GULF HURRICANE DISASTER LOANS

The bill continues a provision that authorizes the Secretary to modify terms of Gulf hurricane disaster loans to HBCUs if such modifications result in no net cost to the government and if such modifications are approved by the Departments of Education and Treasury and the Office of Management and Budget.

TITLE IV

RELATED AGENCIES

CORPORATION FOR NATIONAL AND COMMUNITY SERVICE

OPERATING EXPENSES

The funding included in the bill for the State Commission grants reflects a consolidation with Training and Technical Assistance.

Within the total provided for Innovation, Assistance, and Other Activities, the bill includes $44,815,000 for the Social Innovation Fund, $3,992,000 for the Volunteer Generation Fund, and $992,000 for the Martin Luther King Day of Service.

The bill includes $207,491,000 for the National Senior Volunteer Corps programs. Sufficient funding is provided to maintain all programs at the fiscal year 2012 level.

INSTITUTE OF MUSEUM AND LIBRARY SERVICES

OFFICE OF MUSEUM AND LIBRARY SERVICES: GRANTS AND ADMINISTRATION

Within the total for IMLS, the bill includes funds for the following activities in the following amounts:

Budget activity	*FY 2013 level*
Library Services Technology Act:	
Grants to States	156,365
Native American Library Services	3,869
National Leadership: Libraries	12,000
Laura Bush 21st Century Librarian	12,470
Museum Services Act:	
Museums for America	20,643
Native American/Hawaiian Museum Services	926
National Leadership: Museums	7,880
African American History and Culture Act:	
Museum Grants for African American History & Culture	1,410
Program Administration	16,391

Within the amount provided for Program Administration, the bill includes $1,886,000 for research and data collection activities.

IMLS is encouraged to maintain current staffing levels and continue to work toward improving efficiency to decrease or eliminate requirements for FTE growth in future years.

SOCIAL SECURITY ADMINISTRATION

SUPPLEMENTAL SECURITY INCOME

Research and Demonstration.—Within the Research and Demonstration activity conducted under sections 1110, 1115, and 1144 of the Social Security Act, the bill includes $7,200,000 for the Promoting Readiness of Minors in SSI (PROMISE) program and up to $3,000,000 for a demonstration program to test the impact of providing financial literacy information on the Old Age and Survivors Insurance, Disability Insurance and SSI programs to high-school aged youth.

SSA shall provide a briefing within 45 days of enactment for the House and Senate Committees on Appropriations on the factors SSA considers in the review and graduation process for research and demonstration projects. SSA shall continue to describe the specific section 1110 research graduation process in the fiscal year 2014 budget request and include the year each project or consortium was initiated.

LIMITATION ON ADMINISTRATIVE EXPENSES

Work Incentives Planning and Assistance [WIPA] and Protection and Advocacy for Beneficiaries of Social Security [PABSS].—The bill includes not less than $23,000,000 for the WIPA program and not less than $7,000,000 for the PABSS program. Because these programs were not funded in fiscal year 2012, SSA shall make these funds available as soon as possible to eligible organizations to minimize any disruption in services.

Representative Payee Oversight.—SSA is strongly encouraged to continue efforts to improve representative payee oversight through partnerships with outside organizations.

Social Security Annual Statements.—The bill includes not less than $20,000,000 for the mailing of annual Social Security Account Statements. SSA shall provide statements in a manner that maximizes their effectiveness, including leveraging online resources, to inform individuals about their contributions and benefits under Social Security programs and to provide individuals an opportunity to review their earnings record. Further, SSA shall brief the House and Senate Committees on Appropriations within 45 days of enactment on their plan for mailing statements in fiscal year 2013.

Information Technology Investments.—SSA shall provide a quarterly accounting of the Limitation on Administrative Expenses (LAE) expired unobligated balances and the amount made available from these balances without fiscal year limitation for information technology investments. This should include the total amount of Information Technology (IT) expenses and the actual or estimated amount paid for with LAE funds and no-year IT funds.

Long-range Strategic Plan.—The production of a strategic plan for SSA requires the input of an external body that is competent in addressing complex management challenges within the public sphere. Therefore, SSA shall provide the final draft of the strategic plan currently under development to the National Academy of Public Administration (NAPA) for its review and comment. SSA is also directed to incorporate NAPA's views into the final document. Such incorporation may be accomplished by including comments noting instances where SSA does not concur with NAPA's views. The bill includes $500,000 within SSA's LAE account to cover any expenses NAPA incurs to complete this review. The final version of the strategic plan shall be submitted within 180 days of enactment to the House and Senate Committees on Appropriations, the House Committee on Ways and Means, and the Senate Committee on Finance. SSA and NAPA shall jointly report to the House and Senate Committees on Appropriations within 30 days of enactment on the plan for producing the document.

TITLE V

GENERAL PROVISIONS

PORNOGRAPHY RESTRICTIONS

The bill includes a new general provision that prohibits the use of government-provided information technology resources to view, download, or exchange pornography.

REPORTING ON BALANCES OF APPROPRIATIONS

The bill includes a new general provision modifying the application of requirements for reporting on balances of appropriations to the Indian Health Service.

HEAL PROGRAM TRANSFER

The bill includes a new general provision that permanently transfers the Health Education Assistance Loan program from the Department of Health and Human Services to the Department of Education.

INTERNATIONAL CONFERENCES

The bill includes a new general provision that limits the attendance of Federal employees at international conferences.

EXPLANATORY STATEMENT

The bill includes a new general provision related to the explanatory statement accompanying the bill.

FULL-YEAR CONTINUING APPROPRIATIONS

The bill includes a new general provision that makes ineffective certain provisions from the Full-Year Continuing Appropriations Act related to this bill.

FY 2013 LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES APPROPRIATIONS

[$ in 000s]

		FY 2012 Comparable	Harkin Aendment	Harkin Amendment versus FY12*
Department of Labor				
Employment and Training Administration				
Training and Employment Services				
Grants to States:				
Adult Training, current year	D	58,811	57,465	−1,346
Advance from prior year	NA	(710,654)	(712,000)	(1,346)
FY14	D	712,000	712,000	0
Adult Training	.....	770,811	769,465	−1,346
Youth Training	D	824,353	824,353	0
Dislocated Worker Assistance, current year	D	148,151	146,526	−1,625
Advance from prior year	NA	(858,375)	(860,000)	(1,625)
FY14	D	860,000	860,000	0
Dislocated Worker Assistance	.....	1,008,151	1,006,526	−1,625
Subtotal: Grants to States	.....	2,603,315	2,600,344	−2,971
Current Year	.....	1,031,315	1,028,344	−2,971
FY14	.....	1,572,000	1,572,000	0
Federally Administered Programs:				
Dislocated Worker Assistance Nat'l Reserve, current year	D	24,066	23,688	−378
Advance from prior year	NA	(199,622)	(200,000)	(378)
FY14	D	200,000	200,000	0
Subtotal: Dislocated Worker Assistance Nat'l Reserve	.....	224,066	223,688	−378
Total, Dislocated Worker Assistance	.....	1,232,217	1,230,214	−2,003
Native American Programs	D	47,562	47,562	0
Migrant and Seasonal Farmworker Programs	D	84,291	84,291	0
Women in Apprenticeship	D	996	996	0
Youthbuild	D	79,689	79,689	0
Workforce Innovation Fund	D	49,906	40,000	−9,906
Subtotal: Federally Administered Programs	.....	486,510	476,226	−10,284
Current Year	.....	286,510	276,226	−10,284
FY14	.....	200,000	200,000	0
National Activities:				
Pilots, Demonstrations and Research	D	6,603	0	−6,603
Reintegration of Ex-Offenders	D	80,238	80,238	0
Evaluation	D	9,563	0	−9,563
Workforce Data Quality Initiative	D	6,463	5,000	−1,463
Subtotal: National Activities	.....	102,867	85,238	−17,629
Total: Training and Employment Services	.....	3,192,692	3,161,808	−30,884
Current Year	.....	1,420,692	1,389,808	−30,884
FY14	.....	1,772,000	1,772,000	0
Office of Job Corps				
Administration	D	29,077	29,132	55
Operations	D	1,569,078	1,574,000	4,922
Advance from prior year	NA	(589,883)	0	(−589,883)
FY14	D	0	0	0

FY 2013 LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES APPROPRIATIONS—Continued

[$ in 000s]

		FY 2012 Comparable	Harkin Aendment	Harkin Amendment versus FY12*
Construction and Renovation	D	104,792	80,000	−24,792
Advance from prior year	NA	(99,811)	0	(−99,811)
FY14	D	0	0	0
Total: Job Corps	.....	1,702,947	1,683,132	−19,815
Current Year	.....	1,702,947	1,683,132	−19,815
FY14	.....	0	0	0
Community Serv. Employment Older Americans	D	448,251	448,251	0
Federal Unemployment Benefits and Allowances	M	1,100,100	1,421,000	320,900
State Unemployment Insurance and Employment Service Operations				
Unemployment Insurance				
State Operations	TF	3,225,047	2,994,912	−230,135
National Activities	TF	11,266	11,297	31
Subtotal: Unemployment Insurance	.....	3,236,313	3,006,209	−230,104
Employment Service:				
Allotments to States:				
Federal Funds	D	22,595	22,595	0
Trust Funds	TF	678,247	693,204	14,957
Subtotal: Employment Service Allotments to States	.....	700,842	715,799	14,957
ES National Activities	TF	20,912	20,912	0
Subtotal: Employment Service	.....	721,754	736,711	14,957
Federal Funds	.....	22,595	22,595	0
Trust Funds	.....	699,159	714,116	14,957
Foreign Labor Certification				
Program Administration	TF	50,323	50,323	0
State Grants	TF	15,070	15,070	0
Subtotal: Foreign Labor Certification	.....	65,393	65,393	0
One-Stop Career Centers/Labor Market Information	D	63,473	63,473	0
Total: State UI and ES	.....	4,086,933	3,871,786	−215,147
Federal Funds	.....	86,068	86,068	0
Trust Funds	.....	4,000,865	3,785,718	−215,147
Advances to the UI and Other Trust Funds [1]	M	171,000	0	−171,000
Program Administration				
Adult Employment and Training	D	46,677	46,677	0
Trust Funds	TF	8,518	8,518	0
Youth Employment and Training	D	12,260	12,260	0
Employment Security	D	3,476	3,476	0
Trust Funds	TF	39,343	39,343	0
Apprenticeship Services	D	27,676	27,676	0
Executive Direction	D	7,048	7,048	0
Trust Funds	TF	2,083	2,083	0
Subtotal: Program Administration	.....	147,081	147,081	0
Federal Funds	.....	97,137	97,137	0
Trust Funds	.....	49,944	49,944	0
Total: Employment and Training Administration	.....	10,849,004	10,733,058	−115,946
Federal Funds	.....	6,798,195	6,897,396	99,201
Current Year	.....	5,026,195	5,125,396	99,201
FY14	.....	1,772,000	1,772,000	0
Trust Funds	.....	4,050,809	3,835,662	−215,147
Employee Benefits Security Administration S&E				
Enforcement and Participant Assistance	D	145,243	145,243	0
Policy and Compliance Assistance	D	31,205	31,205	0
Executive Leadership, Program Oversight and Administration	D	6,705	6,705	0
Total: EBSA	.....	183,153	183,153	0
Pension Benefit Guaranty Corporation				
Pension Insurance Activities	NA	(86,023)	(75,943)	(−10,080)
Pension Plan Termination	NA	(243,372)	(240,611)	(−2,761)
Operational Support	NA	(147,506)	(162,459)	(14,953)
Total: PBGC, program level	.....	(476,901)	(479,013)	(2,112)
Enforcement of Wage and Hour Standards	D	227,061	235,730	8,669
Office of Labor-Management Standards	D	41,289	41,289	0
Federal Contractor EEO Standards Enforcement	D	105,187	105,187	0
Federal Programs for Workers' Compensation	D	115,720	115,720	0
Trust Funds	TF	2,120	2,120	0
Total: Federal Programs for Workers' Compensation		117,840	117,840	0
Federal Funds	.....	115,720	115,720	0
Trust Funds	.....	2,120	2,120	0
Special Benefits				
Federal employees compensation benefits	M	347,000	393,000	46,000
Longshore and harbor workers' benefits	M	3,000	3,000	0
Subtotal: Special Benefits	.....	350,000	396,000	46,000
Special Benefits for Disabled Coal Miners				
Benefit payments	M	177,000	158,000	−19,000
Administration	M	5,227	5,220	−7

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		FY 2012 Comparable	Harkin Aendment	Harkin Amendment versus FY12*
Subtotal: Spec. Bens. for Disabled Coal Miners, program level	.....	182,227	163,220	−19,007
Less funds advanced in prior year	M	−41,000	−40,000	1,000
Total, Spec. Bens. for Disabled Coal Miners, current request	.....	141,227	123,220	−18,007
New advances, 1st quarter FY14	M	40,000	35,000	−5,000
Energy Employees Occupational Illness Compensation	M	52,147	54,962	2,815
Black Lung Disability Trust Fund				
Benefit payments and interest on advances	M	242,609	250,043	7,434
Office of Workers' Compensation, S&E	M	32,906	32,906	0
Departmental Management S&E	M	25,217	25,217	0
Departmental Management, Inspector General	M	327	327	0
Subtotal: Black Lung Disability	.....	301,059	308,493	7,434
Treasury Adm. Costs	M	356	356	0
Total: Black Lung Disability Trust Fund	.....	301,415	308,849	7,434
Total: Office of Workers' Compensation Programs	.....	1,002,629	1,035,871	33,242
Federal Funds	.....	1,000,509	1,033,751	33,242
Current Year	.....	960,509	998,751	38,242
FY14	.....	40,000	35,000	−5,000
Trust Funds	.....	2,120	2,120	0
Occupational Safety and Health Administration S&E				
Safety and Health Standards	D	19,962	20,463	501
Federal Enforcement	D	207,753	207,075	−678
Whistleblower Enforcement	D	15,873	18,445	2,572
State Programs	D	104,196	104,196	0
Technical Support	D	25,819	24,880	−939
Compliance Assistance:				
Federal Assistance	D	76,355	76,355	0
State Consultation Grants	D	57,890	61,844	3,954
Training Grants	D	10,709	10,709	0
Subtotal: Compliance Assistance	D	144,954	148,908	3,954
Safety and Health Statistics	D	34,739	34,313	−426
Executive Direction and Administration	D	11,491	11,491	0
Total: OSHA	.....	564,787	569,771	4,984
Mine Safety and Health Administration S&E				
Coal Enforcement	D	164,500	166,180	1,680
Metal/Non-Metal Enforcement	D	89,063	90,380	1,317
Standards Development	D	4,765	5,090	325
Assessments/Accountability & Special Enforcement	D	7,103	6,732	−371
Educational Policy and Development	D	38,325	34,745	−3,580
Technical Support	D	33,613	33,613	0
Program Evaluation and Information Resources (PEIR)	D	18,157	17,990	−167
Program Administration	D	17,768	18,962	1,194
Total: MSHA	.....	373,294	373,692	398
Bureau of Labor Statistics S&E				
Employment and Unemployment Statistics	D	209,367	214,367	5,000
Labor Market Information	TF	67,176	67,176	0
Prices and Cost of Living	D	205,888	210,860	4,972
Compensation and Working Conditions	D	80,391	80,391	0
Productivity and Technology	D	12,013	12,013	0
Executive Direction and Staff Services	D	34,236	34,236	0
Total: Bureau of Labor Statistics	.....	609,071	619,043	9,972
Federal Funds	.....	541,895	551,867	9,972
Trust Funds	.....	67,176	67,176	0
Office of Disability Employment Policy S&E	D	38,879	38,953	74
Departmental Management				
Salaries and Expenses				
Executive Direction	D	33,220	32,722	−498
Departmental Program Evaluation	D	8,484	8,484	0
Legal Services	D	128,877	130,938	2,061
Trust Funds	TF	325	326	1
International Labor Affairs	D	92,309	92,309	0
Administration and Management	D	30,282	29,614	−668
Adjudication	D	29,172	29,496	324
Women's Bureau	D	11,559	11,559	0
Civil Rights Activities	D	6,785	7,273	488
Chief Financial Officer	D	5,340	5,340	0
Total: DM S&E	.....	346,353	348,061	1,708
Federal Funds	.....	346,028	347,735	1,707
Trust Funds	.....	325	326	1
Veterans Employment and Training				
State Administration, Grants	TF	165,081	172,000	6,919
Transition Assistance Program	TF	8,983	14,000	5,017
Federal Administration	TF	35,155	35,155	0
National Veterans Training Institute	TF	2,439	3,414	975
Homeless Veterans Program	D	38,185	38,185	0
Veterans Workforce Investment Programs	D	14,594	0	−14,594
Total: Veterans Employment and Training	.....	264,437	262,754	−1,683
Federal Funds	.....	52,779	38,185	−14,594
Trust Funds	.....	211,658	224,569	12,911

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		FY 2012 Comparable	Harkin Aendment	Harkin Amendment versus FY12*
IT Modernization				
Departmental Support Systems	D	11,830	7,985	−3,845
IT Infrastructure Modernization	D	7,985	11,830	3,845
Total: IT Modernization	.....	19,815	19,815	0
Office of the Inspector General				
Program Activities	D	77,790	77,790	0
Trust Funds	TF	5,898	5,898	0
Total: Office of the Inspector General	.....	83,688	83,688	0
Total: Departmental Management	.....	714,293	714,318	25
Federal Funds	.....	496,412	483,525	−12,887
Current Year	.....	496,412	483,525	−12,887
Current Year (emergency)	.....	0	0	0
FY14	.....	0	0	0
Trust Funds	.....	217,881	230,793	12,912
Total: Department of Labor	.....	14,708,647	14,650,065	−58,582
Federal Funds	.....	10,370,661	10,514,314	143,653
Current Year	.....	8,558,661	8,707,314	148,653
FY14	.....	1,812,000	1,807,000	−5,000
Trust Funds	.....	4,337,986	4,135,751	−202,235
Two year availability.				
DEPARTMENT OF HEALTH & HUMAN SERVICES				
Health Resources and Services Administration	.....	.....	.....	.....
Health Resources and Services	.....	.....	.....	.....
Bureau of Primary Health Care.				
Community health centers	D	1,566,892	1,566,892	0
Free Clinics Medical Malpractice	D	40	40	0
Hansen's Disease Services	D	16,045	16,045	0
Buildings and Facilities	D	128	127	−1
Payment to Hawaii, treatment of Hansen's	D	1,960	1,960	0
Subtotal: Bureau of Primary Health Care	.....	1,585,065	1,585,064	−1
Health Professions				
Training for Diversity				
Centers of excellence	D	22,909	22,909	0
Health careers opportunity program	D	14,822	14,822	0
Faculty loan repayment	D	1,243	1,243	0
Scholarships for disadvantaged students	D	47,452	47,452	0
Subtotal: Training for Diversity	.....	86,426	86,426	0
Training in Primary Care Medicine	D	38,962	44,481	5,519
Oral Health Training	D	32,392	32,392	0
Interdisciplinary Community-Based Linkages				
Area health education centers	D	27,220	27,220	0
Geriatric education	D	30,629	30,629	0
Mental and Behavioral Health	D	2,892	4,000	1,108
Subtotal: Interdisciplinary Comm. Linkages	.....	60,741	61,849	1,108
Workforce information and analysis	D	2,782	5,000	2,218
Public health and preventive medicine training	D	8,111	10,111	2,000
Nursing programs				
Advanced Education Nursing	D	63,925	63,925	0
Nurse education, practice and retention	D	39,182	39,182	0
Nursing workforce diversity	D	15,819	15,819	0
Loan repayment and scholarship program	D	83,135	83,135	0
Comprehensive geriatric education	D	4,485	4,485	0
Nursing faculty loan program	D	24,553	24,553	0
Subtotal: Nursing programs	.....	231,099	231,099	0
Subtotal: Health Professions	.....	460,513	471,358	10,845
Children's Hospitals Graduate Medical Education	D	265,171	275,171	10,000
National Practitioner Data Bank	D	27,963	28,016	53
User Fees	D	−27,963	−28,016	−53
Subtotal: Bureau of Health Professions	.....	725,684	746,529	20,845
Maternal and Child Health Bureau				
Maternal & Child Health Block Grant	D	638,646	640,098	1,452
Sickle Cell Anemia Demonstration Program	D	4,665	4,665	0
Traumatic Brain Injury	D	9,760	9,760	0
Autism and Other Developmental Disorders	D	47,142	47,142	0
Heritable Disorders	D	9,834	11,834	2,000
Healthy Start	D	103,532	103,532	0
Universal Newborn Hearing	D	18,660	18,660	0
Emergency medical services for children	D	21,116	21,116	0
Subtotal: Maternal and Child Health Bureau	.....	853,355	856,807	3,452
HIV/AIDS Bureau				
Ryan White AIDS Programs				
Emergency Assistance	D	671,258	666,071	−5,187
Comprehensive Care Programs	D	1,355,640	1,390,827	35,187
AIDS Drug Assistance Program (ADAP)	NA	(933,299)	(963,299)	(30,000)
Early Intervention Program	D	215,086	215,086	0
Children, Youth, Women & Families—Part D	D	77,167	77,167	0
AIDS Dental Services	D	13,485	13,485	0
Education and Training Centers	D	34,542	34,542	0
Subtotal: Ryan White AIDS programs, appropriation	.....	2,367,178	2,397,178	30,000
Evaluation Tap Funding	NA	(25,000)	(25,000)	0
Subtotal: Ryan White AIDS programs, program level	.....	2,392,178	2,422,178	30,000
Subtotal: HIV/AIDS Bureau	.....	2,367,178	2,397,178	30,000

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		FY 2012 Comparable	Harkin Aendment	Harkin Amendment versus FY12*
Healthcare Systems Bureau				
Organ Transplantation	D	24,015	24,015	0
National Cord Blood Inventory	D	11,887	11,887	0
Bone Marrow Program	D	23,330	23,330	0
Office of Pharmacy Affairs	D	4,472	4,472	0
340B Drug Pricing User Fees	D	0	6,000	6,000
User Fees	D	0	−6,000	−6,000
Poison control	D	18,830	18,830	0
Subtotal: Healthcare Systems Bureau	.....	82,534	82,534	0
Rural Health Programs.				
Rural outreach grants	D	55,553	55,553	0
Rural Health Research	D	9,866	9,866	0
Rural Hospital Flexibility Grants	D	41,040	41,040	0
Rural and Community Access to Emergency Devices	D	1,100	3,000	1,900
State Offices of Rural Health	D	10,036	10,036	0
Black lung clinics	D	7,140	7,140	0
Radiation Exposure Screening Education Program	D	1,935	1,935	0
Telehealth	D	11,502	11,502	0
Subtotal: Rural Health Programs	.....	138,172	140,072	1,900
Family Planning	D	293,870	293,870	0
Program Management	D	159,894	162,517	2,623
Total: Health resources and services, appropriation	.....	6,205,752	6,264,571	58,819
Evaluation Tap Funding (NA)	.....	(25,000)	(25,000)	0
Total: Health resources and services, program level	.....	6,230,752	6,289,571	58,819
Health Education Assistance Loans Program				
Liquidating account	NA	(1,000)	(1,000)	0
Program management	D	2,807	2,807	0
Total: HEAL	.....	2,807	2,807	0
Vaccine Injury Compensation Program TF				
Post-FY88 claims	M	235,000	235,000	0
HRSA administration	D	6,477	6,477	0
Total: Vaccine Injury Compensation Trust Fund	.....	241,477	241,477	0
Total: HRSA, appropriation	.....	6,450,036	6,508,855	58,819
Evaluation Tap Funding (NA)	.....	(25,000)	(25,000)	0
HRSA, funded in this bill	.....	6,475,036	6,533,855	58,819
Prevention and Public Health Fund	.....	0	0	0
Total: HRSA, program level	.....	6,475,036	6,533,855	58,819
Centers for Disease Control and Prevention				
Immunization and Respiratory Diseases	D	576,083	525,201	−50,882
Balances from P.L. 111−32 Pandemic Flu	NA	0	(51,049)	51,049
Evaluation Tap Funding	NA	(12,864)	(12,864)	0
Subtotal: Immunization and Respiratory Disease	.....	588,947	589,114	167
HIV/AIDS, Viral Hepatitis, STD and TB Prevention	D	1,099,934	1,101,956	2,022
Emerging and Zoonotic Infectious Diseases	D	252,476	266,458	13,982
Chronic Disease Prevention, Health Promotion and Genomics	D	756,377	797,081	40,704
Birth Defects, Developmental Disabilities, Disability and Health	D	137,287	132,037	−5,250
Public Health Scientific Services	D	143,972	129,614	−14,358
Evaluation Tap Funding	NA	(247,769)	(262,127)	(14,358)
Health Information and Service, program level	.....	391,741	391,741	0
Environmental Health	D	104,998	107,316	2,318
Injury Prevention and Control	D	137,693	137,693	0
National Institute for Occupational Safety and Health[1]	D	181,864	181,222	−642
Evaluation Tap Funding	NA	(110,724)	(111,366)	(642)
Occupational Safety and Health, program level [1]	.....	292,588	292,588	0
Energy Employees Occupational Illness Compensation Program	M	(55,358)	(55,358)	0
Global Health	D	347,594	353,794	6,200
Public Health Preparedness and Response	D	1,299,479	1,226,013	−73,466
Balances from P.L. 111–32 Pandemic Flu	NA	(30,000)	(154,876)	(124,876)
Public Health Preparedness and Response, Program Level	.....	1,329,479	1,380,889	51,410
Buildings and Facilities	.....	24,946	39,400	14,454
CDC-Wide Activities	D	592,967	591,500	−1,467
Total: Centers for Disease Control, appropriation	.....	5,711,028	5,644,643	−66,385
Mandatory Funding	.....	55,358	55,358	0
Discretionary Appropriation	.....	5,655,670	5,589,285	−66,385
Evaluation Tap Funding (NA)	.....	(371,357)	(386,357)	(15,000)
Balances from P.L. 111–32 Pandemic Flu	.....	(30,000)	(205,925)	(175,925)
Total: CDC, program level	.....	6,112,385	6,236,925	124,540
National Institutes of Health				
National Cancer Institute	D	5,062,805	5,090,976	28,171
National Heart, Lung, and Blood Institute	D	3,073,329	3,090,430	17,101
National Institute of Dental & Craniofacial Research	D	409,951	412,232	2,281
Nat. Inst. of Diabetes & Digestive & Kidney Diseases	D	1,793,721	1,803,702	9,981
Juvenile Diabetes (Mandatory)	NA	(150,000)	(150,000)	0
NIDDK, program level	.....	(1,943,721)	(1,953,702)	(9,981)
National Institute of Neurological Disorders and Stroke	D	1,623,357	1,632,390	9,033
National Institute of Allergy and Infectious Diseases	D	4,482,138	4,507,078	24,940
National Institute of General Medical Sciences	D	2,425,588	2,479,085	53,497
Nat. Inst. of Child Health and Human Development	D	1,318,954	1,326,293	7,339
National Eye Institute	D	701,413	705,316	3,903

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		FY 2012 Comparable	Harkin Aendment	Harkin Amendment versus FY12*
National Institute of Environmental Health Sciences	D	684,303	688,111	3,808
National Institute on Aging	D	1,120,401	1,126,636	6,235
Nat. Inst. Arthritis & Musculoskeletal & Skin Diseases	D	534,795	537,771	2,976
Nat. Inst. on Deafness & Other Communication Disorders	D	415,504	417,816	2,312
National Institute of Nursing Research	D	144,502	145,306	804
National Institute on Alcohol Abuse and Alcoholism	D	458,669	461,221	2,552
National Institute on Drug Abuse	D	1,051,420	1,057,270	5,850
National Institute of Mental Health	D	1,477,528	1,485,749	8,221
National Human Genome Research Institute	D	512,263	515,113	2,850
National Institute of Biomedical Imaging and Bioengineering	D	337,731	339,610	1,879
National Center for Research Resources	D	0	0	0
National Center for Complementary and Alternative Medicine	D	127,820	128,531	711
National Institute on Minority Health and Health Disparities	D	275,929	277,464	1,535
John E. Fogarty International Center	D	69,493	69,880	387
National Center for Advancing Translational Sciences	D	574,334	617,830	43,496
National Library of Medicine	D	364,822	366,852	2,030
Evaluation Tap Funding	NA	(8,200)	(8,200)	0
NLM, program level	.....	(373,022)	(375,052)	(2,030)
Office of the Director	D	1,457,181	1,465,289	8,108
Common Fund (NA)	NA	(544,930)	(547,962)	(3,032)
Buildings and Facilities	D	125,308	125,308	0
Total: National Institutes of Health, appropriation	.....	30,623,259	30,873,259	250,000
Evaluation Tap funding (NA)	.....	(8,200)	(8,200)	0
Total: National Institutes of Health, Program Level	.....	30,631,459	30,881,459	250,000
Substance Abuse & Mental Health Services Adm.				
Mental Health:				
Programs of Regional and National Significance	D	275,757	290,996	15,239
Mental Health Block Grant	D	438,717	448,717	10,000
Evaluation Tap Funding	NA	(21,039)	(21,039)	0
Mental Health Block Grant, program level	.....	459,756	469,756	10,000
State Prevention Grants	D	0	0	0
Children's Mental Health	D	117,314	117,315	1
Grants to States for the Homeless (PATH)	D	64,794	64,794	0
Protection and Advocacy	D	36,238	36,238	0
Subtotal: Mental Health, appropriation	.....	932,820	958,060	25,240
Subtotal: Mental Health, program level	.....	953,859	979,099	25,240
Substance Abuse Treatment:				
Programs of Regional and National Significance	D	398,243	373,568	−24,675
Evaluation Tap Funding	NA	(2,000)	(2,000)	0
Programs of Regional and National Significance, program level	.....	400,243	375,568	−24,675
Substance Abuse Prevention Grants	D	0	0	0
Substance Abuse Block Grant	D	1,721,132	1,741,132	20,000
Evaluation Tap Funding	NA	(79,200)	(79,200)	0
Substance Abuse Block Grant, program level	.....	1,800,332	1,820,332	20,000
Subtotal: Substance Abuse Treatment, appropriation	.....	2,119,375	2,114,700	−4,675
Subtotal: Substance Abuse Treatment, program level	.....	2,200,575	2,195,900	−4,675
Substance Abuse Prevention:				
Programs of Regional and National Significance	D	185,956	185,364	−592
Health Surveillance, Crosscutting Issues & Support				
Program Management	D	76,894	72,229	−4,665
Health Surveillance	D	1,996	1,996	0
Evaluation Tap Funding	NA	(27,428)	(27,428)	0
Surveillance, program level	.....	29,424	29,424	0
Military Families	D	3,493	3,500	7
Data Requests & Publications	D	0	1,500	1,500
User Fees	D	0	−1,500	−1,500
Public Awareness and Support	D	13,545	13,545	0
Performance and Quality Information Systems	D	12,940	12,940	0
Subtotal: Health Surveillance & Support appropriation	.....	108,868	104,210	−4,658
Subtotal: Health Surveillance & Support program level	.....	136,296	131,638	−4,658
Total: SAMHSA, appropriation	.....	3,347,019	3,362,334	15,315
Evaluation Tap Funding (NA)	.....	(129,667)	(129,667)	0
Total: SAMHSA, program level	.....	3,476,686	3,492,001	15,315
Agency for Healthcare Research and Quality				
Research on Health Costs, Quality, and Outcomes (HCQO):				
HCQO, Federal Funds	D	0	0	0
HCQO, Evaluation Tap funding	NA	(235,768)	(219,931)	(−15,837)
Subtotal: Research on Health Costs, Quality, and Outcomes	.....	(235,768)	(219,931)	(−15,837)
Medical Expenditure Surveys, Federal Funds	D	0	0	0
Medical Expenditure Surveys, Evaluation Tap Funding	NA	(59,300)	(60,700)	(1,400)
Program Support, Federal Funds	D	0	0	0
Program Support, Evaluation Tap Funding	NA	(73,985)	(68,422)	(−5,563)
Total: AHRQ, appropriation	.....	0	0	0
Evaluation Tap Funding	.....	369,053	349,053	−20,000
Total: AHRQ, program level	.....	369,053	349,053	−20,000
Centers for Medicare and Medicaid Services				
Grants to States for Medicaid				
Medicaid current law benefits	M	253,884,907	250,398,918	−3,485,989
State and local administration	M	12,808,496	14,735,346	1,926,850
Vaccines for Children	M	4,030,996	4,271,015	240,019
Subtotal: Medicaid program level	.....	270,724,399	269,405,279	−1,319,120
Less funds advanced in prior year	M	−86,445,289	−90,614,082	−4,168,793
Total: Grants to States for Medicaid	.....	184,279,110	178,791,197	−5,487,913
New advance, 1st quarter	M	90,614,082	106,335,631	15,721,549

FY 2013 LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES APPROPRIATIONS—Continued

[$ in 000s]

		FY 2012 Comparable	Harkin Aendment	Harkin Amendment versus FY12*
Payments to Health Care Trust Funds				
Supplemental medical insurance	M	178,041,000	189,520,000	11,479,000
Hospital insurance for the uninsured	M	0	0	0
Federal uninsured payment	M	262,000	228,000	−34,000
Program management	M	222,000	192,000	−30,000
General revenue for Part D benefit	M	51,431,000	60,744,000	9,313,000
General revenue for Part D federal administration	M	475,000	424,000	−51,000
Reimbursement for HCFAC	M	310,378	309,790	−588
Subtotal: Payments to trust funds, program level	.....	230,741,378	251,417,790	20,676,412
Less funds advanced in prior year	.....	0	0	0
Total: Payments to trust funds, current law	.....	230,741,378	251,417,790	20,676,412
Program Management				
Research, Demonstration and Evaluation	TF	21,160	21,160	0
Program Operations	TF	2,608,785	2,608,785	0
State Survey and Certification	TF	375,203	381,278	6,075
High Risk Insurance Pools	TF	44,000	44,000	0
Federal Administration	TF	770,963	770,964	1
				0
Total: Program Management lim. on new BA	.....	3,820,111	3,826,187	6,076
Health Care Fraud and Abuse Control				
Discretionary MIP	TF	219,463	219,463	0
Office of Inspector General	TF	29,674	29,674	0
Department of Justice	TF	29,674	29,674	0
Medicaid/SCHIP PERM	TF	30,979	30,979	0
Total: Health Care Fraud and Abuse Control	.....	309,790	309,790	0
Total: Center for Medicare and Medicaid Services	.....	509,764,471	540,680,595	30,916,124
Federal Funds	.....	505,634,570	536,544,618	30,910,048
Current year	.....	415,020,488	430,208,987	15,188,499
New advance, FY14	.....	90,614,082	106,335,631	15,721,549
Trust Funds	.....	4,129,901	4,135,977	6,076
Administration for Children and Families				
Family Support Payments to States				
Payments to territories	M	33,000	33,000	0
Repatriation	M	1,000	1,000	0
Subtotal: Welfare payments	.....	34,000	34,000	0
Child Support Enforcement:				
State and local administration	M	3,780,819	3,272,647	−508,172
Federal incentive payments	M	526,158	539,838	13,680
Access and visitation	M	10,000	10,000	0
Subtotal: Child Support Enforcement	.....	4,316,977	3,822,485	−494,492
Total: Family support payments, program level	.....	4,350,977	3,856,485	−494,492
Less funds advanced in previous years	M	−1,200,000	−1,100,000	100,000
Total: Family support payments, current year	.....	3,150,977	2,756,485	−394,492
New advance, 1st quarter, FY14	M	1,100,000	1,100,000	0
Low Income Home Energy Assistance Program				
Formula grants (non-emergency)	D	3,471,672	3,471,672	0
Refugee and Entrant Assistance				
Transitional and Medical Services	D	323,195	412,875	89,680
Victims of Trafficking	D	9,775	9,775	0
Social Services	D	124,305	153,407	29,102
Preventive Health	D	4,730	4,730	0
Targeted Assistance	D	28,073	48,401	20,328
Unaccompanied Alien Children	D	267,211	363,767	96,556
Victims of Torture	D	11,045	11,045	0
Total: Refugee and Entrant Assistance	.....	768,334	1,004,000	235,666
Child Care and Development Block Grant	D	2,278,313	2,388,313	110,000
Social Services Block Grant (Title XX)	M	1,700,000	1,700,000	0
Children and Family Services Programs				
Programs for Children, Youth and Families:				
Head Start, current funded	D	7,968,544	8,018,544	50,000
Consolidated Runaway, Homeless Youth Prog.	D	97,355	97,355	0
Prevention Grants to Reduce Abuse of Runaway Youth	D	17,901	17,901	0
Child Abuse State Grants	D	26,432	26,432	0
Child Abuse Discretionary Activities	D	25,744	28,744	3,000
Community Based Child Abuse Prevention	D	41,527	41,527	0
Abandoned Infants Assistance	D	11,553	11,553	0
Child Welfare Services	D	280,650	280,650	0
Child Welfare Training	D	26,092	26,092	0
Adoption Opportunities	D	39,179	39,179	0
Adoption Incentives	D	39,346	39,346	0
Social Services and Income Maintenance Research	D	0	0	0
Evaluation Tap Funding	NA	(5,762)	5,762	0
Native American Programs	D	48,583	48,583	0
Community Services:				
Community Services Block Grant Act:				
Grants to States for Community Services	D	677,358	677,358	0
Economic Development	D	29,943	34,943	5,000
Rural Community Facilities	D	4,981	5,981	1,000
Subtotal: CSBG Act	.....	712,282	718,282	6,000
Individual Development Account Initiative	D	19,869	17,000	−2,869
Subtotal: Community Services	.....	732,151	735,282	3,131
Domestic Violence Hotline	D	3,197	4,500	1,303
Family Violence/Battered Women's Shelters	D	129,547	135,000	5,453
Independent Living Training Vouchers	D	45,174	45,174	0
Faith-Based Center	D	1,370	1,370	0
Disaster Human Services Case Management	D	1,992	1,992	0

FY 2013 LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES APPROPRIATIONS—Continued

[$ in 000s]

		FY 2012 Comparable	Harkin Aendment	Harkin Amendment versus FY12*
Program Direction	D	198,645	201,645	3,000
Total: Children and Family Services Programs, appropriation	.....	9,734,982	9,800,869	65,887
Current Year	.....	9,734,982	9,800,869	65,887
Evaluation Tap Funding (NA)	.....	(5,762)	(5,762)	0
Total: Children and Family Services Programs, program level	.....	9,740,744	9,806,631	65,887
Promoting Safe and Stable Families	M	345,000	345,000	0
Discretionary Funds	D	63,065	63,065	0
Payments for Foster Care and Permanency.				
Foster Care	M	4,288,000	4,143,000	−145,000
Adoption Assistance	M	2,495,000	2,537,000	42,000
Independent living	M	140,000	140,000	0
Kinship Guardianship	M	80,000	90,000	10,000
Total: Payments to States	.....	7,003,000	6,910,000	−93,000
Less Advances from Prior Year	M	−1,850,000	−2,100,000	−250,000
Total: Current year	.....	5,153,000	4,810,000	−343,000
New Advance, 1st quarter	M	2,100,000	2,200,000	100,000
Total: Administration for Children and Families, appropriation	.....	29,865,343	29,639,404	−225,939
Current Year	.....	26,665,343	26,339,404	−325,939
Evaluation Tap Funding (NA)	.....	(5,762)	(5,762)	0
Total: Administration for Children and Families, program level	.....	29,871,105	29,645,166	−225,939
Total: Administration for Children and Families, discretionary	.....	16,316,366	16,727,919	411,553
Administration for Community Living				
Aging and Disability Services Programs				
Grants to States:				
Supportive Services and Centers	D	366,916	366,916	0
Preventive Health	D	20,944	20,944	0
Protection of Vulnerable Older Americans—Title VII	D	21,798	21,798	0
Family Caregivers	D	153,621	153,621	0
Native American Caregivers Support	D	6,376	6,364	−12
Subtotal: Caregivers	.....	159,997	159,985	−12
Nutrition:				
Congregate Meals	D	439,070	439,070	0
Home Delivered Meals	D	216,830	216,830	0
Nutrition Services Incentive program	D	160,389	160,389	0
Subtotal: Nutrition	.....	816,289	816,289	0
Grants for Native Americans	D	27,601	27,601	0
Aging Network Support Activities	D	7,873	7,873	0
Alzheimer's Disease Demonstrations	D	4,010	4,010	0
Lifespan Respite Care	D	2,490	2,490	0
Adult Protective Services Demonstrations	D	0	5,000	5,000
Senior Medicare Patrol Program	D	9,402	9,402	0
Elder Rights Support Activities	D	4,088	4,088	0
Aging & Disability Resource Centers	D	6,457	6,457	0
State Health Insurance Program (SHIPs)	TF	52,115	52,115	0
Developmental Disabilities Programs:				
State Councils	D	74,774	74,774	0
Protection and Advocacy	D	40,865	40,865	0
Voting Access for Individuals with Disabilities	D	5,235	5,235	0
Developmental Disabilities Projects of National Significance	D	8,317	8,317	0
University Ctrs. for Excellence in Developmental Disabilities	D	38,792	38,792	0
Subtotal: Developmental Disabilities Programs	.....	167,983	167,983	0
Program Adminstration	D	29,311	29,652	341
Total: Administration for Community Living	.....	1,697,274	1,702,603	5,329
Federal Funds	.....	1,645,159	1,650,488	5,329
Trust Funds	.....	52,115	52,115	0
Administration for Community Living Program Level	.....	1,697,274	1,702,603	5,329
Office of the Secretary				
General Departmental Management				
Federal Funds	D	218,262	223,253	4,991
Trust Funds	TF	0	0	0
Subtotal	.....	218,262	223,253	4,991
Teen Pregnancy Prevention	D	104,592	104,592	0
Eval Tap	NA	(8,455)	(8,455)	0
Subtotal	.....	113,047	113,047	0
Minority Health	D	55,782	55,782	0
Abstinence Education	D	4,991	5,000	9
Office of Women's Health	D	33,682	29,120	−4,562
Minority HIV/AIDS	D	53,681	53,681	0
Embryo Adoption Awareness Campaign	D	1,996	1,996	0
Planning and Evaluation (Eval Tap)	NA	(60,756)	(60,756)	0
Total: General Department Management	.....	542,197	542,635	438
Federal Funds	.....	472,986	473,424	438
Evaluation Tap	.....	(69,211)	(69,211)	0
Trust Funds	.....	0	0	0
Office of Medicare Hearings and Appeals	TF	72,011	79,908	7,897
Office of the Nat'l Coord. for Health IT	D	16,415	16,415	0
Evaluation Tap Funding	NA	(44,811)	(49,842)	(5,031)

FY 2013 LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES APPROPRIATIONS—Continued

[$ in 000s]

		FY 2012 Comparable	Harkin Aendment	Harkin Amendment versus FY12*
Health Information Technology, program level	.....	(61,226)	(66,257)	(5,031)
Office of the Inspector General				
Federal Funds	D	50,083	55,483	5,400
HIPAA funding (NA)	NA	(196,090)	(196,669)	(579)
Evaluation Tap Funding	NA	0	0	0
Total: Office of the Inspector General, appropriation	.....	50,083	55,483	5,400
Total: Office of the Inspector General, program level	.....	(246,173)	(252,152)	(5,979)
Office for Civil Rights				
Federal Funds	D	40,938	38,966	−1,972
Trust Funds	TF	0	0	0
Total: Office for Civil Rights	.....	40,938	38,966	−1,972
Trust Funds	.....	0	0	0
Federal Funds	.....	40,938	38,966	−1,972
Medical Benefits for Commissioned Officers				
Retirement payments	M	375,016	395,452	20,436
Survivors benefits	M	28,350	31,043	2,693
Dependents' medical care	M	93,984	100,656	6,672
Total: Medical benefits for commissioned officers	.....	497,350	527,151	29,801
Public Health and Social Service Emergency Fund				
Asst. Sec. for Preparedness & Response:				
Operations	D	32,982	32,982	0
Preparedness & Emergency Operations	D	29,583	24,647	−4,936
National Disaster Medical System	D	52,735	52,390	−345
Hospital Preparedness	D	374,650	323,004	−51,646
ESAR–VHP	D	4,989	4,990	1
Biomedical Advanced Research & Development	D	415,000	445,000	30,000
Medical Countermeasure Strategic Investor	D	0	15,000	15,000
Medical Countermeasure Dispensing	D	0	5,000	5,000
Policy, Strategic Planning & Communications	D	15,674	15,164	−510
Subtotal: ASPR	.....	925,613	918,177	−7,436
Assistant Sec. for Administration/Cyber-Security	D	39,924	40,000	76
Assistant Secretary for Health/Medical Reserve Corps	D	11,247	10,971	−276
Office of the Secretary:				
HHS Lease Replacement	D	0	17,000	17,000
Office of Security & Strategic Information	D	6,448	7,428	980
Subtotal: OS appropriation	.....	6,448	24,428	17,980
Total: PHSSEF appropriation	.....	983,232	993,576	10,344
Total: Office of the Secretary	.....	2,133,015	2,184,923	51,908
Federal Funds	.....	2,061,004	2,105,015	44,011
Trust Funds	.....	72,011	79,908	7,897
Total: Department of Health and Human Services	.....	589,591,445	620,596,616	31,005,171
Federal Funds	.....	585,337,418	616,328,616	30,991,198
Current year	.....	491,523,336	506,692,985	15,169,649
FY14 advance	.....	93,814,082	109,635,631	15,821,549
Trust Funds	.....	4,254,027	4,268,000	13,973
Includes Mine Safety and Health				
DEPARTMENT OF EDUCATION				
Education for the Disadvantaged				
Grants to Local Educational Agencies (LEAs)				
Basic Grants				
Advance from prior year	NA	(2,956,911)	(2,962,510)	(5,599)
Forward funded	D	3,611,410	3,611,410	0
Current funded	D	3,984	3,984	0
Subtotal: Basic Grants, current year approp.	.....	3,615,394	3,615,394	0
Subtotal: Basic Grants, total	.....	(6,572,305)	(6,577,904)	(5,599)
Basic Grants FY14 Advance	D	2,962,510	2,962,510	0
Subtotal: Basic Grants, program level	.....	6,577,904	6,577,904	0
Concentration Grants				
Advance from prior year	NA	(1,359,726)	(1,362,301)	(2,575)
FY14 Advance	D	1,362,301	1,362,301	0
Subtotal: Concentration Grants, program level	.....	1,362,301	1,362,301	0
Targeted Grants				
Advance from prior year	NA	(3,252,025)	(3,258,183)	(6,158)
Forward Funded	D	29,943	92,443	62,500
FY14 Advance	D	3,258,183	3,258,183	0
Subtotal: Targeted Grants, program level	.....	3,288,126	3,350,626	62,500
Education Finance Incentive Grants				
Advance from prior year	NA	(3,252,025)	(3,258,183)	(6,158)
Forward Funded	D	29,943	92,443	62,500
FY14 Advance	D	3,258,183	3,258,183	0
Subtotal: Education Finance Incentive Grants, program level	.....	3,288,126	3,350,626	62,500
Subtotal: Grants to LEAs (program level)	.....	14,516,457	14,641,457	125,000
School Improvement Grants	D	533,552	533,552	0
Striving Readers	D	159,698	159,698	0
State Agency Programs:.				
Migrant	D	393,236	393,236	0
Neglected and Delinquent/High Risk Youth	D	50,231	50,231	0
Evaluation	D	3,194	3,100	−94
High School Graduation Initiative	D	48,809	48,809	0
Special Programs for Migrant Students	D	36,526	36,526	0

FY 2013 LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES APPROPRIATIONS—Continued

[$ in 000s]

		FY 2012 Comparable	Harkin Aendment	Harkin Amendment versus FY12*
Total: Education for the Disadvantaged	.....	15,741,703	15,866,609	124,906
Current Year	.....	4,900,526	5,025,432	124,906
FY14	.....	10,841,177	10,841,177	0
Subtotal: Forward Funded	.....	4,808,013	4,933,013	125,000
Impact Aid				
Basic Support Payments	D	1,153,540	1,173,540	20,000
Payments for Children with Disabilities	D	48,413	48,413	0
Facilities Maintenance (Sec. 8008)	D	4,845	4,845	0
Construction (Sec. 8007)	D	17,441	17,441	0
Payments for Federal Property (Sec. 8002)	D	66,947	66,947	0
Total: Impact Aid	.....	1,291,186	1,311,186	20,000
School Improvement Programs				
State Grants for Improving Teacher Quality	D	785,126	785,126	0
Advance from prior year	NA	(1,678,263)	(1,681,441)	(3,178)
FY14	D	1,681,441	1,681,441	0
State Grants for Improving Teacher Quality, program level	.....	2,466,567	2,466,567	0
Mathematics and Science Partnerships	D	149,716	149,716	0
Supplemental Education Grants	D	17,619	17,619	0
21st Century Community Learning Centers	D	1,151,673	1,151,673	0
State Assessments/Enhanced Assessment Instruments	D	389,214	389,214	0
Education for Homeless Children & Youth	D	65,173	65,173	0
Training and Advisory Services (Civil Rights)	D	6,962	6,962	0
Education for Native Hawaiians	D	34,181	34,181	0
Alaska Native Education Equity	D	33,185	33,185	0
Rural Education	D	179,193	188,693	9,500
Comprehensive Centers	D	51,113	51,113	0
Total: School improvement programs	.....	4,544,596	4,554,096	9,500
Current Year	.....	2,863,155	2,872,655	9,500
FY14	.....	1,681,441	1,681,441	0
Subtotal: Forward funded	.....	2,720,095	2,729,595	9,500
Indian Education				
Grants to Local Educational Agencies	D	105,921	105,921	0
Federal Programs:	.....	.....	0	0
Special Programs for Indian Children	D	18,986	18,986	0
National Activities	D	5,872	5,872	0
Subtotal: Federal Programs	.....	24,858	24,858	0
Total: Indian Education	.....	130,779	130,779	0
Innovation and Improvement				
Race to the Top	D	548,960	549,284	324
Investing in Innovation	D	149,417	149,417	0
Transition to Teaching	D	26,054	18,200	−7,854
School Leadership	D	29,107	14,097	−15,010
Charter Schools Grants	D	254,836	254,836	0
Magnet Schools Assistance	D	96,733	96,733	0
Fund for the Improvement of Education (FIE)	D	65,776	79,220	13,444
Teacher Incentive Fund, current funded	D	299,433	299,433	0
Ready-to-Learn Television	D	27,194	27,194	0
Advanced Placement	D	30,027	36,027	6,000
Total: Innovation and Improvement	.....	1,527,537	1,524,441	−3,096
Safe Schools and Citizenship Education				
Promise Neighborhoods	D	59,887	80,000	20,113
National Activities	D	64,877	48,600	−16,277
Elementary and Secondary School Counseling	D	52,296	52,296	0
Carol M. White Physical Education Program	D	78,693	78,693	0
Total: Safe Schools and Citizenship Education	.....	255,753	259,589	3,836
English Language Acquisition				
Current funded	D	47,589	47,589	0
Forward funded	D	684,555	684,555	0
Total: English Language Acquisition	.....	732,144	732,144	0
Special Education				
State Grants				
Grants to States Part B	D	2,294,472	2,434,472	140,000
Advance from prior year	NA	(8,576,143)	(9,283,383)	(707,240)
FY14	D	9,283,383	9,283,383	0
Grants to States, program level	.....	11,577,855	11,717,855	140,000
Preschool Grants	D	372,646	372,646	0
Grants for Infants and Families	D	442,710	452,710	10,000
Subtotal: State grants, program level	.....	12,393,211	12,543,211	150,000
IDEA National Activities (current funded):				
State Personnel Development	D	43,917	45,011	1,094
Technical Assistance and Dissemination	D	54,781	54,781	0
Personnel Preparation	D	88,299	86,205	−2,094
Parent Information Centers	D	28,917	29,917	1,000
Technology and Media Services	D	29,588	29,588	0
Subtotal: IDEA National Activities	.....	245,502	245,502	0
Special Olympics Education Programs	D	0	.....	.....
Promoting Readiness of Minors in SSI (PROMISE)	D	1,996	1,996	0
Total: Special Education	.....	12,640,709	12,790,709	150,000
Current Year	.....	3,357,326	3,507,326	150,000

FY 2013 LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES APPROPRIATIONS—Continued

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		FY 2012 Comparable	Harkin Aendment	Harkin Amendment versus FY12*
FY14	.....	9,283,383	9,283,383	0
Subtotal: Forward funded	.....	3,109,828	3,259,828	150,000
Rehabilitation Services and Disability Research				
Vocational Rehabilitation State Grants	M	3,121,712	3,230,972	109,260
Discretionary modification	NA	0	0	0
Vocational Rehabilitation State Grants, Program Level	.....	3,121,712	3,230,972	109,260
Client Assistance State grants	D	12,240	12,240	0
Training	D	35,515	35,515	0
Demonstration and training programs	D	5,325	6,075	750
Migrant and seasonal farmworkers	D	1,262	1,262	0
Protection and advocacy of individual rights (PAIR)	D	18,031	18,031	0
Supported employment State grants	D	29,068	29,068	0
Independent living:				
State grants	D	23,359	23,359	0
Centers	D	79,953	79,953	0
Services for older blind individuals	D	34,018	34,018	0
Subtotal: Independent living	.....	137,330	137,330	0
Helen Keller National Center for Deaf/Blind Youth and Adults	D	9,145	9,145	0
National Institute on Disability and Rehab. Research (NIDRR)	D	108,817	106,817	−2,000
Assistive Technology	D	32,836	37,771	4,935
Subtotal: Discretionary Programs	.....	389,569	393,254	3,685
Total: Rehabilitation Services	.....	3,511,281	3,624,226	112,945
Special Institutions for Persons with Disabilities				
American Printing House for the Blind	D	24,505	24,505	0
National Technical Institute for the Deaf				
Operations	D	65,422	65,422	0
Construction	D	0	0	0
Subtotal: NTID	.....	65,422	65,422	0
Gallaudet University				
Operations	D	117,541	117,541	0
Construction	D	7,975	7,000	−975
Subtotal, Gallaudet	.....	125,516	124,541	−975
Total: Special Institutions for Persons with Disabilities	.....	215,443	214,468	−975
Career, Technical and Adult Education				
Career and Technical Education				
State Grants:				
State grants, current funded	D	332,030	332,030	0
Advance from prior year	NA	(789,505)	(791,000)	(1,495)
FY14	D	791,000	791,000	0
State Grants, program level	.....	1,123,030	1,123,030	0
National Programs	D	7,829	7,829	0
Subtotal: Career and Technical Education	.....	1,130,859	1,130,859	0
Adult Education:				
State Grants/Adult basic and literacy education				
State Grants	D	594,993	594,993	0
National Programs				
National Leadership Activities	D	11,302	11,302	0
Subtotal: National programs	.....	11,302	11,302	0
Subtotal: Adult Education	.....	606,295	606,295	0
Total: Career, Technical and Adult education	.....	1,737,154	1,737,154	0
Current Year	.....	946,154	946,154	0
FY14	.....	791,000	791,000	0
Subtotal: Forward funded	.....	946,154	946,154	0
Student Financial Assistance				
Pell Grants—maximum grant	NA	(4,860)	(4,860)	0
Pell Grants	D	22,824,000	22,824,000	0
Federal Supplemental Educational Opportunity Grants	D	734,599	734,599	0
Federal Work Study	D	976,682	976,682	0
Total: Student Financial Assistance	.....	24,535,281	24,535,281	0
Student Aid Administration				
Administrative Costs	D	675,750	711,618	35,868
Servicing activities	D	367,637	393,745	26,108
Total: Student Aid Administration	.....	1,043,387	1,105,363	61,976
Higher Education				
Aid for Institutional Development:				
Strengthening Institutions	D	80,623	80,623	0
Hispanic Serving Institutions	D	100,432	100,432	0
Promoting Postbaccalaureate Opp. For Hispanic Americans	D	9,011	9,011	0
Strengthening Historically Black Colleges (HBCUs)	D	227,980	227,980	0
Strengthening Historically Black Graduate Insts.	D	58,958	58,958	0
Strengthening Predominately Black Insts.	D	9,262	9,262	0
Asian American Pacific Islander	D	3,119	3,119	0
Strengthening Alaska Native/Native Hawaiian-Serving Insts.	D	12,859	12,859	0
Strengthening Native American Non-tribal Colleges	D	3,119	3,119	0
Strengthening Tribal Colleges	D	25,713	25,713	0
Subtotal: Aid for Institutional development	.....	531,076	531,076	0
International Education and Foreign Language:				
Domestic Programs	D	66,586	67,432	846
Overseas Programs	D	7,451	7,451	0
Subtotal: International Ed and Foreign Language	.....	74,037	74,883	846
Fund for the Improvement of Postsec. Ed. (FIPSE)	D	3,494	29,494	26,000

FY 2013 LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES APPROPRIATIONS—Continued

[$ in 000s]

		FY 2012 Comparable	Harkin Aendment	Harkin Amendment versus FY12*
Postsecondary Programs for Students with Intellectual Disabilities	D	10,957	10,957	0
Minority Science and Engineering Improvement	D	9,466	9,466	0
Tribally Controlled Postsec Vocational and Technical Institutions	D	8,131	8,131	0
Federal TRIO Programs	D	839,932	854,932	15,000
GEAR UP	D	302,244	302,244	0
Graduate Assistance in Areas of National Need	D	30,909	30,909	0
Teacher Quality Partnership	D	42,833	42,833	0
Child Care Access Means Parents in School	D	15,970	15,970	0
GPRA data/HEA program evaluation	D	607	607	0
Total: Higher Education	.....	1,869,656	1,911,502	41,846
Howard University				
Academic Program	D	201,637	201,637	0
Endowment Program	D	3,593	3,593	0
Howard University Hospital	D	28,834	28,834	0
Total: Howard University	.....	234,064	234,064	0
College Housing and Acad. Facilities Loans (CHAFL)	D	459	459	0
HBCU Capital Financing Program				
Federal Admin	D	352	352	0
Loan Subsidies	D	20,150	20,150	0
Total: HBCU Capital Financing Program	.....	20,502	20,502	0
Institute of Education Sciences				
Research, development and dissemination	D	189,787	189,787	0
Statistics	D	108,748	112,748	4,000
Regional Educational Laboratories	D	57,426	57,426	0
Research in Special Education	D	49,905	49,905	0
Special Education Studies and Evaluations	D	11,415	11,415	0
Statewide Data Systems	D	38,077	38,077	0
Assessment:	.....	.....	.....	0
National Assessment	D	129,616	124,616	−5,000
National Assessment Governing Board	D	8,690	7,690	−1,000
Subtotal: Assessment	.....	138,306	132,306	−6,000
Total: IES	.....	593,664	591,664	−2,000
Departmental Management				
Program Administration				
Salaries and Expenses	D	446,259	446,259	0
Building Modernization	D	0	2,211	2,211
Subtotal: Program Administration	.....	446,259	448,470	2,211
Office for Civil Rights	D	102,624	102,624	0
Office of the Inspector General	D	59,820	59,820	0
Total: Departmental Management	.....	608,703	610,914	2,211
Total: Department of Education	.....	71,234,001	71,755,150	521,149
Current Year	.....	48,637,000	49,158,149	521,149
FY14	.....	22,597,001	22,597,001	0
RELATED AGENCIES				
Committee for Purchase from People who are Blind or Severely Disabled	D	5,375	5,375	0
Corporation for National and Community Service (CNCS)				
Domestic Volunteer Service Programs				
Volunteers in Service to America (VISTA)	D	94,820	94,820	0
National Senior Volunteer Corps:				
Foster Grandparents Program	D	110,565	110,565	0
Senior Companion Program	D	46,722	46,722	0
Retired Senior Volunteer Program	D	50,204	50,204	0
Subtotal: Senior Volunteers	.....	207,491	207,491	0
Subtotal: Domestic Volunteer Service Programs	.....	302,311	302,311	0
National and Community Service Programs				
AmeriCorps Grants	D	344,348	344,348	0
Disability Placement Funds	D	0	0	0
Innovation, Assistance, and Other Activities	D	53,280	53,014	−266
Evaluation	D	2,994	3,994	1,000
National Civilian Community Corps	D	31,882	30,742	−1,140
State Commission Grants	D	15,437	15,437	0
Subtotal: National and Community Service Programs	.....	447,941	447,535	−406
Total, Operating Expenses	.....	750,252	749,846	−406
Payment to the National Service Trust	D	211,797	208,744	−3,053
CNCS, Salaries and Expenses	D	82,843	85,886	3,043
Office of the Inspector General	D	3,992	5,400	1,408
Total: Corporation for National and Community Service	.....	1,048,884	1,049,876	992
Corporation for Public Broadcasting				
Budget Year +2 (Current Request)	D	445,000	445,000	0
Budget Year +1	NA	(445,000)	(445,000)	0
Budget Year	NA	(444,159)	(445,000)	(841)
Federal Mediation and Conciliation Service	D	46,163	46,163	0
Federal Mine Safety and Health Review Commission	D	17,604	17,000	−604
Institute of Museum and Library Services	D	231,954	231,954	0
Medicaid and CHIP Payment and Access Commission	D	5,989	7,500	1,511
Medicare Payment Advisory Commission	TF	11,778	11,778	0
National Council on Disability	D	3,258	3,258	0
National Health Care Workforce Commission	D	0	0	0
National Labor Relations Board	D	278,306	278,306	0
National Mediation Board	D	13,411	13,411	0
Occupational Safety and Health Review Commission	D	11,667	11,667	0
Railroad Retirement Board				
Dual Benefits Payments Account	D	50,904	45,000	−5,904
Less Income Tax Receipts on Dual Benefits	D	−2,000	−3,000	−1,000

FY 2013 LABOR, HEALTH AND HUMAN SERVICES, EDUCATION AND RELATED AGENCIES APPROPRIATIONS—Continued

[$ in 000s]

		FY 2012 Comparable	Harkin Aendment	Harkin Amendment versus FY12*
Subtotal: Dual Benefits	.....	48,904	42,000	−6,904
Federal Payment to the RR Retirement Account	M	150	150	0
Limitation on Administration	TF	108,649	111,149	2,500
Inspector General	TF	8,155	8,155	0
Social Security Administration				
Payments to Social Security Trust Funds	M	20,404	20,402	−2
Supplemental Security Income				
Federal benefit payments	M	47,557,000	54,245,000	6,688,000
Beneficiary services	M	47,000	0	−47,000
Research and demonstration	M	7,998	17,000	9,002
Administration	D	3,611,552	4,061,552	450,000
Subtotal: SSI program level	.....	51,223,550	58,323,552	7,100,002
Less funds advanced in prior year	M	−13,400,000	−18,200,000	−4,800,000
Total: SSI, current request	.....	37,823,550	40,123,552	2,300,002
New advance, 1st quarter, FY12	M	18,200,000	19,300,000	1,100,000
Limitation on Administrative Expenses				
OASDI Trust Funds	TF	5,320,028	4,870,028	−450,000
HI/SMI Trust Funds	TF	2,089,794	2,089,794	0
Social Security Advisory Board	TF	2,146	2,146	0
Acquisition Workforce Capacity & Capabilities	D	0	0	0
SSI	TF	3,123,576	3,573,576	450,000
Subtotal: Regular LAE	.....	10,535,544	10,535,544	0
Program Integrity Funding:				
OASDI Trust Funds	TF	268,076	268,076	0
SSI	TF	487,976	487,976	0
Subtotal: Program Integrity Funding	.....	756,052	756,052	0
SSI User Fee Activities	D	153,596	170,000	16,404
SSPA User Fee Activities	D	998	1,000	2
Total: LAE	.....	11,446,190	11,462,596	16,406
Office of Inspector General				
Federal Funds	D	28,887	28,887	0
Trust Funds	TF	73,396	75,396	2,000
Total: Office of Inspector General	.....	102,283	104,283	2,000
Federal Funds	.....	28,887	28,887	0
Trust Funds	.....	73,396	75,396	2,000
Adjustment: Trust fund transfers from general revenues	TF	−3,611,552	−4,061,552	−450,000
Total: Social Security Administration	.....	63,980,875	66,949,281	2,968,406
Federal funds	.....	56,227,435	59,643,841	3,416,406
Current year	.....	38,027,435	40,343,841	2,316,406
New advances, 1st quarter	.....	18,200,000	19,300,000	1,100,000
Trust funds	.....	7,753,440	7,305,440	−448,000
Total: Related agencies	.....	66,266,122	69,232,023	2,965,901
Federal Funds	.....	58,384,100	61,795,501	3,411,401
Current Year	.....	39,739,100	42,050,501	2,311,401
2013 Advance	.....	18,200,000	19,300,000	1,100,000
2014 Advance	.....	445,000	445,000	0
Trust Funds	.....	7,882,022	7,436,522	−445,500
Emergency Appropriations	.....	0	0	0

I yield the floor.

The PRESIDING OFFICER. The Senator from Maryland.

Ms. MIKULSKI. Madam President, I wish to speak on the bill and comment on the amendment.

First of all, I want to say to the Senator from Iowa how much I admire him and the fantastic job he has done on behalf of the poor, people who didn't have health care, and the disabled people who had no voice in Washington. I want the Senator to know I am so sorry he is retiring. I really am. The Senator is neither shy nor retiring in the leadership role he played and the very pragmatic solutions he came up with over the years.

If I may ask, how long has the Senator chaired the subcommittee on Labor-HHS?

Mr. HARKIN. Before I respond specifically to the question, let me also state how proud I am of the Senator from Maryland and her long service, now the longest serving woman in the history of the Senate, and her devotion to the underprivileged, to those who lack a voice and a vote in the Senate. There is no one stronger for them than the Senator from Maryland.

It has been a pleasure of mine to work with the Senator through all these years. I can honestly say I don't remember any time we have ever disagreed on anything.

Ms. MIKULSKI. The Senator is correct. If I might comment back, we sound like two war horses at the VFW Hall. The next thing, if it wasn't prohibited, we would be doing shooters on the Senate floor.

Mr. HARKIN. I appreciate the Senator's sentiments. One of the things which makes me feel comfortable about retiring is knowing this committee is left in good hands, and I mean that, really good hands.

To answer the Senator's question, I have been either chair or ranking member of this subcommittee since 1989. When the Democrats were in charge I was chair up until 1995, and then Senator Specter was chair from then until 2001. Following that, I became chair for about a year and a half or two. It went back to Republicans, and I picked it back up again in 2007. Since 1989, I was chairman or ranking member of the subcommittee.

Ms. MIKULSKI. This would be, in 2014, essentially the Senator's diamond jubilee, 25 years.

Mr. HARKIN. Yes.

Ms. MIKULSKI. We could exchange a lot of things about diamonds, but that would be quite a benchmark.

This is what I am going to say: What we would like to do is return to regular order where the Senator could have brought his bill to the floor all by itself—not in the midst of a threat of a showdown, shutdown, lockdown. He could have brought it up with his ranking member. Now you have the Senator from Kansas, Mr. MORAN, and we have open, public debate, transparent, going through category after category: education, special education, funding for the National Institutes of Health, the Department of Labor, all of those things.

The Senator's subcommittee is one of the most robust, other than defense, and second in size in expenditure. It funds the entire Department of Labor, the entire Department of Education, and the entire Department of Health and Human Services. Under that, there are spectacular agencies and independent agencies, such as the Social Security Administration, which is literally headquartered in my hometown of Baltimore.

It has, I would say, 40 percent of the domestic expenditures which meet compelling human need. It also funds the kinds of programs we need for the workforce of the future and our research of the future.

The Senator deserves to have his day. Anyone who wishes to analyze it, scrutinize it, amend it, improve it from both sides of the aisle should do this.

I say to my colleague, what I want to do is get this bill through this Senate, working with my colleague Senator SHELBY, who has been my ranking member over the years and who is so well versed on the agreement. Essentially, the ideal situation would have been regular order where we would have passed our bills before October 1. You could have been on the Senate floor.

Now we are in something called a continuing resolution where the entire Federal Government is in one package. Everybody is trying to parse it, understand it, and they should. This is not the way to govern. We shouldn't be threatened with these deadlines and kind of an ultimatum-type situation.

We are going to try to do the best we can. The Senator has made his point and done it robustly. He produced a great bill, along with Senator SHELBY, in terms of coming out of the subcommittee, and then fashioned it. It is not only great on content, policy, but it has the sense of receiving value for the dollar as well and keeps an eye on that.

At the same time, we were able to fashion a bipartisan agreement, but you couldn't move the bill. Here we are now into this larger issue. My job is to get this bill through the Senate, working with Senator SHELBY. This is our job.

I am going to say to Senator HARKIN and to all Members on both sides of the aisle, we need to get back to regular order. We can't be doing big bills nobody understands, that everybody is suspicious of. We need to be able to do this the way the founders of the Appropriations Committee wanted us to, committee by committee, out in the open, with full and open debate where we could focus on the content. When we bring Commerce-Justice-Science, we can focus on the Justice Department, focus on Federal law enforcement, and focus on science programs.

We can look at Labor-HHS, which has such an enormous labor impact on our economy and an impact on the future of our economy. Remember, research and development, the workforce of the future, through education, Pell Grants, are all of the great things on this bill.

As the Senator proposes this amendment and the Senate works its will on this amendment, I want to say get the job done. Let's get the bill passed and then let's solve the sequester problem, which has a Draconian shield hold over us. Let's get rid of brinkmanship, shutdown, showdown politics.

Let's return to our regular order where we may produce bills, debate them in the full sunshine of the Senate—and not only do a good job, but the American people can understand what we are doing. There aren't just views on policy. This is America. That is what a democracy is and what a parliamentary body is. We should be able to bring process and procedure. This means following a regular order with our legislation.

I thank the subcommittee chairman, Senator HARKIN, for his advocacy in the last 2 years. He and Senator SHELBY worked together to produce a great bill. We are where we are, and I hope we do all we can to pass the bill and return to regular order.

The PRESIDING OFFICER (Ms. HEITKAMP). The Senator from Alabama.

Mr. SHELBY. Madam President, I would be remiss, while we are on the Senate floor, as I was thinking about Senator HARKIN, Senator MIKULSKI, both senior Members—she is the chairperson of the Senate Appropriations Committee where I have had the privilege to serve a number of years. We all go back to our House days. That is where I first met Senator HARKIN. He was a couple of years younger then, and so was I. Senator MIKULSKI and I were on the same committees over there. Senator HARKIN came to the Senate a couple of years before we did. We have been involved together on the issues and against each other and so forth, but we stayed friends. And I think Senator HARKIN is absolutely right. Senator MIKULSKI is very on point on regular order; that what we are trying to do on the Appropriations Committee—and this is a big start here—is to go back to the way we used to do things—regular order. We would have our spirited debates—and they were spirited—in the subcommittees of Appropriations, the full committee would come to the floor, and we would debate it, vote on it, and go to a conference with the House, work it out, come back, and live with it. We haven't done that in a long time. What we are trying to do now is get back on that track, and this is a big first step.

Having said that, I would like to take just a few minutes to speak on Chairman HARKIN's amendment. I believe there are three critical points my colleagues should understand about this amendment. First, the draft omnibus that has been talked about was never finalized. There were more than a dozen significant items not agreed to at the time negotiations ended in December. A lot of those negotiations were done at the staff level. Critical decisions regarding health care, education, and labor policies and billions of dollars in funding decisions at that point remained undecided. They were never finalized.

I think these provisions have been decided and put in this amendment without consultation by Senator HARKIN. These items included such critical issues as conscience protections for health care providers and provisions limiting the job-killing rules by the National Labor Relations Board. Those were critical issues for us.

Second, the Harkin amendment replaces a bipartisan continuing resolution which the distinguished chairperson has been talking about here for 2 days which includes key provisions in this bill we filed which would support research at the National Institutes of Health and emergency operations at the Centers for Disease Control with a 160-page bill that no Republican has approved. I believe the Harkin amendment both begins new programs and makes authorization changes to programs.

In addition, any program that did not receive an increase in funding during negotiation on the draft omnibus that he has talked about is cut in an across-the-board cut. These reductions hit critical job-training programs and funding for hospital preparedness.

Finally, if the Harkin amendment is agreed to, it will undo a very fragile consensus and poison the entire continuing resolution we have put before us, putting our government at the risk of a shutdown. None of us want that. House leadership has already stated they cannot and will not support the inclusion of the Harkin amendment, and I don't believe we should risk funding the entire Federal Government to do so.

Madam President, I yield the floor.

The PRESIDING OFFICER. The Senator from Iowa.

Mr. HARKIN. Madam President, I want to respond to my friend from Alabama, and he is my friend, and he knows that very well. We have traveled

together. Our spouses are friends, and he is a dear friend of mine. We have worked together, as he said, going clear back to our House days. But I am disappointed that my friend opposes this amendment. If there is one thing that has been clear in my association with the Senator from Alabama through all these years, I think it is that he has been an unrelenting champion of NIH research. I am told the University of Alabama at Birmingham ranks 11th in terms of NIH funding. That is even higher than the University of Iowa, by the way.

So my amendment, as my friend knows, would put in a $211 million increase for NIH funding that goes around the country. It doesn't just go to Maryland, although some goes to Maryland, but a lot goes around the country. So this does that.

Then I would say to my friend from Alabama, during the negotiations from last year, the Senator from Alabama offered an amendment during our full committee markup—that was last July—that would require the Department of Labor to delay both the wage rule and the comprehensive rule regarding H–2B visas. I opposed the amendment, but I included it because it was, again, part of a bipartisan, bicameral agreement.

The Senator is right that this agreement was never signed off on high—I guess by the Speaker of the House or the majority or minority leader here in the Senate—but usually they have been very accommodating if the Appropriations Committee agrees and we all agree on what is called the four corners: the Republican House, the Democratic House, the Republican Senate, and the Democratic Senate. Basically, we would move those bills.

So, again, this amendment that was offered by my friend from Alabama that would require the Department of Labor to delay both the wage rule and the comprehensive rule regarding H–2B visas is in this amendment, even though I oppose it, because it was part of a bipartisan agreement. The only way this provision can take effect is by approving my amendment because it is not in the CR. Since my friend from Alabama offered this amendment, I think he considered it to be important, he fought for it, but it won't take effect in a CR.

I would also remind my friend and others that the cost of this amendment is the same as in the underlying substitute.

My friend said there were other things in the bill in December that were not finalized. That is true, I say to my friend. That is very true, there were other things. But these were called riders. Some were Republican riders, some were Democratic riders. Are they in this bill? No, because they weren't agreed to. They were there, but they were never agreed to—and for good reason. Some of them were, obviously, very closely held by Democrats and some very closely held by Republicans, so there just wasn't agreement.

I am just saying that in the amendment now before us are the things on which we did agree. So the Senator is right. Some of the things that were out there on the riders we didn't include because they simply were not agreed to in December. I am just saying that what is in this bill is what we did agree to in December.

With that, I yield the floor, and I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

The PRESIDING OFFICER (Mr. BROWN). The Senator from Louisiana.

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

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. VITTER. Mr. President, I ask unanimous consent to speak as in morning business for up to 20 minutes.

The PRESIDING OFFICER. Without objection, it is so ordered.

EPA

Mr. VITTER. Mr. President, this week, March 10 to 16, has been designated Sunshine Week. What better time for it this year since President Obama has a brandnew nominee to head the Environmental Protection Agency, and that agency is in desperate need of sunshine and transparency. In the midst of Sunshine Week, I wanted to talk about these very serious issues.

First of all, let's go back a little bit. The first day President Obama took office in 2009, the White House Web site declared that his administration would become ''the most open and transparent in history.'' The President issued high-profile orders pledging ''a new era'' and ''an unprecedented level of openness'' across the Federal Government. Those are great goals and great aspirations. Unfortunately, the record—particularly, as I said, at the EPA—is a lot different.

President Obama's EPA has earned a reputation for ignoring congressional information requests, ignoring and frustrating FOIA—the Freedom of Information Act—hiding elite e-mails, which is completely contrary to EPA policy, and hiding other important information from the public. Is it in desperate need of a new leader who will reverse these antisunshine, antitransparency practices and build a true culture of transparency and openness. Unfortunately, President Obama's nominee, Gina McCarthy, comes from inside the very troubled agency and she has been directly involved in many of these problem areas. That is why I think we need to talk about these concerns.

I wish to go through four important categories where the EPA—including during Gina McCarthy's service—has exhibited a complete lack of transparency. It has been exactly the opposite of sunshine, openness, and transparency.

First of all, e-mails and the growing e-mail scandal. A lot of the EPA's troubles have surfaced through their dubious e-mail practices, e-mail practices that have been used, in my opinion, clearly to circumvent transparency laws such as FOIA and to circumvent congressional oversight. We have uncovered the use of alias e-mail accounts and private e-mail accounts to conduct official agency business.

What is the issue there? The issue is that clearly this is a way to avoid transparency, avoid these being produced through FOIA requests, and try to avoid producing these important e-mails when Congress has asked for them and to keep the public and Congress in the dark.

The most infamous example of this is Lisa Jackson, the former EPA Administrator's complete disregard for transparency through her Richard Windsor e-mails. Richard Windsor was an alias. I think, clearly in my opinion, she used this alias when it came to openness and producing documents, et cetera, that this was not necessarily her.

As it turns out, multiple EPA officials have been conducting business through aliases or through private e-mail accounts, and these private e-mail accounts are absolutely prohibited by the EPA. In spite of that, we have uncovered a pattern. This is not an isolated incident. It is not just Richard Windsor who has been used as an alias, but there is a pattern. The Acting Administrator, Bob Perciasepe, has used an alias private account. Region 8 Administrator Martin used me.com, a private account; Region 9 Administrator Blumenfeld used comcast.net, a former account; former Deputy General Counsel Yang, a lawyer for the EPA, used a gmail.com account. That is completely contrary to the clear rules of the EPA.

It doesn't stop with the use of these completely improper private e-mail accounts for official business. We have also uncovered high-level officials collaborating with environmental groups to push their biased agenda. Administrator Martin—since he resigned over all this when we had this come out—regularly communicated with far-left environmental groups such as the Environmental Defense Fund on his personal e-mail account to circumvent Federal transparency laws. His personal e-mails, which we have since gotten, exposed the EPA's efforts to further bury coal plants under crushing regulations.

Again, this is not just some technicality. These private accounts and aliases were clearly used to hide stuff from Congress, hide stuff from the public, and to try not to disclose all this collusion with outside environmental groups and what—in my opinion—is a far-left agenda.

Another very important category is FOIA. FOIA is the Freedom of Information Act. It was passed into law by Congress in 1966. It was passed for a very simple purpose: to direct sunshine onto the Federal Government. Here we

are in the middle of Sunshine Week, and FOIA is a classic example of an important tool to direct sunshine onto the Federal Government.

Under former Administrator Jackson's leadership, FOIA has become a joke at the EPA. Al Armendariz, the former EPA Administrator, had to resign after claiming it was EPA's policy to ''crucify'' domestic businesses. He actually called FOIA ''nonsense.'' As others at the EPA would try to have others think, Al Armendariz was not some rogue EPA official. In fact, this is the general attitude of the EPA.

The Obama administration again has tried to get away with the claim that they are ''the most transparent in history.'' Yet as the Associated Press has reported, they sometimes produce a lot of pieces of paper under FOIA, but ''more often than it ever has, it cited legal exceptions to censor or withhold the material, according to a new analysis.''

This is a perfect example. This is a document produced under a FOIA request. It is one of the infamous Richard Windsor e-mails. Guess what is produced. Nothing. It is one thing to redact a few words or a particularly sensitive sentence. They have produced absolutely nothing. There is not a single word from the body of the e-mail. This is routine. The EPA has regularly mismanaged FOIA requests. It is clearly in the business to frustrate these sorts of requests and not to follow the law.

I would like to show some other examples. Again, these are produced e-mails. Most of them are from the infamous Richard Windsor e-mails. Again, not a word in the body of any of these e-mails is produced. There is not a single word. This is another good example. There is not a single word produced. So we get plenty of paper, but what information do we have for the public? Nothing.

There is something else that is particularly outrageous. We have an e-mail that was produced from the Office of General Counsel to Region 6 officials. That e-mail talks about standard EPA protocol regarding FOIA requests. It is not about a particular FOIA request, which might be overbroad, inappropriate, and might have arguments against it. Again, this e-mail is from the EPA lawyers to an EPA region, and it is about how to deal with FOIA in general. That standard EPA protocol—according to this e-mail—is ''to alert the requestor that they need to narrow their request because it is overbroad, and secondarily that it will probably cost more than the amount of money they agreed to pay.'' Then when the requestor doesn't immediately respond to that, they just shut down any EPA response.

Again, this is outrageous. This was not a response to a particular request. This was the advice from EPA lawyers about how they should always consider responding. Just always say it is overbroad, just always say it is going to cost more money, and then shut things down, foot drag, and obstruct. That is absolutely ridiculous.

A third important category in this pattern of activity is EPA's use of secret data. This EPA, more than any other in history, has been promulgating rules and regulations which have a dramatic effect on major sectors of our economy. Obviously, this is a big deal and big concern, particularly when it costs us jobs or potentially shuts down businesses. Yet the EPA has been completely opposed to releasing any of the numbers, the science—the alleged science—and the data behind these decisions.

Again, many of EPA's regulations have big pricetags. Yet EPA refuses to publicize the basic scientific data underlying virtually all of what they have done. The new Clean Air Act rules are the biggest example. Implementing the Clean Air Act happens to be the responsibility, by the way, that Gina McCarthy has been directly overseeing since June of 2009.

The National Ambient Air Quality Standards, for example, are complex and sweeping in their nature. The law requires, as it should, that they be based on sound scientific data and that it be implemented through a robust decisionmaking process. Unfortunately, that has not been the case and recent standards have suffered from a rushed process, reliance on secret data, and biased scientific review.

The only way we can fully know what is going on and have a discussion about this is if EPA releases the underlying scientific data—the underlying numbers. I have personally asked for this. In fact, this request is 20 months outstanding. I asked for it almost 2 full years ago. Yet EPA has adamantly refused.

Recently, it has come to light that EPA fails to complete comprehensive economic analyses of a majority of its rules. A February 2013 study reveals that the Agency's disregard for economywide impacts, as well as any other discrete negative impacts, renders their cost-benefit analyses to be misleading and based on manipulated data. Again, this is a very important category.

If sunshine is to mean anything, if it is to have any real meaning as we stand here in the midst of Sunshine Week, we need to see the data behind these enormously important decisions. EPA cannot use secret data. That is contrary to the letter and spirit of the law. It is certainly contrary to the public having access to important information and to our responsibility in Congress on oversight.

The final category I wish to mention is the so-called unified agenda. Under Federal law, every agency is required to produce their regulatory agenda. In fact, they are required to produce it under law twice a year—once in the spring and once in the fall, and that is called the unified agenda. Again, every agency is required to produce that to the Office of Information and Regulatory Affairs.

The problem is this requirement is observed sort of like the requirement to pass the budget is observed in the Senate. In 2012, the EPA was 8 months late producing their spring 2012 regulatory agenda, and they have yet to submit their fall 2012 regulatory agenda. Again, I have asked EPA directly about this. More than 6 weeks after the deadline passed, EPA has yet to respond to the simple question of when they will submit their spring and fall regulatory agendas. We have not seen a bit of either of them yet.

This is important because it is about sunshine, openness, and transparency. It is about being fair and open to the American people and giving the American people—including through its representatives in Congress—full information. This is an important area that the nominee to head the EPA, Gina McCarthy, has to address. It is awfully basic and legitimate to say to Gina McCarthy: If you want to become the new EPA Administrator, you will need to answer these big, obvious, and pertinent questions. It is particularly important since you come from inside this very troubled, completely nontransparent agency and have been at the heart of many of these troubling areas.

One thing I will question her directly on is her active coordination with Al Armendariz, whom I mentioned earlier, in shutting down key energy projects. That direct coordination was highlighted in an e-mail we did get from Armendariz celebrating the death of a petroleum coke plant in Texas. Armendariz wrote in that e-mail: ''Gina's new air rules will soon be the icing on the cake.'' Shutting down jobs, shutting down American businesses is going to be the icing on the cake.

In conclusion, I want to underscore that President Obama's EPA, unfortunately, has been the worst example of how hollow his promise is of being the most open and transparent administration in history. As we begin to consider the confirmation of a new EPA Administrator, this needs to be a big focus of our attention. Surely she needs to commit in very concrete and specific ways to change this culture. I am concerned that she has been part of this culture. She comes from inside the agency. She is directly involved in many of these very troubling areas. So we need to hear how she is going to reverse this culture and usher in a new era of openness and transparency. I will have specific requests for her that will allow her to prove that commitment, and I know many other Members of the Senate have similar concerns.

I look forward to that discussion with Gina McCarthy. I look forward to continuing this discussion with the entire U.S. Senate. Transparency Week is an important time and an appropriate time to start that important discussion and to end these abusive practices by the current EPA.

Thank you, Mr. President. I yield the floor.

Ms. MIKULSKI. Mr. President, I note the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The bill clerk proceeded to call the roll.

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

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. TESTER. Mr. President, I rise today to speak about the continuing resolution before the Senate to fund the government and keep this country moving forward. This is a very difficult assignment that they have been handed, especially as we have a brandnew chair and ranking member.

The bill increases support for firefighters battling blazes out West. That is very good. It maintains a critical safety net for women and children. That is very good. It returns full funding to several critical conservation programs and reaffirms our commitment to veterans, especially rural veterans—all very good. I thank Senator JACK REED and Senator TIM JOHNSON in particular for their efforts in those areas.

But while no bill is perfect, I am deeply—deeply—disappointed by two provisions that were slipped into this bill by the House of Representatives when this deal was being cooked up in December.

This is Sunshine Week for the Federal Government. It is a time to highlight the need for greater transparency and openness so voters can hold their elected leaders accountable and for what happens here in Washington, DC, and to just know what is going on.

I take transparency seriously. When I first ran for the Senate 7 years ago, I campaigned on the need to bring more accountability and honest leadership to Washington, DC. My first vote in this body was for a sweeping ethics bill that, among other provisions, improved disclosure rules and reformed the earmark process so that everybody would know which Member or Members of Congress requested an earmark, and it required Members to certify that they and their families had no financial interest in that earmark.

Under regular order, folks had a chance to come down to the floor and try to remove earmarks they did not like. In fact, a few years ago I remember former Senator Jon Kyl and I had a pretty good debate on this floor about an important project for the city of Whitefish, MT. So we debated it, and we took a vote on it in the Senate.

That is why I am so upset by two agriculture-related provisions that someone from the House of Representatives put into this bill—and that the Senate seems willing to accept. I do not know who authored this provision. Maybe someone in Washington knows, but no one is willing to put their name on it, and that is a shame. It is a shame that folks who get so bent out of shape about earmarks do not seem to be troubled by these provisions.

Montana is home to thousands of working families who make a living off the land. Like my wife and me, they are family farmers and ranchers. The House of Representatives is prepared to toss those working families aside in favor of the Nation's large meatpacking corporations. The House inserted a provision in the bill that gives enormous marketing power to America's three largest meatpacking corporations while stiffing family farmers and ranchers.

Family-run production agriculture faces tremendous market manipulation. Chicken farmers, hog farmers, and cattle ranchers all struggle to get a fair price from the meatpackers, and if they fight back, they risk angering corporate representatives and being shut out of the market. Thanks to this provision, the Agriculture Department will not be able to ensure a fair, open market that puts the brakes on the worst abuses by the meatpacking industry.

What is worse is that the USDA took congressionally mandated steps to protect ranchers from market manipulation over the last few years. That is what we told them to do in the 2008 farm bill. This provision will actually overturn rules the USDA has already put into place. But apparently intense, behind-the-scenes lobbying won out in the House of Representatives, and now we are back to square one with the big meatpackers calling the shots.

The second provision sent over from the House tells the USDA to ignore any judicial ruling regarding the planting of genetically modified crops. Its supporters are calling it the ''farmer assurance'' provision, but all it really ensures is a lack of corporate liability.

The provision says that when a judge finds that the USDA approved a crop illegally, the Department must reapprove the crop and allow it to continue to be planted—regardless of what the judge says.

Let's think about that. The U.S. Congress is telling the Agriculture Department: Even if a court tells you that you failed to follow the right process and tells you to start over, you must disregard the court's ruling and allow the crop to be planted anyway.

Not only does this ignore the Constitution's idea of separation of powers, but it also lets genetically modified crops take hold across this country even when a judge finds it violates the law. Once again, agribusiness, multinational corporations are putting farmers as serfs. It is a dangerous precedent. It will paralyze the USDA by putting the Department in the middle of a battle between Congress and the courts.

The ultimate loser will be our family farmers going about their business in feeding America in the right way. Sunshine Week should not be show and tell. Slipping corporate giveaways into a bill at the same time that we call for more open government is doubling down on the same policies that created the need for Sunshine Week. That is why we need to remove those corporate welfare provisions from the bill.

Montanans elected me to go to the Senate to do away with these shady backroom deals, to get rid of handouts to big corporations, to make government work better. We still have many challenges in front of us. I commend the leaders of the Appropriations Committee for their commitment to working together to bring us a plan on which we can vote.

These two provisions undermine our good work to support family farm agriculture. These provisions are giveaways, pure and simple, and will be a boon worth millions of dollars to a handful of the biggest corporations in this country. They deserve no place in this bill. We simply have to do a better job on both policy and process.

I know Chairwoman MIKULSKI is committed to doing better. I strongly support her efforts. I wanted to thank her for that commitment. But we ought to start right here and now by striking those corporate giveaways.

I yield the floor and I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The assistant bill clerk proceeded to call the roll.

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

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. MCCAIN. Mr. President, I ask unanimous consent to set aside the pending amendment and call up amendment No. 33.

The PRESIDING OFFICER. Without objection, it is so ordered.

Ms. MIKULSKI. Would the Senator withhold?

Mr. MCCAIN. I yield to the chairwoman.

Ms. MIKULSKI. First of all, I know the Senator has been waiting patiently to file his amendment. I have been waiting patiently for him to be able to do it. As I understand it, we are trying to negotiate a sequence to vote on the Harkin amendment and for the Senator to be able to offer his amendment as promptly as swiftly as we can.

Mr. President, I suggest the absence of a quorum without violating the Senator's rights.

The PRESIDING OFFICER. Without objection, it is so ordered.

The clerk will call the roll.

The assistant bill clerk proceeded to call the roll.

Mr. MCCAIN. I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

AMENDMENT NO. 33 TO AMENDMENT NO. 26

Mr. MCCAIN. I ask unanimous consent to set aside the pending amendment and call up amendment No. 33.

The PRESIDING OFFICER. Without objection, it is so ordered.

The clerk will report.

The assistant bill clerk read as follows:

The Senator from Arizona [Mr. MCCAIN] proposes an amendment numbered 33.

Mr. MCCAIN. I ask unanimous consent that the reading of the amendment be disposed with.

The PRESIDING OFFICER. Without objection, it is so ordered.

The amendment is as follows:

(Purpose: To strike certain authorities relating to the use for grants of funds of the Office of Economic Assistance of the Department of Defense)

Strike section 8039, relating to the use for grants of funds of the Office of Economic Assistance of the Department of Defense.

Strike section 8104, relating to the use of funds of the Office of Economic Assistance of the Department of Defense for grants for Guam.

Mr. MCCAIN. I come to the floor to talk about amendment No. 33, which would strike sections 8104 and 8039 of the bill. It is a pair of Guam earmarks that directly contravene the explicit directions provided by the Armed Services Committees of the Senate and the House of Representatives in the conference report on the fiscal year 2013 National Defense Authorization Act.

Congress has not yet received a sufficient cost analysis of the proposed movement of the troops from Okinawa to Guam. Because of that, and the whole operation of these troops from Okinawa to Guam has still not been decided, the Armed Services Committees of the House and Senate explicitly prohibited this type of premature investment in civilian infrastructure.

At a time when the Department of Defense is facing the impact of sequester, on top of the $487 billion in cuts directed by the President, it is appalling and disgraceful that the authorizing language would be directly circumvented by the authorizers.

I want to read the language for my colleagues' benefit. After hours and hours of hearings, of amendments, of markup, of 3 weeks on the floor of the Senate, the product stated:

Restriction on development of public infrastructure. If the Secretary of Defense determines that any grant, cooperative agreement, transfer of funds to another Federal agency, or supplement of funds available in fiscal year 2012 or fiscal year 2013 under Federal programs administered by agencies other than the Department of Defense will result in the development (including repair, replacement, renovation, conversion, improvement, expansion, acquisition, or construction) of public infrastructure on Guam, the Secretary of Defense may not carry out such grant, transfer, cooperative agreement, or supplemental funding unless specifically authorized by law.

So here is clear language of the National Defense Authorization Act directly contradicted by this continuing resolution. What in the world is the job of the authorizers if it is not to have the language adhered to? At a time when the Department of Defense is facing the impact of sequestration, on top of $487 billion in cuts already directed by the President, the appropriators decided that we would spend $140 million on Guam. It is absolutely unbelievable, I say to my colleagues.

Now, let me tell my colleagues about the effect of the sequester that has happened now. According to this line item in the appropriations bill, it will spend $140 million on a wastewater treatment plant on Guam and another project. So we are going to spend $140 million on that.

Meanwhile, I say to my colleagues, here is what has already happened, with the sequester to the Armed Forces. The Army: Cancels four brigade exercises at the National Training Center or Joint Readiness Training Center. The Army: Reduced base operations by 30 percent; cancels half the year of helicopters and ground vehicle depot maintenance; stops post-war repair of 1,300 vehicles and 17,000 weapons; reduces readiness of 80 percent of the Army's nondeploying brigades; stops tuition assistance for all Active and Reserve soldiers.

Navy: Cancels several submarine deployments; reduces flying hours on deployed carriers in the Middle East by 55 percent; steaming days by 22 percent; reduces Western Pacific deployed operations by 35 percent; nondeployed Pacific ships lose 40 percent of steaming days; reduces Middle East Atlantic MED ballistic missile defense patrols; shuts down all flying for four of nine carrier air wings 9 to 12 months to restore normal readiness at two to three times the cost; cuts all major naval exercises; defers emergent repairs; cancels Blue Angels shows in third and fourth quarter; USS Truman carrier deployment delayed indefinitely.

I might say that deployment was to the Middle East where the centrifuges are spinning. The USS Eisenhower career deployment extended indefinitely; USS Nimitz and USS Bush carrier strike groups will not be fully ready for scheduled fiscal year 2013 deployments.

Air Force: Likely prevent Air Force's ability to achieve the 2017 goal of being fully auditable; defer nonemergency facility requirements; reduce repairs by 50 percent over 420 projects at over 140 installations across the Air Force; affects runway repairs and critical sustainment projects; delays planned acquisition of satellites and aircraft, including JSF and AC–130J, which will increase the future cost of these systems; reduces flying hours for cargo, fighter and bomber aircraft; stops tuition assistance for all Active and Reserve airmen.

Marine Corps: I hope my colleagues will listen to this. The Commandant of the Marine Corps says:

By the end of this year, more than 50 percent of my combat units will be below minimal acceptable levels of readiness for deployment to combat.

I repeat. The Commandant of the Marine Corps says:

By the end of this year, more than 50 percent of my combat units will be below minimal acceptable levels of readiness for deployment to combat.

Unable to complete rebalancing of Marine Corps forces into the Asia Pacific region; will cause 55 percent of the U.S. Marine Corps forces to have unsatisfactory readiness ratings; 50 percent of the U.S. Marine Corps aviation squadrons will fall below ready-to-deploy status; U.S. Marine Corps will not be able to accomplish planned reset of equipment returning from overseas expeditionary forces; depot level maintenance will be reduced, delaying resettability by 18 months and reducing nondeployed forces; facilities sustainment will be funded at 71 percent of requirement, reducing effectiveness of home station training and quality of life.

These are the effects of sequestration. So what do they do? What do they do in the continuing resolution? They add $140 million for Guam for a wastewater treatment plant. Talk about divorced from reality. Talk about insensitivity to the men and women who are serving this country. I am already beginning to hear from them, I will tell you that.

There are a lot of bright young men and women who are serving this country, are serving it with courage and skill and are the best probably we have ever seen. I am hearing from their leaders. They are making decisions about whether to stay in the military. It is an All-Volunteer Force. I can tell you what a lot of them are deciding when they see something as ridiculous as this, and there are other outrageous and stupid things in this bill.

While all of the things are taking place in the Air Force, the Army, and the Marine Corps, we are now on this list—we have $5 million—they are adding money, adding money, adding millions. In fact, it comes up to billions—$5 million for the National Guard Youth Challenge Program, $5 million for the Department of Defense Star Base Youth Program, $154 million for an Army, Navy, and Air Force ''alternative energy resource initiative,'' $18 million for unspecified ''industrial preparedness,'' $16 million for Parkinson's disease research—there is a whole bunch in here for medical research. They are taking it out of defense. I am for research in all of these programs, whether it be Parkinson's or neurofibromatosis or HIV/AIDS research, but they are taking it out of defense.

They are adding $9 million for unspecified radar research, $20 million for university research initiatives, $7 million for a Civil Air Patrol Program increase, $45 million for Impact Aid. The list goes on and on and on.

While the Air Force is unable to fly, the Civil Air Patrol will get an additional $15 million. I am a great admirer of the Civil Air Patrol.

The fact is that what we are doing is we are cutting the flying hours and affecting the readiness of the men and women who are serving in the military

in this country. I repeat a statement of the Commandant of the Marine Corps: By the end of this year, ''more than 50 percent of my combat units will be below minimal acceptable levels of readiness for deployment to combat.'' What did these appropriators do? They put in $140 million for wastewater treatment on Guam, which is expressly prohibited by the National Defense Authorization Act.

I have been on this floor for many years fighting against what I believe is encroachment by appropriators on the authorizers' business. I have never, in 26 years as a member of the defense appropriations committee and the Armed Forces committee, seen anything quite as egregious as this.

I say to my colleagues, who are authorizers and not appropriators, if you let them get away with directly violating and contradicting the express language of the National Defense Authorization Act, you are next. You are next. This is unacceptable. I hope my colleagues will vote on the issue of whether we need to spend this money, particularly at this moment, with the condition of our military.

Many of our constituents say: Why is this being so hard hit? Why is the military being so hard hit?

They don't quite understand sequester—this thing the President said won't happen. This sequester affects 19 percent of what we call the discretionary spending. They exempted about two-thirds of all of the discretionary spending and then took 50 percent of what was left of 19 percent of the spending. This has a dramatically increased effect on what we need most; that is, our national security. It is shameful.

I hope my colleagues and friends know that this Guam provision would provide, which is expressly prohibited, $120 million for a public regional health laboratory and civilian wastewater improvements. The Department of Defense wants to move marines to Guam but does not know how much military infrastructure will be needed—military infrastructure will be needed to support the move—what the implications will be to operational responsiveness in the Pacific theater or how much any of it will cost.

Over the last 2 years, the Armed Services Committee received many hours of testimony, briefings, and meetings on the troop realignment in the Pacific and directed the Center for Strategic and International Studies to conduct an independent assessment on U.S. force strategy in the region. The assessment—delivered in August 2012—recommended a better alignment of engagement strategies between the U.S. Pacific Command and the Department of Defense in order to improve our capabilities in the region and respond to a range of contingencies. The CSIS was clear in the appraisal that the Department of Defense had not adequately articulated the strategy behind its future posture planning nor aligned the strategy with resources in a way that reflects current budget realities.

After more testimony, briefings, and meetings, the Armed Services Committee acted and, through the vehicle of the fiscal year 2013 National Defense Authorization Act, prohibited the use of funds for any military realignment to Guam until the Department of Defense and the U.S. Pacific Command provided a detailed set of reports. These reports will address the plan for ensuring that any proposed force realignments in the Pacific region to include moving U.S. marines from Japan to Guam and Hawaii are supported by resources that will allow our forces to meet operational requirements. Admiral Locklear, commander of the U.S. Pacific Command, told me yesterday that these reports would be ready this summer.

The Department of Defense has planning left to do. While Congress may someday authorize some number of marines to be realigned to Guam, it will only be after we have a clear understanding of the clear implications and costs. In this context, the Appropriations Committee would fund unrequested civilian infrastructure—not military infrastructure, civilian infrastructure—far greater in scope than would be required in the event the most extreme estimates of troop realignment occurred. There is absolutely no justification for it.

This is why the Armed Services Committee expressly prohibited such funding, because we don't know how much military or civilian infrastructure we may need, if any. Has one single marine, sailor, or airman been assigned to Guam as part of the intended buildup that would justify using DOD money to rebuild Guam civilian wastewater facilities or build a new civilian health laboratory? The answer is obviously no. The support payoff to Guam to solve an already existing problem has nothing to do with any future military realignment to Guam. This is no better than last year's set of earmarks for a cultural artifacts repository.

It should be very clear by now that these expenditures pushed through in direct contravention of the bipartisan, bicameral decisions of the Armed Services Committee are a shameful waste of taxpayers' money. In my view, this is a clear example of political abuse of the appropriations process.

I could go on for a long time. In fact, instead of doing a continuing resolution, we should be doing everything we can to avoid the sequester, which has such a disastrous effect on our military.

I am sure my colleagues are aware that in Tehran the centrifuges are spinning. North Korea just had another nuclear test. They threatened to cancel the cease-fire of 1953. They are making very aggressive noises toward South Korea and, I believe, our 30,000 men and women who are stationed there. Tension between Japan and China is very high. For my colleagues' information, I am sure they know that the Chinese have increased, doubled, and redoubled their spending on their military. The Middle East is in a state of turmoil, which could lead to an international crisis almost at any moment. Seventy thousand Syrians have been slaughtered by Bashar al-Asad. There are over 1 million refugees, as that conflict shows all possibility of spreading to Lebanon and to Jordan.

What are we doing? We are imposing Draconian cuts on the U.S. military, which caused the Commandant of the Marine Corps to say 50 percent of all his combat units will be below minimal acceptable levels of readiness for deployment to combat.

I have been around this body and this Nation for a long time. I have seen this movie before. Everybody talks about war weariness. Everybody talks about how weary we are of Iraq and Afghanistan, and indeed we are. We were war weary after Vietnam. We cut the military, cut the military, and we cut the military as we are doing today. The Chief of Staff of the U.S. Army in the late 1970s came before the Armed Services Committee and said we have a hollow army. Do you know what we are doing right now with sequestration? We are hollowing out our military. To add insult to injury, we are putting on a long list of wasteful, unnecessary programs, many of which have nothing to do with defending this Nation. Some are outright pork-barrel spending.

I hope my colleagues, particularly those on authorizing committees, will understand that if the appropriators are able to directly contradict language in authorizations that are passed by both Houses of Congress and signed by the President of the United States, then you become irrelevant to the process. I don't think the 80-so of us who are not members of the Appropriations Committee should be subjected to irrelevance.

I urge my colleagues to support the amendment.

I yield the floor.

The PRESIDING OFFICER. The Senator from Maryland is recognized.

Ms. MIKULSKI. Mr. President, I wish to say the Senator who currently now chairs the Subcommittee on Defense will speak on the amendment of the Senator from Arizona. I wish to speak about the process and about sequester.

First, the Appropriations Subcommittee on Defense finished its work before the August recess. The authorizers didn't get it done until December 20. There is a gap here because Senator Inouye—a very happy, blessed, and beloved memory—moved his committee in an expeditious way, which appropriators are supposed to do.

Remember, appropriations are supposed to be done before October 1. Senator Inouye chaired the committee, chaired the full committee and then chaired this Appropriations Subcommittee on Defense. Senator Inouye did his job under the authorization that was present before him.

The authorizers didn't pass their bill until December 20. We want to respect the authorizers not only on defense but on every committee. They need to pass their bills before we pass ours. We work on our bills by holding our hearings under regular order beginning when we get the President's budget, which we wish would be up-tempo a bit. Then we start our hearings, mark up our bills in May and June, and begin to move them through the process.

Before we attack the Appropriations Committee, we should attack the process and get back to regular order, where authorizing and appropriating are in sync.

The second thing I wish to comment on is sequester. I want to acknowledge what the Senator from Arizona said about the impact of sequester. Sequester is an awful, awful, awful thing. That is not on this bill. When the Budget Committee comes up, along with the negotiations by the President with the leadership of the House, I absolutely agree with him, we must cancel sequester and ensure that not only our Defense Department but others who defend America, such as our Border Patrol guards, are not unduly harmed. And we are hollowing out, to use the quote from General Amos, an extraordinary Commandant.

What we need to do is get a process in order to have the proper policy debates.

I note that the subcommittee chairman will now comment on the specifics.

I yield the floor.

The PRESIDING OFFICER. The assistant Senate majority leader is recognized.

Mr. DURBIN. Let me thank the chairwoman of the Appropriations Committee, Senator MIKULSKI. This is her first major assignment on the floor of the Senate. It is an awesome responsibility. I note that she was not only up for this job, she was made for this job. She has the knowledge, skill, and drive we need to make sure the Appropriations Committee is playing its important historic role in the Senate.

I commend the Senator from Alabama, my friend Senator RICHARD SHELBY too. Senator SHELBY and Senator MIKULSKI have been close partners in developing a very complicated bill. This bill we are considering is going to fund the Federal Government for the remaining 7 months; otherwise, when we run out of money March 24, literally, the government will close. They are working and have worked hard for the last several weeks to get this bill ready.

A version of the bill passed the House. Now it is being considered on the floor of the Senate and Senators are being allowed to offer amendments, which is their right.

One of the Senators who just offered an amendment is Senator JOHN MCCAIN of Arizona, who is well known to virtually everyone in America as a former candidate for President and by virtue of his service to our Nation. I would say I count JOHN MCCAIN as a real friend. We came to the House of Representatives the same year. We have maintained that friendship here in the Senate. We have worked closely together on immigration reform and many other issues. I can't think of a finer Senator on the other side of the aisle.

I don't need to speak to JOHN MCCAIN's reputation when it comes to military service. We know the story: a Navy pilot shot down over Vietnam, captured and held captive, subjected to torture for more than 5 years. John's body still bears the scars of that terrible experience. Thank God he survived and continues to serve in the Senate representing the people of Arizona and the Nation in his capacity as a Senator. He has been the ranking Republican on the Armed Services Committee, so he knows those issues not only as a veteran, a man who served in the Vietnam war, but also as a Senator who has looked closely at each of the issues that affects the Department of Defense. He doesn't hold a candle to anyone, take a step back to anyone when it comes to his commitment to our military and our Nation's defense. But now it is my responsibility to come to the floor of the Senate and argue against an amendment Senator MCCAIN is offering on the Department of Defense bill. You might think to yourself: DURBIN, how did you get this assignment? The fact is, as chairman of this particular subcommittee, it is my responsibility to argue the other side of the issue that Senator MCCAIN has brought to the floor.

I come to this assignment brandnew, just a few weeks now, since the untimely passing of our great friend and national hero, Dan Inouye of Hawaii. Because of his passing, there were vacancies created, and I ended up in this position as chairman of the Subcommittee on Defense Appropriations in the Senate. It is a job I am learning, and I confess there are many here who know it better than I do. But I will do my best because I know the awesome responsibility attached to it.

I stand today to urge my colleagues to vote against the amendment JOHN MCCAIN has offered to this continuing resolution as it relates to the Department of Defense. There are basically four provisions in this—three or four provisions in the McCain amendment—and I wish to address each of them.

One of the provisions allows the Department of Defense to give grants to organizations. That sounds like a very easy thing to explain, and it is. The three organizations that receive the grants from the Department of Defense are well-known to most Americans; certainly two are—the USO is one.

The USO for decades has been an organization which has tried to provide help to our veterans, usually stationed overseas, and to give them things as basic as entertainment, to counseling, or when they go through airports to make sure they have a place to stop by and get a cup of coffee and a doughnut. That is the USO. I have understated their mission, but we are all familiar with it.

The other organization is one known to every American, I am sure, the Red Cross. The third is an organization new, but important, called Fisher House. Fisher House. Let me tell you about Fisher House.

Two years ago, I was invited to the grand opening of a Fisher House facility near the Hines VA Hospital in Chicago. Fisher House is to military and veterans hospitals what Ronald McDonald houses are to children's hospitals. What we are saying here in the underlying bill is that the Department of Defense can provide grants to these organizations—Fisher House, Red Cross, and USO. The McCain amendment says no, they can't. The McCain amendment strikes the authority of the Department of Defense to give them these grants. I think that is a mistake. And for that reason alone, I hope my colleagues will vote against the McCain amendment.

The services being provided through these organizations and at these facilities are nothing short of remarkable. Fisher House, right in the city of Chicago, near Hines VA Hospital, is a beautiful home—a place where families who have a loved one who is going through surgery or rehabilitation at the Hines VA Hospital are given a chance to stay overnight. They do not have to pay for a hotel room and they are treated like royalty, as they should be. These are military families—mothers and fathers, spouses and children, who are treated like royalty at Fisher House while they are waiting for their loved one to finish the treatment or surgery they need to come back home.

Why wouldn't we do that? Why wouldn't we provide that kind of service? The Fisher House facilities are largely built by charitable contributions, donations from everybody. So to give to the Department of Defense the ability to transfer up to $4 million a year—$4 million—to the Fisher House, why, of course, we want to do that. Across America they do such extraordinary things.

In terms of the Red Cross grants, here is what the Red Cross does, and every Member of Congress knows this. A family will call a Senator and say: Senator SHELBY, we live in Mobile, AL, and I wanted you to know the mother of a soldier overseas has just passed away and we have to get the word to him right away. What Senator SHELBY or what Senator DURBIN would do is to call the Red Cross and say: You have to help us. We have to get in touch with this service man or woman overseas somewhere. So it is an opportunity for them to use their network of volunteers and communications to reach out to that soldier, that sailor, that airman, or marine. That is what they do. They spend about $10 million in emergency communication services to keep

a hotline running connecting servicemembers, veterans, and their families with the services they offer. There is $2 million for theater support of deployed troops—emergency communication services between deployed servicemembers and their families back home.

They provide lounges, the Red Cross does, in these theaters of operation, war settings, for troops to have access to computers so they can be in touch with their families back home.

One of the big surprises I ran into as I visited our troops in Afghanistan and Iraq was to find many of them Skyping away with their families while they are far away. Some of these facilities are being provided by the Red Cross.

The list goes on and on of all that the Red Cross does to support and help our troops. But the list can't tell you in specifics what Red Cross volunteers do. These men and women—and you see them everywhere under the flag of the Red Cross—show up when a tornado hits, when a flood hits, and they always show up when our troops need a helping hand.

When our troops get off the plane in Landstuhl, Germany, after being grievously wounded or injured overseas and are about to be hospitalized—maybe facing their first surgery—one of the first smiling faces they will see will be a Red Cross volunteer, there to say: What can I do for you; can I get in touch with your family; is there something you need? The stories are legendary about soldiers who land at these bases and a Red Cross volunteer walks up to them.

I recall one story in particular about one of the soldiers who volunteered at the Red Cross who said: What do you want? And the soldier said: I need a rootbeer float. Imagine, a rootbeer float. And in a matter of 15 minutes, up pops the Red Cross volunteer with a rootbeer float. It was a small thing for that soldier, but it was an important thing.

So to say we are not going to allow the Department of Defense to provide grants to the Red Cross, the USO, or to Fisher House I think is a mistake. These are great organizations with great volunteers and they do a wonderful job day in and day out to help our troops overseas. If it were my son or daughter overseas, I would like to know the Red Cross is going to be there. I would like to know the USO is going to be there. And God forbid that we would ever need some work at a military hospital; I would like to know there is a Fisher House nearby in case a family needs it because they can't otherwise afford to stay at a hotel for a number of nights.

The McCain amendment would stop the grants by the Department of Defense to these three organizations. If it were not for the fact that such a fine man, a veteran, offered this amendment, some people might say: Why would you do that to our military servicemembers? I don't think we should.

There is also a situation that has been going on for some time regarding Guam. Guam is an important place for stationing some 16,000 marines—16,000 men and women who volunteered to serve in the U.S. Marine Corps and are stationed on Guam. It is a challenge. I have been there. It is a remote location, but important for our national security, particularly in the Pacific theater. Wouldn't we want to say to the men and women who are there in uniform that they are going to have the basics taken care of? And wouldn't we want to say that one of the basics is to make sure they have safe drinking water and wastewater treatment facilities?

Here is what we found out. We found out that on the island of Guam our 16,000 marines are in a facility that has reached the absolute limit in terms of wastewater treatment. The Department of Defense came to us and said: For these troops, we have got to build a new wastewater treatment facility. Well, of course, we do. We don't want to shortchange them or jeopardize public health in any way.

The McCain amendment would eliminate this money, $106 million in funding, for a wastewater treatment plant on Guam. This is not some frill, this is a basic. Everyone wants to believe their son or daughter, volunteering for the Marine Corps and stationed somewhere overseas, is being taken care of by our government—that the government is doing everything we can to make sure they have the basics they need to stay healthy. Well, this is one of those basics—$106 million for a wastewater treatment plant in Guam.

There is also a $13 million ask here that I think makes sense when it comes to the safety of these troops. We want to make sure there is a public health lab in Guam. God forbid these men and women in uniform, or anyone who represents the United States, is facing some biological terrorist. God forbid there is some substance being used that could endanger their lives, and God forbid we would have to rely on laboratory facilities in Atlanta, GA, if you are halfway around the world. That is where the most professional facilities are. So the Department of Defense said: Let's put a $13 million investment in a basic public health lab in Guam to protect the safety of Americans and our troops.

Look at these things. Look at what I am asking for—not for museums, not for things that may be considered frivolous and unnecessary in a given context but, rather, for the basics to support our troops in the field and to provide those who are stationed on Guam some of the most fundamental and basic public health facilities.

So it pains me to come to the floor and to resist an amendment offered by my friend Senator MCCAIN, but I do it in memory of Senator Dan Inouye, who helped write this bill, who himself was a recipient of the Congressional Medal of Honor and had a distinguished career of service in the military.

I hope my colleagues will listen carefully to this debate, and though they feel the strong positive feelings I do toward Senator MCCAIN, they will go to the merits of the issue and defeat the McCain amendment. Make sure the ability of the Department of Defense to continue to work with Fisher House, the Red Cross, and the USO is authorized in law. Let's make sure the 16,000 marines on Guam have the most basic things they need to be safe and healthy and come home just as we want them to. That is what this is all about.

I urge my colleagues to vote against the McCain amendment.

I yield the floor, and I suggest the absence of a quorum.

The PRESIDING OFFICER (Mr. BLUMENTHAL). The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

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

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. DURBIN. I ask unanimous consent that the time until 5:30 p.m., for debate on the McCain amendment, be equally divided between Senators MCCAIN and myself or our designees; that at 5:30 p.m. the Senate proceed to a vote in relation to the McCain amendment and that there be no amendments in order to the amendment prior to the vote.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. DURBIN. Mr. President, I don't know if Senator MCCAIN is nearby, but if he is, I want to give him a chance to come over and use the few minutes remaining before the rollcall vote.

But for those Members of the Senate who did not listen to the earlier statements by Senator MCCAIN and myself, this amendment is very basic and very straightforward: Senator MCCAIN would cut or eliminate the ability of the Department of Defense to give grants to three organizations: Fisher House, Red Cross, and USO.

Fisher House is the Ronald McDonald House of military and veterans hospitals. I have visited the one in Chicago. I have talked to my colleagues about other Fisher House facilities around America. They are remarkable and amazing places.

Fisher House is where a family who may not be wealthy has a chance to stay and be treated like royalty while their son, their daughter, their husband, their mother is being operated on in a military hospital. That is what Fisher House is all about. I have seen it. The volunteers who man these houses make sure people are treated in the way they should be and make us proud as Americans. The McCain amendment would eliminate the authority of the Department of Defense to give money to the Fisher House to continue their operations.

The McCain amendment would also eliminate funding grants that are given to the Red Cross and the USO. The Red Cross is an extraordinary organization,

and every American knows what they are about. But in the fiscal year 2010, the Red Cross provided more than 597,000 emergency communications services for nearly 150,000 military families, and they provided nearly $6 million in financial aid to 5,000 military families, not to mention thousands of Red Cross volunteers—including servicemembers, veterans, and military spouses—offered comfort and support to our wounded troops and their families at hospitals around the world.

The USO is another great organization which has provided assistance and entertainment to our troops, many of them stationed far away from home and far away from their family.

In addition, the McCain amendment would eliminate the construction of a wastewater treatment facility in Guam. We have 16,000 marines stationed in Guam. The administration—the President has asked for this money because the wastewater treatment facility in Guam is inadequate. It is not safe. It is a public health hazard. An environmental impact statement prepared for the realignment of marines from Okinawa to Guam clearly finds that the current system is near capacity and needs upgrading.

So whether you argue that Guam is going to have a large future, a small future, the current allocation of marines in Guam deserves the most basic sanitary wastewater treatment facility. You would expect it, would you not, for your son or daughter serving in our Marine Corps? We should expect no less, and the McCain amendment would eliminate the funding necessary for this wastewater treatment facility, as well as a public health laboratory to test samples of suspected toxic substances in a timely manner to protect Americans and our troops in that theater of the world.

I don't know why Senator MCCAIN has picked out these elements. I think they are all positive elements. I hope my colleagues will join me in defeating the McCain amendment. It is an amendment which would take needed resources away from the USO, Red Cross, and Fisher House and deny this wastewater treatment facility in Guam. I hope my colleagues will join me in opposing the McCain amendment.

At this point I yield the floor, and I suggest the absence of a quorum, in the hopes that Senator MCCAIN can return before the vote.

The PRESIDING OFFICER. The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

Mr. DURBIN. Mr. President, I ask unanimous consent the order for the quorum call be rescinded. I wish to give my friend, Senator MCCAIN, the author of this amendment, the opportunity to speak.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. MCCAIN. Mr. President, I guess the time here is short. Sometimes when you can't argue the merits of an issue you just make up something. Senator DURBIN claims this amendment would cut funding for the Fisher House, Red Cross, and the USO. If you read the bill, the Fisher House is covered in the CR in section 8070. The Red Cross and USO are covered in section 8078. This amendment strikes section 8039, which pertains to the Office of Economic Adjustment fund, the OEA fund. It has nothing to do with Fisher Houses, the Red Cross, mothers of America, apple pie, or the flag—nothing to do with those except that it strikes legislation which is expressly prohibited in the Defense authorization bill. It strikes language which is directly prohibited by the National Defense Authorization Act.

If the Senator wants to claim that Fisher House, Red Cross, USO, small animals, children, the United Way, whatever else he wants to, they are covered in other parts of the bill. I suggest to the Senator from Illinois reread the bill which says—section 8070 talks about Fisher Houses; section 8078 talks about the Red Cross and the USO. Our amendment strikes 8039, which is the Office of Economic Adjustment, that funding.

I thank the Senator for recognizing that. It is already part of the record. It is very clear this has nothing to do with the Fisher House.

The PRESIDING OFFICER. The Senator from Illinois.

Mr. DURBIN. Mr. President, we have been assured by the House in the construction of this bill that this provision was added explicitly to make certain that there be no question that the grants that are given to these organizations would be authorized and included in this appropriations process. That is their belief. With an abundance of caution, we support their belief because we know of the importance of these organizations.

I now move to table the McCain amendment No. 33, and I ask for the yeas and nays.

The PRESIDING OFFICER. Is there a sufficient second?

There is a sufficient second.

The question is on agreeing to the motion.

The clerk will call the roll.

The bill clerk called the roll.

Mr. DURBIN. I announce that the Senator from New Jersey (Mr. LAUTENBERG) and the Senator from Rhode Island (Mr. WHITEHOUSE) are necessarily absent.

The PRESIDING OFFICER. Are there any other Senators in the Chamber desiring to vote?

The result was announced—yeas 48, nays 50, as follows:

[Rollcall Vote No. 35 Leg.]

YEAS—48

Baldwin	Brown	Cowan
Baucus	Cantwell	Durbin
Begich	Cardin	Feinstein
Bennet	Carper	Franken
Blumenthal	Casey	Gillibrand
Boxer	Coons	Hagan
Harkin	Merkley	Schatz
Heinrich	Mikulski	Schumer
Heitkamp	Murphy	Shaheen
Hirono	Murray	Stabenow
Johnson (SD)	Nelson	Tester
Kaine	Pryor	Udall (CO)
Klobuchar	Reed	Udall (NM)
Landrieu	Reid	Warner
Leahy	Rockefeller	Warren
Menendez	Sanders	Wyden

NAYS—50

Alexander	Fischer	McCaskill
Ayotte	Flake	McConnell
Barrasso	Graham	Moran
Blunt	Grassley	Murkowski
Boozman	Hatch	Paul
Burr	Heller	Portman
Chambliss	Hoeven	Risch
Coats	Inhofe	Roberts
Coburn	Isakson	Rubio
Cochran	Johanns	Scott
Collins	Johnson (WI)	Sessions
Corker	King	Shelby
Cornyn	Kirk	Thune
Crapo	Lee	Toomey
Cruz	Levin	Vitter
Donnelly	Manchin	Wicker
Enzi	McCain	

NOT VOTING—2

Lautenberg	Whitehouse

The motion was rejected.

The PRESIDING OFFICER. Is there further debate? If not, the question is on agreeing to the amendment.

The amendment (No. 33) was agreed to.

Mr. INHOFE. Mr. President, I ask unanimous consent to set the pending amendment aside to consider——

Ms. MIKULSKI. Mr. President, the Senate is not in order. I know there is a lot of gloating over this amendment—I don't mean yours. Could we kind of keep it quiet so Senator INHOFE can offer his amendment.

The PRESIDING OFFICER. The Senator from Oklahoma.

Mr. INHOFE. Mr. President, first, I ask unanimous consent to set aside the pending amendment for consideration of my amendment.

Mrs. BOXER. Mr. President, reserving the right to object.

The PRESIDING OFFICER. The Senator from California.

Mrs. BOXER. I just 2 minutes ago got a copy of what my dear friend is going to offer, and here we go again with a series of environmental riders that have nothing to do with this bill, that would change laws that protect our rivers and our streams, and involve the EPA making sure we prevent oilspills.

Frankly, I am objecting to this at this time unless I know we are going to have a 60-vote threshold; otherwise, I will put us in a quorum call at this time.

Mr. INHOFE addressed the Chair.

Mrs. BOXER. I have the floor because I am reserving the right to object.

Mr. INHOFE. No, I have the floor.

Mrs. BOXER. All right. Go ahead.

Mr. INHOFE. First of all, I would not object to a 60-vote threshold in order to get things to move along. I would say my good friend from California has seen this bill several times before, and several months ago we actually had a vote on it, but I have no objection.

Mrs. BOXER. Thank you so much.

AMENDMENT NO. 29 TO AMENDMENT NO. 26

The PRESIDING OFFICER. The Senator from Oklahoma.

Mr. INHOFE. This is something we are all familiar with. There is a spill prevention or an SPCC——

The PRESIDING OFFICER. The Senator will suspend.

The clerk will report.

The bill clerk read as follows:

The Senator from Oklahoma [Mr. INHOFE] proposes an amendment numbered 29 to amendment No. 26.

Mr. INHOFE. I ask unanimous consent that the reading of the amendment be dispensed with.

The PRESIDING OFFICER. Without objection, it is so ordered.

The amendment is as follows:

(Purpose: To prohibit the expenditure of Federal funds to enforce the Spill Prevention, Control, and Countermeasure rule of the Environmental Protection Agency against farmers)

At the end of title VII of division C, insert the following:

SEC. 17_____. No funds made available under this Act shall be used to implement or enforce with respect to any farm (as that term is defined in section 112.2 of title 40, Code of Federal Regulations (or successor regulations)) the Spill, Prevention, Control, and Countermeasure rule, including amendments to that rule, promulgated by the Environmental Protection Agency under part 112 of title 40, Code of Federal Regulations.

Mr. INHOFE. This is a bill that for years and years has come up. It was originally designed for refineries that have very large amounts of storage, of oil, of propane, of all that type of material, and it was designed for them to have the necessary safeguards in place. Then, later on, there became a gray area. I ask the question because it has never been answered: Should they now be able to apply this to farms? Farms may have perhaps a little bit of propane over here and over here, someplace else, something else. It might add up to the 1,320 gallons at one time. If that is the case, then they would be under the same requirements as we currently have for refiners. I am talking about them having to do volumes and volumes of paperwork. They would have to purchase new double-lined containers and build berms around their storage facilities. We are talking about hundreds of thousands of dollars, and this could be an average-sized farm.

The EPA has not done enough outreach to farmers to help them get into compliance. When this came up before, we introduced this same amendment that would give them time, with the assurance at that time that they would do this. In fact, I recall personally visiting with Lisa Jackson and she had every intention to go ahead and make these notifications.

So the EPA shouldn't be allowed to enforce the rule against farmers at this time. What this amendment does is asks for an extension to give them time. I plan on talking to the new Director of the EPA about this very issue. This is not just exempting farmers. This is giving more time, in this case, until the end of this fiscal year.

So I would like to be able to pass this. I do urge its adoption and ask for the yeas and nays.

The PRESIDING OFFICER. The Senator from Rhode Island.

Mr. REED. Mr. President, if we are still on the Inhofe amendment, is there still an opportunity to speak on the amendment before a vote is called or is the Senator asking for a vote immediately?

Mr. INHOFE. I am sorry, I could not hear the Senator.

Mr. REED. Is the Senator asking for a vote immediately or is there still an opportunity to speak?

Mr. INHOFE. No. We are asking for a vote sometime tomorrow.

Mrs. BOXER. Does the Senator wish to have time?

Mr. REED. I would like to, at the appropriate moment, be recognized to speak, respectfully, against the Senator's amendment.

Mrs. BOXER. Well, now is the time.

Mr. REED. Now is the time? Well, in that case, let me go ahead and speak.

The PRESIDING OFFICER. The Senator from Rhode Island is recognized.

Mr. REED. Mr. President, Senator INHOFE is proposing a very sweeping amendment that would affect a rule the EPA has developed over the normal rulemaking process, with notice and comments over many, many, many months. It is scheduled to go into effect in May of this year. The amendment the Senator is offering, as I understand it, exempts all farms from this EPA oilspill regulation. Again, this rule is designed to prevent or significantly prevent the pollution of navigable waters by oilspills coming from agricultural operations.

One of the issues here is the definition of what appropriate farm should be exempt. As I understand the amendment, it is all farms. That includes large agribusinesses that have the capability not only of mitigating these hazards but also the resources to do so and, collectively, would contribute to environmental quality.

I know the agricultural community is concerned. And I know also this the type of very complicated legislation that is best resolved at the authorization level. The Senator from Oklahoma, I think, has already indicated there are bills pending, and these bills are much more finely attuned in nuance to address more specifically the problem rather than a total effective preemption from the rule for all farms.

So I would urge very strenuously that—and I know the intentions of the Senator from Oklahoma are to assist the agricultural community, but I do not think this is the place or the time, as we try very seriously to get a bill through by the end of the week, essentially, that will keep the government operating, to decide on these complicated authorization issues, effectively cutting out completely a very serious and detailed rulemaking process that the EPA has undertaken.

So I will urge my colleagues at the appropriate time to resist the amendment.

Mr. INHOFE. Will the Senator yield?

Mrs. BOXER. Will the Senator yield? Go ahead.

Mr. REED. I will certainly yield.

Mr. INHOFE. I want to correct and make sure it is clear the understanding of what this is. This is something that is in existence today, and it is going to be temporarily holding this until the EPA will study to see what kind of hardship this is going to be to all the Senator's farmers and my farmers. This is not the bill that—I actually have a bill that would exclude farmers from this. This is not that bill. This merely extends that deadline to give them time to do what they had agreed they were going to do in terms of the EPA studying this issue.

I wanted to make sure that clarification was on the Record.

Mr. REED. I appreciate very much that clarification. But let me retain my time and then yield to the Senator from California.

Mrs. BOXER. If I could ask my colleague a couple questions, if he would engage in a colloquy with me.

Mr. REED. I will yield.

Mrs. BOXER. I know the Senator from Rhode Island—and I appreciate what he said about how sweeping this is. The Senator has the amendment in front of him, does he not?

Mr. REED. I have the amendment, yes.

Mrs. BOXER. I need to say here, please, colleagues, this is not any kind of an extension of time. This says:

No funds made available under this Act shall be used to implement or enforce with respect to any farm. . . .

And it goes through the Spill, Prevention, Control, and Countermeasure rule.

Does my colleague read it the way I do? This is not an extension of time. This is a prohibition on EPA implementing the rule. Am I correct?

Mr. REED. I believe the Senator is absolutely correct. There is no time extension. One could argue that as this CR runs out maybe this provision would run out. But the intent of the bill is clearly that there is no money to be expended for any implementation against any farm.

Mrs. BOXER. Exactly.

Mr. REED. That is the language of the bill.

Mrs. BOXER. I want to ask my colleague a couple other questions.

Farmers are exempted if they store less than 1,320 gallons of oil aboveground or less than 42,000 gallons underground. That is the rule.

Is my colleague aware of that?

Mr. REED. Well, I thank the Senator for bringing that to my attention because one point I would make—and I think Senator INHOFE does want to engage also—but one point I would make is that in this EPA rulemaking process there is a requirement to evaluate the cost and benefits with respect to the rule. In that sense, many of these issues have been addressed, and they have been done so in a very careful way.

Two, it has been done by listening to—in fact, requiring legally to take the opinions, the comments of many people, stakeholders from all sides. And then, frankly, the other cost and the traditional cost to protest a rule is not to legislatively eliminate it, particularly in an appropriations bill, but to contest the rule in court based upon the facts.

Mrs. BOXER. Will my colleague yield for one more question? I know my colleague, Senator INHOFE, wants to speak. By the way, we have a deep friendship. But this is something we have never agreed on.

I want to make a point about the EPA rule. Farmers storing any amount of oil, I say to my colleague, are exempted if an oilspill could not reasonably be expected to reach rivers and streams.

My colleague was talking about this as some Draconian rule. The fact is, even one quart of oil, used oil, can contaminate up to 2 million gallons of drinking water.

I am a little blindsided on this, I have to say to my friend. If he is going to keep on doing these riders on here that threaten the health of the American people, I wish he would take it to me and at least give me a personal heads up because this is something that is very serious, and I will be speaking more on it tomorrow.

I thank my colleague for yielding.

Mr. REED. I believe I still have the time.

Let me make one point. This is a complicated rule that has tried to balance various equities—environmental protection, protecting the navigable waters of the United States, recognizing small farms or farms where in no way their oil could reach down to where it should be exempt.

Here, on the other side, is an amendment that is very broad, open ended—no funds, all farms. I think in this context, I would urge my colleagues to resist the amendment.

I think the Senator from Oklahoma wants to speak.

Mr. INHOFE. Yes. Let me make one comment for clarification.

The PRESIDING OFFICER. The Senator from Oklahoma.

Mr. INHOFE. We will have the opportunity to look at this closer, as the Senator from California suggests, tomorrow. We have talked about this in the past. This is extending that May 30 date to the end of the fiscal year. As you know, everything that would be an amendment adopted on this would expire at the end of the fiscal year. So it is just an extension of that time. Because by their own admission, the EPA has not had time to listen to the concerns of the farmers. And I am talking about farmers in both of your States there as well as my State of Oklahoma.

As far as making the determination as to where the oil might go, I think we all know that would be a very difficult thing to do. There has been an effort for quite some time to take the word ''navigable'' out, which would open it to anywhere.

So I think perhaps tomorrow we will have time to get into this. I really wanted to get it in the queue. I have done that, and we will have a chance tomorrow.

I thank the Senator.

Mr. REED. If I could reclaim the time.

The PRESIDING OFFICER. The Senator from Rhode Island.

Mr. REED. Let me say, I think the Senator's comments are accurate in that because the CR terminates on September 30, then because it terminates, the CR, this language might go away. But the clear language here is not a—and I think that is the point the Senator from California made—is not a time-certain extension for the EPA to do something. It is: No funds, no farms. And I think there is a reasonable concern—that certainly I have—that this will not just be a deliberate delay of several months, but this is the intent to stop this law indefinitely, as this language was drafted.

Mr. INHOFE. Look, I would conclude by saying, yes, that would be my intent, but not with this legislation. This amendment does not do that. I actually do have a bill that I have up that would permanently exempt farmers in certain categories from being under the jurisdiction of these limitations. But that is not what this is at this time.

I thank the Senator very much.

Mr. REED. I thank the Senator from Oklahoma, and I yield the floor.

The PRESIDING OFFICER. The Senator from Washington.

Mrs. MURRAY. Mr. President, I ask unanimous consent to speak as in morning business for 10 minutes.

The PRESIDING OFFICER. Without objection, it is so ordered.

THE BUDGET

Mrs. MURRAY. Mr. President, here in Washington, DC, the budget debate is often discussed in terms of abstract numbers and political winners and losers. But the truth is that budgets are about far more than that. They are about our values and our priorities, and they are about the people across the country whose lives are impacted by the decisions we make.

Today the Senate Budget Committee discussed one approach to tackling our budget challenges, an approach that, while getting our debt and deficits under control, will also create jobs and build a foundation for prosperity from the middle out.

Tomorrow we will continue this discussion and vote on a plan. Then we will move this debate here to the Senate floor, and then, hopefully, work toward a balanced and bipartisan agreement with the House of Representatives, while the American people have a chance to weigh in.

I believe our budget must meet not just one but many pressing challenges of our time. We have come a long way since early 2009 when President Obama entered office facing massive deficits and an economy that was shedding hundreds of thousands of jobs per month.

We have made progress toward getting our debt and deficits under control, and we have added back jobs, but the recovery is not as strong or as fast as it needs to be. Millions of workers continue struggling to get back to work, and we still have some very serious challenges when it comes to our medium and long-term deficit and debt challenges.

In the coming weeks and months, we will be asked to make tough choices as we work to tackle these challenges responsibly. This process is not going to be easy. There is a serious difference of opinion about what our government should be doing to keep our economy and our national finances moving in the right direction.

One approach is to follow a path back to the economic policies of the last administration. This is the path to more tax cuts for the rich but less opportunity for the middle class to get ahead. It is a path not to prosperity, which can only truly be built from the middle out, but to the deterioration of our national infrastructure and the decline of our schools and the dismantling of the Medicare promise we have made to our seniors. This approach, in fact, was on the ballot last November. Voters around the country rejected it. Instead, they want an approach that puts the middle class first, that returns our Nation to the fiscal and economic policies that have worked for this country before, by focusing on jobs and the economy, cutting spending responsibly, and calling on the wealthiest Americans to pay their fair share.

The Senate budget—which we put out today—reflects the progrowth, pro-middle class agenda that the American people went to the polls and supported in November.

Our budget is really built on three principles: No. 1, we need to protect our fragile economic recovery, create jobs, and invest in long-term growth. No. 2, we need to tackle our deficit and debt fairly and responsibly. And, No. 3, we need to keep the promises we made to our Nation's seniors and families and our communities.

We believe with an unemployment rate that remains stubbornly high and a middle class that has seen their wages stagnate for far too long, we simply cannot afford any threats to our fragile recovery.

That is why this budget uses equal amounts of responsible spending cuts and new revenue from the wealthiest Americans to fully replace the cuts from sequestration—cuts that, by the way, threaten hundreds of thousands of jobs this year, and cuts that endanger economic growth for years to come, and cuts that are being felt in States such as mine, where military families are losing services, local housing officials are being forced to cut housing vouchers for the homeless, and furloughs are being handed out to those

who are cleaning up nuclear waste that threatens our environment.

The budget we are offering invests in infrastructure and job training to get Americans back to work now. It prioritizes education, as well as research and development, so that our workforce of today and tomorrow has the skills to compete in the 21st century global economy.

Our budget puts jobs and the economy first and foremost. But it also builds on the work we have done over the last 2 years to tackle our deficit and debt responsibly.

Since 2010, Congress and the administration have worked together to reduce the deficit by $2.4 trillion—$1.8 trillion coming from spending cuts, $600 billion coming from allowing tax rates to rise on the wealthiest Americans, which we voted on in the year-end deal.

The Senate budget takes us the rest of the way to that $4 trillion goal and beyond. It builds on the $2.4 trillion in deficit reduction already done with an additional $1.85 trillion in new deficit reduction, for a total of $4.25 trillion in deficit reduction since the Simpson-Bowles report.

Our budget reduces the deficit to below 3 percent of GDP by 2015 and keeps it well below that level for the rest of the 10-year window in a responsible way. It pushes down our debt, as a percentage of the economy, moving in the right direction. Our budget tackles the deficit the way the American people have consistently said they want it done, with an equal mix of responsible spending cuts made across the Federal budget and new revenue raised by closing loopholes and cutting wasteful breaks that primarily benefit the rich.

This budget cuts spending responsibly by $975 billion, finding savings across the budget, including health and defense. It matches those responsible spending cuts with $975 billion in new revenue, which is raised by closing loopholes and cutting unfair spending in the Tax Code for those who need it the least, while locking in tax cuts for the middle class and low-income working families and protecting them from having to pay a penny more.

Since we have so far been unable to get a deal because Republicans reject using new revenue from the wealthiest to help us reduce the deficit, I want to emphasize that there is bipartisan support for deficit reduction through making the Tax Code more fair and efficient. During the recent fiscal cliff negotiations Speaker BOEHNER proposed that we reduce the deficit by $800 billion by closing what he called special interest loopholes and deductions. This budget takes him up on that.

In addition to investing in jobs and economic growth and tackling our deficit and debt responsibly, this budget also keeps the promises we have made to our seniors, our families, our veterans, and our communities. We strongly reject the call to dismantle Medicare by voucherizing it because this critical program that seniors and families support, paid into, and depend on should be protected. This budget takes a responsible, fair approach. It is the one endorsed by bipartisan groups and experts. It is the one supported by the vast majority of the American people.

The House of Representatives is also working on their budget resolution today. I know there are going to be serious differences between the visions and values and priorities within the budgets which will emerge from our Chamber and theirs. But the American people are going to have an opportunity now to examine these budgets side by side. They are going to be able to decide which approach is best for our economy, best for our jobs, and best for the middle class. They will let us know whether they want to go back down the path of the trickle-down policies that decimated the middle class and threw our economy into a tailspin or if they would prefer the approach we have seen work before: to tackle our deficit responsibly, to reinvest in the middle class, to build a strong foundation for growth, and to restore the promise of American opportunity.

The Senate budget is a balanced and responsible approach to taking us down that second path. I am hopeful the House of Representatives will join us at the bargaining table so we can end this gridlock and work together toward a responsible and bipartisan budget deal that the American people expect and deserve.

I yield the floor.

The PRESIDING OFFICER. The Senator from Maryland.

Ms. MIKULSKI. Mr. President, before the Senator leaves the floor, the chair of the Budget Committee—first of all, I want to compliment her on the work she has done on the Budget Committee. It is indeed impressive. I want to compliment her because she is headed for a balanced approach, really. Increased revenue. We are not talking about rates, we are talking about getting rid of tax break earmarks, earmarks that go on not for one group for 1 year but go on indefinitely, such as subsidies for corporate jets and sending jobs overseas.

But the other areas she is looking at are how we can be more frugal in our spending, and then a rigorous review of mandatory spending. We have to review it to see how we can get more value for our dollar.

The Senator has championed veteran's health care. She and I know we can get more value there. I compliment the Senator on that.

I am going to ask the Senator a question about timing and process. Does the Senator have a time mandate that has been assigned to her to complete her bill?

Mrs. MURRAY. Mr. President, I thank the Senator from Maryland. First of all, let me just say it is truly a pleasure to be on the floor with the chairman of the Appropriations Committee. I just remember when the Senator and I were here back in 1992, the Year of the Woman, and now here we are managing these critical financial bills.

Ms. MIKULSKI. It is the economic framework for the United States of America.

Mrs. MURRAY. Exactly. Families across the country should be grateful for the work the Senator is doing on the appropriations side of the committee, which focuses on making sure their kids can go to school, that they have the research and investment they need for their health care, and so many transportation infrastructure projects that allow them to go to work and raise their families in a responsible way.

I respect and admire the work the Senator is doing right now on a very difficult and challenging budget CR that no one wishes looked like it does, but we recognize the reality of the task the Senator has been given. She is managing it in the best way possible.

To answer the question, I would tell the Senator that we are in a very short timeframe. Our Budget Committee will proceed through the amendment process, and tomorrow night pass out our budget after many amendments. At that time, our staff will work over the few short days they have to have the paperwork ready to lay down our bill on the floor of the Senate, hopefully, Monday night. We are under a very constricted timeframe. It is the one piece of legislation that comes before this body like that with 50 hours of debate and multiple amendments. We need to finish that before we can leave for the April break.

Ms. MIKULSKI. Well, I want to share the Senator's sense of urgency to get her bill done. In order for her to get her bill done, I need to get my bill done. I want to pledge my cooperation, and I believe that of my vice chairman, Senator SHELBY. We have a sense of urgency to move our bill because we must take it over to the House. There, we have a deadline that is a Draconian one: If we do not have a continuing funding resolution passed before the Easter-Passover break, we will face a government shutdown. That is horrific in terms of our economy and the people who want the U.S. Government to govern itself. It is also one more sign that we have a problem governing. I say that because, while the Senator is marking up her bill tomorrow, we want to move through here so that we are done.

I would like to have this bill done tomorrow. There are those who have obligations in their States and even at an international conference. I would like to support that, but Senator SHELBY and I need support too. So we do not doubt people offering amendments, we do not question their content or their policy, but we have timing and process.

Our bill is not meant to be ''pin the tail on the donkey.'' It is not meant to

solve every problem the U.S. Government has. Our job is to keep the continuing resolution.

I want to say to the Senator, while, speaking to a much larger audience, I know there is pent frustration not to be able to offer amendments and debate. We are doing that. You win some, you lose some. That is called the Senate. I want the Senator to know we want to work with her so that we do not interfere in her work. But I believe one of the ways we can get to the budget, which is the real framework for how we can even vitiate sequester, is to get out our bill, meaning the continuing funding resolution.

So I want to compliment the Senator on her work. I pledge to support it, but I ask the support of all of the other 98 of our colleagues. Let's look at what we need to get done on the continuing funding resolution, not what we would like to get done.

Mrs. MURRAY. If the Senator from Maryland, the chairman of our Appropriations Committee, would yield for a minute, I want to back her up on that. I know there are probably 8,000 amendments that can be offered to this because nobody is happy with the fact that we are faced with a continuing resolution that does not reflect the needs of all of our communities. I know she did not come here to debate process or to be the mother of Senators and get them over here to offer amendments. I know where her passion is. It is fitting for her kids and families and communities in Maryland. That is what she wants to get back to.

If we can get past this and put the CR in place, swallow hard and then get our budget done and work toward a process of a bipartisan budget, we need to do that so we can then give the Senator the ability to put the Appropriations Committee bills together. They will come out here and we will be able to offer amendments and people will have their say about the spending of the future. We cannot get to that unless we get that work done.

Ms. MIKULSKI. That is right. An open and transparent process in that legislation that we put together over a weekend, 571 pages. Senators McCain and Coburn were right, but I could not do any more because I did not get it from the House until Thursday. So, again, I am not here to debate process, but I am the prodder of the process. So I am out here prodding and pleading: Please, let's get a simple, contained order of amendments. We thank the other side of the aisle. They are working with us.

In terms of the floor staff who is working on this, we need the cooperation of the Senators.

Mrs. MURRAY. I would back up the Senator and urge Senators to, please, finish this product, move on to our budget next week, and get that done. Then we can get to the point that America will respect the work of this body and not lurch from crisis to crisis as the Senator has outlined and get back to focusing on the policies those families she cares about and represents so well want her here for.

Ms. MIKULSKI. Absolutely. I see my colleague from Maryland, such an able and active Member, a member of the Finance Committee that is known to make a contribution. We want him to make a couple of trillion dollars' worth of contributions, as a matter of fact.

I yield the floor.

The PRESIDING OFFICER. The Senator from Maryland.

Mr. CARDIN. Mr. President, let me thank my colleague from Maryland, Senator MIKULSKI. I was listening to the exchange between Senator MURRAY and Senator MIKULSKI. I just want to concur in their comments. We need to act on H.R. 933, the amendments offered by Senator MIKULSKI and Senator SHELBY. It is important for us to move forward on this for several reasons.

First, we are over 5 months into the fiscal year. We need to enact the fiscal year 2013 budget. If we are going to the fiscal year 2014 budget, we have to get past the fiscal year 2013 budget. So it is critically important that we pass the continuing resolution omnibus bill, send it back to the House, and, hopefully, reconcile those differences very quickly because we only have a few more days to get this enacted in order to make sure government continues, but just as importantly to give predictability to our agencies for the next 7 months.

We are very close to getting that done. I urge my colleagues to cooperate as the chairperson of the Appropriations Committee, Senator MIKULSKI, has said. I certainly strongly support the work that has been done. I thank Senator MIKULSKI and Senator SHELBY for bringing us together in a way that I would hope the Senate would operate, that we work together, Democrats and Republicans, come together on a bill, and move that legislation.

Having said that, I must tell you I share the frustration that Senator MIKULSKI talked about. There are provisions that are not included in this legislation that I would like to see included, and there are some provisions that are included that I would like to see not included. Let me talk about one of the provisions that is included that I regret is there. That is the provision that would extend the pay freeze for our Federal workforce through the remainder of the current budget year, fiscal year 2013.

I am proud to represent the people of Maryland in the Senate, along with my colleague Senator MIKULSKI. We represent 130,000 Federal workers. That is about 5.6 percent of the Maryland workforce who are Federal workers. These are public servants. These are people who are on the frontline. These are people who are providing critical services every day to the people of this country.

A couple of weeks ago, I was at the National Institutes of Health. I had a chance to talk to the workforce there. What they are doing is critically important to the people of this country. I could tell you that the basic research they do is critically important to a lot of companies in the creation of jobs. That is absolutely true.

I will tell you the story of one individual I happened to meet. One of the scientists there took me to the program on which they are working. The work they are doing is in the field of research on renal cancer. The reason I say this is I had a chance to meet with one of the individuals who is in the program. He comes from a different State and was diagnosed a while ago with having a form of renal cancer with no cure. He was told by his doctor that he had basically two choices: We can treat you with the only technology we know here or at any facility in the country—and you have 6 months to live—or you may participate in an NIH program where they are looking at alternative ways to treat this form of renal cancer. This person chose the latter course, traveled to Bethesda, MD, and participated in the program. They discovered for this form of cancer a drug therapy that will stop the growth of the cancer cells. He is now living a somewhat more normal life with hope of survival. He didn't have that just a few months ago.

When I spoke with this person about what he felt about sequestration or about government shutdowns, do you know what he told me? He said: I never thought I would need government. I was working. I never thought I would need government. NIH needs the money we give them. It helped save my life, and it helped develop the type of scientific base we need in this country.

This story could be told many times over. They need the predictability of a budget. They need the legislation Senator MIKULSKI is promoting, which will give them funding for the remainder of this year so they can continue their critically important work.

I visited the Social Security Administration a week ago and met a lot of hard-working Federal workers who were trying to send Social Security benefits to those who need them. We have people with disabilities trying to get a disability determination to receive a check. There is a delay in getting this done—a delay that will only become longer if the Social Security Administration doesn't have the people it needs in order to process those claims.

I could mention many other agencies—NSA and the critical work they do in cyber security. These are the best mathematicians in the world who are Federal workers serving in the most noble of public service. This includes Departments such as NIST, National Institute of Standards and Technology, which develops technology needs for our future, and the work done at FDA, the Food and Drug Administration, on food safety.

These are all people working in my State of Maryland for a Federal agency

as Federal workers. They are getting the job done for the people of this country and deserve our support. They have already sacrificed and have seen budgets that have shrunk. There are fewer people working, and their mission has increased—more work, fewer workers. They have now been through 2 years—which will now increase to 3—of a pay freeze. This translates into a $90 billion contribution to the deficit problems of this country. This is what the Federal workers have done.

Quite frankly, I find it disappointing that a very modest pay adjustment for a 7-month period—a .5 percent, one-half of 1 percent increase, which was in the President's budget—was held off for the first 5 months and will now be held off for the remainder of this year. I think this is wrong. That pay adjustment should have gone forward. I regret that it is not included in the legislation we will act on.

The Federal workforce will have additional sacrifices because this continuing resolution on the omnibus bill incorporates the lower numbers caused by these across-the-board cuts by sequestration. As a result of that, many of our Federal workers will be getting furlough notices. What does a furlough notice mean? That means as many as 1 day out of 5 they will be asked to not show up for work, which translates into a 20-percent pay cut, and some possibly 1 out of every 10 days, which is a 10-percent pay cut. If you have a mortgage payment to make or your utility bills to pay, creditors are not going to accept the fact that it can be 10 percent less because you have been furloughed 1 day out of every 10 days.

Our Federal workers will even do more, and I think we need to acknowledge that not by just saying ''you are doing a great job at public service'' but by giving them the support they need. I hope that as we move forward on the budget considerations for fiscal year 2014, we will take into consideration the sacrifices already made by our Federal workforce and give them the support they need to get the job done for the people of this country.

There are provisions which were left out of this continuing resolution omnibus bill which I think should have been included. Let me support Senator HARKIN and the amendment he has pending, which would basically put into the continuing resolution the work that was done during regular order by the Appropriations Committee on the Labor-HHS appropriations bill. It really accepts regular order. It doesn't increase the total at all; it just adjusts the money that was spent in fiscal year 2012 to the committee priorities established in fiscal year 2013. In other words, it establishes regular order with the same appropriation dollars in order to update the spending in the agencies under the committee's jurisdiction. This makes sense.

Let me give you one example, and I could give you many others. I spoke about the National Institutes of Health. I spoke about how valuable the work is that they accomplish. Well, as a result of budget reductions, they may now only approve about one out of every seven grants. They make grants to our universities and to groups who work to find answers for these diseases. They only now may do one out of every seven. As was explained to me by Dr. Collins, they must choose between the really great grants that are submitted and the great, great grants that are submitted. They can take only a few of the really great projects that are out there.

We need to do better. Senator HARKIN's amendment would increase the amount of money going to NIH by about $140 million. Once again, it doesn't change the overall totals; it adjusts the priorities from fiscal year 2013 to fiscal year 2014. I urge my colleagues to support the Harkin amendment to enable an agency such as NIH to receive the help needed without affecting the overall spending of this Nation.

I really do look forward to us working together, Democrats and Republicans, in the national interest to compromise in a bipartisan manner. This is what we need to do. This is exactly what Senator MIKULSKI and Senator SHELBY have done in bringing forward this legislation. It deserves our support.

I listened to Senator MURRAY, as I know we will be voting on a budget next week for fiscal year 2014. What we need to do is work together, Democrats and Republicans, let these bills go to conference, work together and bring out a budget that represents the best for our Nation to move forward.

What I hear most from the people of Maryland is that they want us to make decisions. They need the predictability of a budget. We can give them that for our current year by the enactment of the bill that is currently before us, and then we could give them the predictability they need for the future decisions of our Nation by approving in a bipartisan manner the budget for fiscal year 2014. I would hope we could do that also as this would clearly be in the best interests of our Nation.

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

The PRESIDING OFFICER (Mr. HEINRICH). The clerk will call the roll.

The legislative clerk proceeded to call the roll.

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

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. SESSIONS. Mr. President, we began a markup on the budget today. It is the first time in 3 years the Budget Committee has actually met to begin to mark up a bill. We had opening statements today. We made opening statements before we saw the chairman's mark, and the mark was produced later after the opening statements were completed.

Tomorrow we will have a markup on the budget and it will be 1 day, and amendments will all be completed tomorrow. There will be several interruptions, but the determination is to finish, which, of course, is contrary to what we would like to have happen. The Republican members of the committee asked that we have a week set aside and we do opening statements beginning Monday or Tuesday and that we actually have amendments up during a normal process and be able to actually engage in the kind of debate I think would be helpful for the financial future of our country. The chair and the Democratic majority decided we would just do opening statements this afternoon and we would do all the amendments tomorrow and we will complete tomorrow regardless. So that is where we are.

I am glad we do have a budget being brought forward. If it is brought to the floor, it will be the first time in 4 years the Democratic majority has brought a budget to the floor. This is in violation of plain law, statutory code of the United States, 1974, requiring a budget be passed every year and brought forward. They refused to do so. The majority leader said it was foolish to bring a budget. What he meant was it was foolish politically. Surely he wouldn't contend it is foolish for America that the Democratic leadership in the Senate bring up a budget. Surely it would be good for the country to do this every year, as the law requires. But that is where we have been. So we are glad.

The House passed earlier this year a bill that said no budget, then no pay. It said, Congress, if you don't pass a budget, at least out of your own House, then you don't get paid. So that picked up the pace, apparently, and we have a budget, although the President has not submitted his budget. Amazingly, I think it is the first time in 90 years, somebody said—the first time certainly in my memory—the President of the United States, who is required by law to have the budget in by February 4, has waited for the House, which is marking up a budget today, and the Senate to do their budget first. That goes against what mayors and city councils do and Governors do. But that is where we are.

I will tell you one thing that we have learned in the short time we have had the budget that I think defines a lot about where our majority wants the country to go. Over 10 years, this budget—at a time of a dangerous fiscal crisis—spends more—$640-some-odd billion more—than the current law we passed about 20 months ago in August of 2011. We agreed to the Budget Control Act. We agreed to a certain amount of money that we would spend and no more. The President signed it and both parties in the House and Senate agreed to it. But what happens? Here we are with their proposing a budget that will spend more money than we agreed to spend just a few months ago.

The worst thing about this is that the Budget Control Act did not go far

enough. We should have reduced spending more. In addition to that, it looks as though there will be about $1 trillion in new taxes in this budget. So it is tax more and spend more. It is the wrong direction for America.

People say: Well, that is just politics; what is the matter with you guys. Why can't you reach an agreement? It is hard to reach an agreement when the country is on an unsustainable debt path that puts us in danger of financial crisis; a path that is already slowing growth down in our country. Agreeing to a budget that continues down this path is not the right thing to do. So I am deeply disappointed that we are in this fix.

I wish we had had an opportunity in committee to really have a lot of discussion about it back and forth, because there are good Democratic members of our committee, talented members, good Republican members, talented members, who bring so much to the discussion. But it was just both sides talking today. Some good statements were made but not the kind of engagement we would like to have had. So that is a disappointment.

Under the current baseline we are on, according to the Congressional Budget Office, in the tenth year of this budget we are dealing with right now—the Budget Control Act—interest on our debt will be $850 billion—$850 billion in interest payments for 1 year on the money we have borrowed—the almost $17 trillion we have borrowed. This is why it is such a dangerous thing. The highway bill is $40 billion or $50 billion a year, aid to education may be $100 billion.

I am saying that in just a few years, because we have run up unnecessarily so much debt, that interest will be $900 billion. That will be more than the Defense Department by far. The Defense Department's base budget is about $540 billion, and it is actually being cut. Interest will be the largest growing item in the budget.

Food stamps went from $20 billion a decade ago to $80 billion. I just left my farmers, who came up from Alabama, and we were talking about that. The farm bill is about $100 billion a year. Of that farm bill, $80 billion of it is the food stamp budget. It has gone up four times. The $20 billion that goes to farmers, in aid and insurance, actually was cut this year, but nothing was cut out of food stamps. They resisted that, and rejected even a modest amendment I offered to end a clear abuse which wouldn't have hurt anybody. I guess what I am saying is we are in serious business here and we have to get off the debt course we are on.

Erskine Bowles, who was appointed by President Obama to head the fiscal commission, along with Alan Simpson—the Simpson-Bowles Commission—said this Nation has never faced a more predictable financial crisis. What he was saying was, if we don't get off the debt path we are on, we are going to have a financial collapse. They didn't say exactly what, but something like Greece, something like we had in 2007, throwing our country back into a recession, which would be a very dangerous thing. It was a bipartisan warning to us that we needed to act, and we haven't acted since then, and that was over 2 years ago.

We haven't done anything. So a lot of people are saying and you have heard it said that we have to act because we are worried about our children and our grandchildren. And we should be worried about the debt that is out there for our children and grandchildren.

Senator KELLY AYOTTE from New Hampshire put a picture up in our Budget Committee today of her two children, ages 5 and 8, and she had one with $1,100,000 on that child's picture, and the younger one had $1,300,000 on her picture. That is what was calculated will be the share of the Nation's debt that they will carry when they are adults. This is wrong. We should not—must not—do this to our children and grandchildren. It was not done to us. Our parents left us with a country much more responsibly managed than this.

We have never, ever had a situation in which we have had four consecutive years of deficits amounting to $1.2 trillion a year. Never. Oh, President Bush spent too much. Yes, he did. He deserves some criticism. I think he does deserve some criticism. The year before he left office, his deficit was $161 billion; his last year was $470 billion. For the last 4 years, we have averaged $1.2 trillion, and it is systemic and it is deep and it has to be changed.

Now, there is one more thing I really would like for my colleagues to focus on, and I will wrap up with this point, but it is really important. The question is: When you have debt equal to $17 trillion, does it impact the economy now? Yes. It puts us at risk for some sort of fiscal crisis. If there is a collapse in Europe, a collapse in Japan, a collapse in China, it could kick us off into a major financial disaster in the United States. It is a very fragile situation.

But the question is: Does the debt we have now slow growth today? I think that is a really important issue, and so we have done the research.

The issue was originally raised by Rogoff and Reinhart. They have done a number of studies and wrote a big book about all the nations that have gone into default and have had a debt crisis over the last 200 years. It is a thoroughly respected work of two highly competent and proven, respected economists. What they concluded was that when debt reaches 90 percent of the size of your economy, you slow economic growth by 1 to 2 percent.

Where are we now? A lot of people have been using the ''public debt of the United States.'' That is one way to calculate it, and our public debt represents about 76 percent of our gross domestic product. But the other debt that we use, the one you have seen most often, is the $16 trillion figure that has the numbers spinning on it—$16 trillion is what is called the gross debt. A lot of people seem to think we are not in danger because Rogoff and Reinhart were talking about the public debt. That is not so. We have examined their work, and we have examined their footnotes and their reports and analysis. It is the gross debt. That is what they were using; that is what they calculated. We are at 104 percent gross debt, so we are well over the 90.

I would contend that the reason our economy has failed to meet, for the last 3 years, the growth expectations that were out there is because our debt is dragging us down now. And there are hundreds of thousands—millions of Americans who are probably out of work today because of the debt drag.

We need to get off this path, and the budget the majority moves in our committee gets us nowhere off this path. It never brings our gross debt below 90 percent or 94 percent of GDP, and we haven't finished the analysis of it.

In addition, the International Monetary Fund, the European Central Bank, the International Settlements Bank—all three have done similar studies with a little different approach, and they all reach the same conclusion. What they have concluded is that however you calculate the debt, the United States is already above the line where growth is slowed.

I think it was 2 years ago that the Congressional Budget Office—our nonpartisan group who makes projections for our debt and finances in the future—calculated that this year, 2013, we would have 4.6 percent growth. They predicted a much higher growth last year than the 2.2 percent we got the year before that, and they missed the previous year. They missed 3 consecutive years, predicting higher growth than occurred. And growth means a lot.

White House economic expert Christina Romer has estimated that a 1-percent growth in the economy—a difference between 2 and 3 percent—means you would create 1 million jobs to have 3 percent growth rather than 2 percent growth. That is what growth does to job creation, to wages, the possibility of getting raises, getting more wages, more overtime, perhaps, more bonuses, because the economy is growing. And if it is not growing, our workers are hurting.

So in our vision—I think the members of the Republican side of this Budget Committee—we are united in the belief that we can bring this budget under control and we can balance it.

Now, I have to tell you, the budget Chairman MURRAY produced tonight does not balance ever. It never balances. They say it is a balanced approach. They even said a couple times that it is a balanced budget, in our hearing. All they were trying to do was use the word ''balance,'' I think maybe—surely not but perhaps—they were hoping people would hear them

say they have a balanced budget, which comes nowhere close to balance. With $500 billion, $600 billion, $700 billion of deficit out there for years and years, it never balances. Congressman RYAN made his budget public, openly, a day before he commenced his hearing, and it balances in 10 years.

This is the deal. There is good and bad news in what I am saying. The good news is that we can increase spending every year by 3.4 percent and the budget will balance. The path we are on, the CBO current baseline projects us increasing spending each year at 5.4 or 5.6 percent. So if you reduce that growth instead of growing at that level, you grow at 3.4 percent, the budget will balance. And 3.4 percent is higher than what the Congressional Budget Office says inflation will be. They say it is about 2.2 percent; it will be about 25 percent over 10 years. So you can increase spending over 10 years by 40 percent above the inflation rate, and the budget will balance. You just can't keep increasing it by 5.4 or 5.6 percent.

It is critical for America that we get on the right course. So this is deeply troubling to me. I know we can do this. It is not that hard.

But here is the bad news and why it is painful a bit to get there; that is, because more than half of our budget now is the entitlement programs and interest. As I said, interest on the debt—you have to pay it. You really can't cut the interest except by reducing your debt. And there is no balanced budget in the short-term future, so the interest is going up at a solid rate.

Then you have our big entitlement programs. You have Medicare, you have Social Security, and then you have some large ones—Medicaid, which is a surging program growing at 8 percent a year, projected to increase by 117 percent over 10 years, and then food stamps is considered to be an entitlement. You put all those entitlements together and you have a problem. Those are in law. And ''entitlement'' means that if your income is at a certain level, your age is a certain age, you are entitled to the benefit that the law gives you whether the government has any money or not. Congress doesn't have to appropriate it. The government has to go out and borrow the money if they don't change the law.

So we need a plan to change Medicare, Social Security, food stamps, and some of the other entitlement programs in a way that saves them from the financial disaster they are headed toward, puts them on a sound path, and actually begin to restore the finances of America.

There is still waste, fraud, and abuse in the remaining part of the government. There are still programs that don't do any good for the money they get. There is still money spent on projects that should never have money spent on them from Washington, DC, and they ought to be eliminated. But to slow growth from 5.4 percent a year to 3.4 percent a year, we need to touch a little bit of everything. And spending will still go up. That is the good news. We can still spend more, but we just can't spend it quite at the increased rate we are on.

Some people say: Why don't you balance it now? Why are you talking about waiting 10 years?

We probably should do it sooner than 10 years. But I think it is a realistic appeal to Democrats and Republicans alike—let's get on this path, this path that is not too hard to achieve what would be fabulous for America.

Two things. First, I believe that if we were to pass a budget that would be on the path to balance in 10 years, we would feel some economic growth that we have never felt before. Investors worldwide, investors in the United States, and businesses would feel so much better about our country. I really think that is true. Second, we would reduce the huge debt hanging over us that is already slowing down growth. Those two things we can accomplish.

I don't know where we will go. We will pass a budget out of committee, I am sure, on a party-line vote. Maybe it will pass here on the Senate floor by a party-line vote, and then it will go to conference. I don't know, maybe Speaker BOEHNER or Chairman RYAN's budget will match up with the Democratic budget out of the Senate, and maybe something good will happen for America and we can reach some sort of agreement. But we cannot tax our way out of this. We can't keep increasing spending, for heaven's sake. We need to reduce the growth of spending to a level that is reasonable and can put us on a path to balance.

Mrs. FEINSTEIN. Mr. President, I rise today in support of an amendment that I have filed, along with Vice Chairman CHAMBLISS, to the appropriations bill now on the floor, which will address a unique problem the intelligence community faces in applying the sequester reductions to the National Intelligence Program, NIP, budget.

In short, this amendment would ensure that the intelligence community—which has to be as predictive and agile as possible—will have the same level of flexibility in implementing budget cuts as the Department of Defense, where most of its budget is located. Without this relief, the intelligence community will be far less discriminating in how it adjusts personnel and financial resources to address the dynamic and unforeseen threats our Nation will face in the upcoming months.

This is a commonsense amendment. It does not cost a dime, and it will likely avoid a great deal of harm to our intelligence capabilities.

Let me briefly describe the background and how the amendment would work.

As has been described many times, the terms of the sequestration require that the same level of budget cuts apply across the board. That is, departments and agencies have to apply the same percentage cut across each account.

It therefore becomes very important how those accounts are defined. If the account is very large, a manager has more leeway to prioritize funding and cut the least important, or the least urgent, needs. By contrast, if the account is defined as being smaller, there is less flexibility to cut funding responsibly, and more important programs will suffer.

Because of language included in the Fiscal Year 2012 Defense Appropriations Act, however, the intelligence community must apply the sequester in a highly restrictive way. That legislation required that the definition of an account for sequestration in the intelligence community is at something known as the Programs, Projects, and Activities—known as PPA—level. The intelligence community's budget has 685 PPAs, and each will need to be cut equally. The most problematic of these PPAs for the intelligence agencies are the 354 PPAs within the intelligence agencies' Operations and Maintenance, O&M, accounts. These are the accounts which fund current operations and salaries.

The overall Department of Defense budget is roughly 10 times that of the intelligence community, but it has only 3 times more PPAs—in other words, it has relatively fewer accounts that are affected by sequestration, and thus greater flexibility to absorb the sequester cuts, since they can be applied within larger budget accounts.

This amendment would help alleviate this problem by permitting the agencies in the intelligence community that are funded by the Defense Appropriations bill to use the same definition of what constitutes a Program, Project, and Activity Account as the Defense Department when applying sequestration reductions to its O&M accounts. This specific change will reduce the number of these PPAs from 354 to 5 and will not affect other PPAs. No budget outside of the intelligence community is affected—we simply provide these intelligence agencies with the same level of flexibility as the Pentagon.

In times like today, where the threats are neither static nor predictable, I ask that my colleagues approve this amendment so that the intelligence community may be nimble and responsive to the dangers our Nation faces.

This is not a simple budgetary matter. How the cuts of sequestration are applied makes a great deal of difference in practical terms.

Just yesterday, Director of National Intelligence James Clapper and other intelligence agency heads testified at the Senate Select Committee on Intelligence's hearing on Current and Projected National Security Threats to the United States. They described the numerous, complex, and interrelated threats we face. Director Clapper noted

''how quickly and radically the world—and our threat environment—are changing.'' He stated there is an increasing risk to U.S. critical infrastructure from cyber attacks, in particular from isolated state or non-state actors using less sophisticated but still effective techniques that are more prevalent today. I ask unanimous consent that an excerpt from this transcript be printed in the RECORD at the conclusion of my remarks.

The terrorist threat continues to become more diffuse since the al-Qa'ida core leadership has been degraded and its affiliates in the Arabian Peninsula and Africa look to fill that void and strike against the United States. Countries like Iran and North Korea continue their efforts to develop ever more deadly weapons of mass destruction, and look to market them to counter their failing economies. And, the instability in the Middle East and North Africa that has grown since the Arab spring continues to create more dangers and potential flashpoints in countries that 3 years ago were not assessed to have such risks.

In the past 6 months, it has been clear that the intelligence community needs to surge additional resources to collect and analyze intelligence on Northern Africa. Our policymakers need more and better information to deal with instability and terrorist activities in Libya, Mali, and Algeria. Under sequestration, however, agencies would be limited to do so. The same needs apply to address threats that emanate from Iran, North Korea, Syria, and cyberspace, to name just a few.

There is no doubt that the intelligence community can reduce spending and contribute to the Government-wide reductions. But to strip it of all flexibility to cut programs and personnel across the board makes no sense.

If our intelligence agencies are to absorb the cuts required by sequestration, our Nation's security would be better served by providing the intelligence community with the flexibility it needs to implement cuts in as responsible and thoughtful way under these circumstances.

The changes my amendment seeks are necessary to help the intelligence community adapt to a changing world as the sequestration reductions are implemented. I understand there may be concerns with how the other chamber will view this amendment, but I believe that our counterparts on the House Permanent Select Committee on Intelligence—Chairman MIKE ROGERS and Ranking Member DUTCH RUPPERSBERGER—support making these changes to help intelligence agencies succeed in their mission.

Finally, Mr. President, let me make clear that this amendment is intended, and I believe does, have no effect on the visibility that Congress has in how the intelligence community will make budget reductions due to sequestration or with how these agencies reprogram funds. The only thing affected by the amendment is the size of the accounts from which sequestered funds must be taken.

On behalf of myself and Vice Chairman CHAMBLISS, I urge adoption of the amendment.

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

EXCERPTS FROM THE TESTIMONY OF DIRECTOR OF NATIONAL INTELLIGENCE JAMES CLAPPER, BEFORE THE SENATE SELECT COMMITTEE ON INTELLIGENCE, MARCH 12, 2013

In my considered judgment as the nation's senior intelligence officer, sequestration jeopardizes our nation's safety and security. And this jeopardy will increase over time. The National Intelligence Program, or NIP as it's called, which I manage is spread across six cabinet departments, and two independent agencies. Much of it is included in the DOD budget. For that portion of the NIP, the Congress directed that the National Intelligence Program use an even more onerous set of rules to carry out these cuts than that imposed on the Defense Department.

This restrictive Program Project and Activity, or PPA, structure as it's known, compounds the damage because it restricts our ability to manage where to take deductions in a balanced, and rational way. Accordingly the sheer size of the budget cut, well over $4 billion, or about 7 percent of the NIP will directly compel us to do less, with less. Some examples, and I'll have to be circumspect here, in a—in an open, unclassified setting, and we're prepared to speak more specifically in a classified setting, of the impacts of sequestration.

We'll reduce human technical, and counter intelligence operations resulting in fewer collection opportunities while increasing the risk of strategic surprise. This includes for example, possibly furloughing thousands of FBI employees funded in the National Intelligence Program. Our cyber efforts will be impacted. This is an area where, as you all know, we must—we need to keep ahead of rapid technology advances to maintain and increase access to adversaries as well as provide warning of a cyber attack against the U.S.

Critical analysis and tools will be cut back. So we'll reduce global coverage, and may risk missing the early signs of a threat. Our response to customers will suffer as well. We'll let go over five thousand contractors, and that number may grow, who are an integral part of the intelligence community, and this is on top of the thousands of contractors we've let go in previous years. We'll delay major systems acquisitions, and decommission older, but still productive overhead reconnaissance capabilities, thus reducing coverage. Virtually all of the 39 major systems acquisitions across the intelligence community would be wounded.

We'll have to re-negotiate contracts and slip schedules to the right, which in the long run, will cost us more. And we'll scale back cutting edge research that helps us maintain a strategic advantage. Since we're already halfway through the fiscal year, the mandate of across the board cuts are equivalent to 13 percent, because we'll be forced to take them in just seven months. These condensed timelines magnify the impact these cuts will have on the I.C. So in response, our approach starts with the premise that mission comes first. Therefore, our two highest priorities are: One, to protect our most valuable resource, our civilian workforce so we can focus on the threats we face. And two to support overseas operations.

Our civilian workforce works 24/7 around the world and is crucial to performing that mission. It is our civilian professionals who will provide the resilience and ingenuity to help compensate for the other cuts we'll incur. I am resolutely committed to minimizing the number, and lengths of furloughs that would be required, not only because of the direct impact on our mission because of the severe impact on the morale of the people who do it. I plan to follow Deputy Secretary of Defense, Ash Carter's sterling example, and have my pay reduced as well in solidarity with any I.C. employees that have to be furloughed.

Now let me emphasize here that we are not arguing against taking our share of the budget reductions. What I am saying is we must manage this budget crisis, and continue our vital missions. And in so doing, we'll minimize the impact on our nation,and on our employees. Therefore, I plan to submit a reprogramming action that mitigates some of the most egregious cuts to help us cut in a more rational mission focused manner. And in this, I'm asking for your support, and the other intelligence oversight committees for expedited management and consideration.

And Madam Chairman I want to on behalf of the entire intelligence community, thank you for your leadership and your care for the mission of the intelligence community, and introducing a bill that would give us that flexibility. Now I must tell you that, unfortunately, I've seen this movie before. 20 years ago I served as director of Defense Intelligence Agency, the job that Lieutenant General Mike Flynn has right now. We were then enjoying to reap the peace dividend occasioned by the end of the Cold War.

We reduced the intelligence community by 23 percent. During the mid to late '90s, we closed many CIA stations, reduced human collectors, cut analysts, allowed our overhead architecture to atrophy, and we neglected basic infrastructure needs, such as power, space, and cooling. And we let our facilities decay. And most damaging, most devastatingly we badly distorted the workforce. All of that of course was—was reversed in the wake of 9/11, and thanks to the support of the Congress over the last decade, we rebuilt the intelligence community into the premier in such capability on the planet.

And now if we're not careful, we risk another damaging downward spiral. So I'm going to do all I can to prevent history from repeating that cycle. But to be clear, the—the scope and magnitude of the cuts already underway will be long lasting. Unlike more directly observable sequestration impacts, like shorter hours of public parks, or longer security lines at airports, the degradation to intelligence will be insidious. It will be gradual and almost invisible, unless and until, of course we have an intelligence failure.

Ms. COLLINS. Mr. President, I rise to speak on an amendment I have offered with my colleague from Colorado, Senator UDALL, but before I do so, I want to commend the senior Senators from Maryland and Alabama, Senators MIKULSKI and SHELBY, for putting forth a bipartisan proposal to prevent a government shutdown, and to congratulate them both on their new roles as Chairwoman and Vice Chairman of the Senate Appropriations Committee. I look forward to working with both of them as we complete work on the fiscal year 2013 funding bills and begin the fiscal year 2014 budget process.

I also want to thank my friend from Colorado, Senator UDALL, for working with me to develop this bipartisan amendment, which is based on a stand-

alone bill that we introduced last week.

Our amendment would help mitigate the harmful effects of the indiscriminate across-the-board cuts, known as sequestration, which took effect on March 1.

Our amendment would not reverse the automatic spending reductions, but would empower the heads of Federal agencies and departments to set priorities and implement the cuts in a smarter way.

Without this amendment, sequestration will be applied without distinction between high and low priority programs, programs that have a proven track record of success and those that should be reduced or eliminated.

To ensure appropriate Congressional oversight, the amendment requires agency heads to submit their spending proposals to the House and Senate Appropriations Committees for approval.

This Congressional oversight is an important step in the process because the Appropriations Committees know the budget of each agency inside and out. This review process also provides a strong incentive for each department or agency to put forth a serious plan if it wants to avoid the across-the-board cuts that would otherwise take effect.

Mr. President, this is an approach that our intelligence community has requested. The Nation's senior intelligence officer, Director Clapper, testified yesterday before the Intelligence Committee that sequestration jeopardizes our Nation's safety and security and that the across-the-board nature of the cuts compounds the damage by limiting ''our ability to manage where to take deductions in a balanced, and rational way.'' His plea was for flexibility, saying ''All we're asking for is the latitude on how to take them to minimize the damage.''

The Udall-Collins amendment would provide that needed flexibility to the intelligence community and other areas of our government, and I urge my colleagues to support the amendment.

Finally, I would like to note how pleased I am that the legislation currently before the Senate includes full-year funding bills for a number of departments and agencies, including the Departments of Defense, Homeland Security, Justice, Veterans Affairs, Commerce, and Agriculture. While I wish we had been able to move all of the annual appropriations bills, at a minimum, we appear on the verge of passing full-year funding bills for the departments I just mentioned, which is particularly improrrtant for the Department of Defense.

Military leaders have repeatedly warned that failure to enact a full-year defense funding bill would have dire consequences for our military. Military readiness would suffer, and the military would not be fully ready to respond to crises because DOD could not transfer funds from investment accounts into readiness accounts.

A year-long CR for the Defense Department would have resulted in a hollow force because the Pentagon would not have been able to increase production rates for existing weapons, start new programs, or sign multiyear procurement contracts that will provide significant savings for taxpayers.

When I questioned Deputy Defense Secretary Ash Carter on February 14, 2013, at a Senate Appropriations Committee hearing about what the continuing resolution means for the Navy and our domestic shipbuilding capability, he testified that:

> We're in the absurd position where we're five months into the fiscal year and we have the authority to build the ships that we built last year and no authority to build the ships that we plan to build this year. That's crazy . . . and that has nothing to do with sequester, by the way, that's the C.R.

The full-year funding bills that are included in the continuing resolution offered by Senators MIKULSKI and SHELBY will help alleviate some of the impacts of sequestration on the departments and agencies funded through those bills.

Unfortunately, the departments and agencies that find themselves funded under a continuing resolution, operating under a budget based on last year's needs, are not as lucky. It is all the more important for these departments and agencies that we provide additional flexibility, as the Udall-Collins amendment would do, in carrying out the cuts mandated by the Budget Control Act.

Mr. President, I ask my colleagues to support this amendment so that the cuts that are taking place now can be targeted at programs that do not work while sparing those programs that do.

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

The PRESIDING OFFICER. The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

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

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. REID. Mr. President, I ask unanimous consent that following leader remarks tomorrow, March 14, the Senate resume consideration of H.R. 933; that there be up to 1 hour of debate equally divided in the usual form on the Harkin amendment; that upon the use or yielding back of time, the Senate proceed to vote in relation to the Harkin amendment; that there be no amendments in order to the amendment prior to the vote, and the amendment be subject to a 60-affirmative-vote threshold.

The PRESIDING OFFICER. Is there objection to the request?

Without objection, it is so ordered.

CLOTURE MOTIONS

Mr. REID. Mr. President, I have a cloture motion on the Mikulski-Shelby substitute amendment at the desk.

The PRESIDING OFFICER. The cloture motion having been presented under rule XXII, the Chair directs the clerk to read the motion.

The assistant legislative clerk read as follows:

CLOTURE MOTION

We, the undersigned Senators, in accordance with the provisions of rule XXII of the Standing Rules of the Senate, hereby move to bring to a close debate on the Mikulski-Shelby substitute amendment No. 26, as modified, to H.R. 933 a bill making appropriations for the Department of Defense, the Department of Veterans Affairs, and other departments and agencies for the fiscal year ending September 30, 2013, and for other purposes.

Harry Reid, Barbara A. Mikulski, Sherrod Brown, Barbara Boxer, Robert Menendez, Patty Murray, Amy Klobuchar, Debbie Stabenow, Max Baucus, Tim Johnson, Benjamin L. Cardin, John D. Rockefeller IV, Charles E. Schumer, Carl Levin, Thomas R. Carper, Richard J. Durbin, Maria Cantwell.

Mr. REID. Mr. President, I have another cloture motion to the underlying bill at the desk.

The PRESIDING OFFICER. The cloture motion having been presented under rule XXII, the Chair directs the clerk to read the motion.

The assistant legislative clerk read as follows:

CLOTURE MOTION

We, the undersigned Senators, in accordance with the provisions of rule XXII of the Standing Rules of the Senate, hereby move to bring to a close debate on H.R. 933 a bill making appropriations for the Department of Defense, the Department of Veterans Affairs, and other departments and agencies for the fiscal year ending September 30, 2013, and for other purposes.

Harry Reid, Barbara A. Mikulski, Sherrod Brown, Barbara Boxer, Robert Menendez, Patty Murray, Amy Klobuchar, Debbie Stabenow, Max Baucus, Tim Johnson, Benjamin L. Cardin, John D. Rockefeller IV, Charles E. Schumer, Carl Levin, Thomas R. Carper, Richard J. Durbin, Maria Cantwell.

Mr. REID. I ask unanimous consent that the mandatory quorum required under rule XXII be waived with respect to both cloture motions.

The PRESIDING OFFICER. Without objection, it is so ordered.

MORNING BUSINESS

Mr. REID. Mr. President, I ask unanimous consent that the Senate now proceed to a period of morning business with Senators allowed to speak for up to 10 minutes each.

The PRESIDING OFFICER. Without objection, it is so ordered.

TRIBUTE TO MYRON FLEMING

Mr. REID. Mr. President, I have been waiting today to take just a moment to honor Myron Fleming, Director of Doorkeepers, who is retiring after 40 years of working on Capitol Hill.

Myron began his work in the Capitol with the office of Senator Howard Metzenbaum of Ohio. He has worked in the Senate for 33, 34 years, and prior to that he worked in the House of Representatives for 7 years. He is someone