

PET scan—unnecessary, totally unnecessary, but you do it because the likelihood is you are going to be sued. You do it to have that whole paper record there showing that you did the right thing. That is a cost. It is a huge cost, and it is a waste of money. It doesn't result in better patient care. It is a total waste.

Again, it gives me a sense of optimism because if you omit this waste—I would call it fraud—this abuse out of the system, everybody's cost of health care goes down.

It is estimated that the defensive medicine costs in this country are over \$100 billion. Wasted money. It is not Government money, it is your money. It is the American people's money. It is not even your tax dollars, it is how much you have to pay for that health care premium. That is why, if you are uninsured, you can't afford an insurance policy, because the cost of your insurance policy is too high.

Last month, I was in Texas, and again it is remarkable because medical liability reform is alive and well there, and it is working. I talked to patients, I talked to doctors, and I talked to nurses, and it is working. Since 2003, medical malpractice claims, following their reform, have dropped by at least 80 percent in most Texas counties. I talked just moments ago about physicians fleeing States because of medical liability, and since their reform was put in place, 3,000 doctors haven't fled that State but are coming back into that State today. We need to get on board with that reform movement.

When children who are dying of cancer can't get the lifesaving surgery they need, when a mother is forced to drive hundreds of miles to a doctor just to have her baby delivered, when doctors who have spent years training, years training and sacrificing to give people hope are having to leave the practice of medicine, it is time for us to act.

In a few moments, I will be filing cloture on the medical liability bill, and on Monday we will have those votes. I know a number of my colleagues will come by today and on Monday to explain the legislation as well as make the case of the importance of that legislation. I urge my colleagues, for the sake of all Americans and every citizen who is either walking into a doctor's office now or who will walk into a doctor's office in the future, that we vote to move forward on this bill.

I have seen firsthand that we have the best medicine in the world. The fact that I was able to do heart transplants with the technology on a routine basis, the fact that I was able to do lung transplants on a routine basis or to use that positron emission tomography to make a diagnosis on the metabolic processes of the heart or the brain today is truly astounding because it translates into better health care for all. We have the best doctors, we have the best medical schools, and we have the best hospitals in the world.

We have the best laboratories. We have the best universities and schools. I have been a beneficiary of that, and I have witnessed it. But we have a broken medical liability system, and it is bringing down that greatness. By pulling together, we are going to be able to deliver to the American people a system that works, and this will be a major step forward.

MEDICAL CARE ACCESS PROTECTION ACT OF 2006—MOTION TO PROCEED

CLOTURE MOTION

Mr. FRIST. Mr. President, we have been in discussions with the Democratic leader, and we have agreed to a plan for the next several days that I will outline now and I will place in order now with the next series of requests.

We have set aside next week to address several important bills relating to health care issues, but as I understand it, there will be objections to proceeding on these bills. Because there is objection to proceeding on the bills or bringing them forth and debating them and amending them, we have to go through a process to overcome that obstruction.

I now move to proceed to Calendar No. 422, S. 22, the Medical Care Access Protection Act of 2006, and I send a cloture motion to the desk.

The ACTING PRESIDENT pro tempore. The cloture motion having been presented under rule XXII, the Chair directs the clerk to read the motion.

The 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, do hereby move to bring to a close debate on the motion to proceed to S. 22: A bill to improve patient access to health care services and provide improved medical care by reducing the excessive burden the liability system places on the health care delivery system.

Bill Frist, Johnny Isakson, Sam Brownback, John Thune, Thad Cochran, Wayne Allard, John Ensign, Pat Roberts, Larry Craig, Ted Stevens, David Vitter, John McCain, Lamar Alexander, Norm Coleman, Judd Gregg, John Sununu, Craig Thomas.

Mr. FRIST. Mr. President, I now withdraw the motion to proceed.

HEALTHY MOTHERS AND HEALTHY BABIES ACCESS TO CARE ACT—MOTION TO PROCEED

CLOTURE MOTION

Mr. FRIST. Mr. President, I move to proceed to Calendar No. 423, S. 23, the Healthy Mothers and Healthy Babies Access to Care Act, and I send a cloture motion to the desk.

The ACTING PRESIDENT pro tempore. The cloture motion having been presented under rule XXII, the Chair directs the clerk to read the motion.

The 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, do hereby move to bring to a close debate on the motion to proceed to S. 23: A bill to improve women's access to health care services and provide improved medical care by reducing the excessive burden the liability system places on the delivery of obstetrical and gynecological services.

Bill Frist, Johnny Isakson, Sam Brownback, John Thune, Thad Cochran, Wayne Allard, John Ensign, Pat Roberts, Larry Craig, Ted Stevens, David Vitter, John McCain, Lamar Alexander, Norm Coleman, Judd Gregg, John Sununu, Craig Thomas.

Mr. FRIST. Mr. President, I now withdraw the motion to proceed.

I ask unanimous consent that notwithstanding rule XXII, the vote on the first motion to invoke cloture occur at 5:15 p.m. on Monday, May 8; provided further that if cloture is not invoked on that motion, then the Senate proceed immediately to a vote on the second cloture motion.

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

HEALTH INSURANCE MARKETPLACE MODERNIZATION AND AFFORDABILITY ACT OF 2006—MOTION TO PROCEED

CLOTURE MOTION

Mr. FRIST. Mr. President, I move to proceed to Calendar No. 417, S. 1955, the Small Business Health Plan bill, and I send a cloture motion to the desk.

The ACTING PRESIDENT pro tempore. The cloture motion having been presented under rule XXII, the Chair directs the clerk to read the motion.

The 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, do hereby move to bring to a close debate on the motion to proceed to Calendar No. 417, S. 1955, Health Insurance Marketplace Modernization and Affordability Act of 2005.

Bill Frist, Johnny Isakson, Sam Brownback, John Thune, Thad Cochran, Wayne Allard, John Ensign, Richard Shelby, Larry Craig, Ted Stevens, John McCain, Lamar Alexander, Norm Coleman, Judd Gregg, Pat Roberts, Craig Thomas, Richard Burr.

Mr. FRIST. Mr. President, I withdraw the motion to proceed.

Mr. President, I ask unanimous consent that on Monday, May 8, the time for debate be divided as follows: 1:30 p.m. to 2 p.m., minority control; and 2 p.m. to 2:30 p.m., majority control. Further, that the time rotate under this format, with the final time from 5 p.m. to 5:15 p.m. under majority control. Finally, I ask unanimous consent that the three live quorums related to the cloture motions be waived.

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

Mr. FRIST. Mr. President, to summarize what we just went through and where we are, we have scheduled for next week the consideration of several important bills related to health care.

Given the objection to the motion to proceed to these bills, it was necessary to file cloture motions on the motions to proceed; thus, we now have scheduled up to two cloture motions on Monday at 5:15, beginning at 5:15. The first will be on a motion to proceed to the Medical Care Access Protection Act, and the second vote will be on the cloture motion relative to the motion to proceed to the Healthy Mothers and Healthy Babies Access to Care Act. If those cloture motions fail, on Tuesday morning we will have a cloture vote on proceeding to the Small Business Health Plans legislation.

Mr. President, the way this is configured is that we have a vote on the first medical liability bill, which is a comprehensive bill built pretty much on this Texas model that I referred to in my earlier remarks. If that is successful, we will continue the debate on that. If it is not, we would continue with another medical liability bill that has a slightly different focus to it, again based on the Texas model. It will focus on in particular where medical liability premiums are felt most acutely: in women's health care and babies' health care, pediatrics and maternal health care, and that is obstetricians and gynecologists. I hope we will be allowed to proceed and debate on those two. We will be voting on both of those, or at least one of those but up to two on Monday night, with no votes after those two votes on Monday night.

Depending on the outcome but following whatever that outcome is, we will turn to the small business health reform plans. The small business health plans, as we know, have the potential for addressing many of the issues I talked to earlier—the cost issue, the access issue, and the quality issue as well—because what they do is allow small businesses—and most businesses in this country are small businesses; they create about three-quarters of the jobs in this country—they allow small businesses to group together so that they will have that purchasing clout which we know comes with numbers. When we add that purchasing clout, you can go and bargain for better prices, negotiate for better prices, and with that comes a lower cost of health care to all people who work in small businesses that participate. With that, people who don't have health care today who work for small businesses will be able to get a plan that is within reach, instead of the hugely expensive plans that are out there today.

So I am very excited about addressing the skyrocketing costs of health care head-on: choice, consumerism, patient-centered health care, all of which will be centered on the medical liability issue we will be debating and the small business health plans.

Mr. President, I yield the floor.

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

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

The legislative clerk proceeded to call the roll.

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

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

MEDICAL CARE ACCESS PROTECTION ACT OF 2006—MOTION TO PROCEED—Continued

Mr. FRIST. Mr. President, I move to proceed to S. 22, so that Senators may speak to that motion.

The ACTING PRESIDENT pro tempore. The motion is pending.

Mr. FRIST. Mr. President, over the course of the morning we will have various speakers coming in to talk about a number of issues focusing on the issues I have spoken to on health care and the cost of health care and how it affects people in their everyday lives.

CINCO DE MAYO AND THE CONTRIBUTIONS OF MEXICAN AMERICANS

Mr. FRIST. Mr. President, I also will take a moment to interject what is a celebration today. It started with two events that happened 144 years ago this week, two events that signify great advances in the history of freedom in North America.

On May 1, 1862, Admiral David G. Farragut—the first Latino flag officer in any branch of the U.S. military and the first person awarded the rank of Admiral in the U.S. Navy—won a decisive engagement with Confederate naval vessels in New Orleans Harbor.

This was, perhaps, the most important naval engagement of the Civil War.

While almost 3 more years of difficult fighting still awaited Union troops, Farragut's victory at New Orleans: cut the Confederacy in half; granted union forces control of the Mississippi; contributed greatly to the Union victory; and, in turn, helped end slavery.

As Farragut's troops occupied the city of New Orleans, another event over 1,000 miles away was unfolding.

On May 5, 1862, a fighting force of 2,000 peasants confronted 6,000 well-equipped and expertly trained French troops. The French had come to conquer the small town. Instead, they found a fierce and proud resistance, and the peasant army prevailed.

A Mexican defeat that day could have even undone Farragut's victory at New Orleans.

French Emperor Napoleon III hated the United States and had clear sympathies with the Confederacy and its slave-holding culture.

With a base in Mexico, Napoleon's forces might have crossed the Rio Grande to offer support to the South in its battle with Union forces.

And Union forces were fully aware of the threat. General Phillip Sheridan supplied the Mexicans with the ammunition and equipment they needed to expel the French. Some Americans even joined the Mexican Army.

The battles were waged and won.

The Union prevailed, and Mexico successfully fought off the French invasion.

The Mexican victory on Cinco de Mayo wiped the last vestige of indigenous monarchy from the North American continent.

As the Cinco de Mayo story illustrates, our countries have a long and intertwined history. It has, at times, been a difficult one. But it has also been one of shared victory.

Cinco de Mayo also gives us an opportunity to recognize the invaluable contributions of Mexican Americans to our culture.

Through their vibrant traditions and deep commitment to faith, family, and country, Mexican Americans have enriched our society.

They are our friends and neighbors, our fellow citizens and protectors. Citizens of Mexican descent are, at this very moment, fighting in Iraq and Afghanistan to protect the American homeland.

So, today, we celebrate the unique contributions of our Mexican American comrades, and we toast our future, shared achievements.

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

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

The assistant legislative clerk proceeded to call the roll.

Mr. REID. Mr. President, I ask unanimous consent that the order for the quorum call be dispensed with.

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

Mr. REID. Mr. President, today 46 million Americans are living with no health insurance.

I am not sure everyone understands what it means to have no health insurance. We as Senators don't have a problem with that. We have insurance. I think it is very good insurance.

I can remember my parents having no health insurance when my dad worked in the mines. Once in a while he would go someplace else to work and he would have some insurance. After my dad passed away my mother had Medicare. That was the best insurance she ever had.

You would think that since I was a boy, America would have made progress in this health care problem, but it has gone the other way. More people are uninsured now than before. There is a real health care crisis in America today. The crisis can be felt in people's homes, in neighborhoods, in the workplace, and even corporate board rooms because they realize it is a problem when 46 million people have no health insurance.

Health care costs are going up and up. In all of the newspapers around America today there is an article which talks about what has happened. More people are forced to opt out of employers' insurance, the article says. A growing number of Americans who