

The PRESIDING OFFICER. The Senator from Pennsylvania.

UNANIMOUS CONSENT AGREEMENT—HOUSE MESSAGE TO ACCOMPANY S. 3 AND EXECUTIVE CALENDAR

Mr. SANTORUM. Mr. President, I ask unanimous consent that at 1:40 the Senate resume consideration of the House message to accompany S. 3, the partial-birth abortion ban bill; provided further that time on the motion to disagree be limited to 1 hour equally divided in the usual form; further, that following the use or yielding back of the time the Senate proceed to a vote on the motion with all other provisions of the agreement remaining in effect.

I further ask unanimous consent that following the vote, the Senate immediately proceed to executive session to consecutive votes on the following nominations on today's Executive Calendar: Calendar Nos. 352, 347, 348, 350, and 351.

Further, I ask unanimous consent that there be 2 minutes equally divided between the two leaders or their respective designees prior to each vote; further, that following the votes the motions to reconsider be laid upon the table, the President be immediately notified of the Senate's action, and the Senate then return to legislative session.

The PRESIDING OFFICER. Is there objection?

The Senator from Nevada.

Mr. REID. Mr. President, the 30 minutes will begin on our side in 10 minutes. I want to make sure the RECORD reflects that Senator BOXER will control that time. There are a number of Senators who wish to speak at that time. But I ask if my friend, the Senator from Pennsylvania, would allow her, Senator BOXER, to have the last 10 minutes to close debate on this matter?

Mr. SANTORUM. Sure.

The PRESIDING OFFICER. Is there objection to the Senator's request? Without objection, it is so ordered.

Mr. REID. Mr. President, I would also say the Senator from Illinois who was here was going to speak for up to 8 minutes. Prior to this beginning, I wonder if he still wishes to speak, the Senator from Illinois?

I ask unanimous consent that the Senator from Illinois be recognized until 1:40, when the debate on partial-birth abortion is finalized.

The PRESIDING OFFICER. Is there objection? The Senator from Illinois.

HEALTH INSURANCE

Mr. DURBIN. Mr. President, I will be very brief, but I wanted to make a point on the RECORD relative to some messages and information I received from my State which I would like to share with my colleagues.

During the month of August, I went back across the State of Illinois and

visited with a lot of people, including chambers of commerce, labor unions, families, and community leaders. I would say for the third or fourth consecutive year, the report I received from businesses in particular in my State was identical. When I asked them what their major concern was, time and again they came back and said the same thing. It is the No. 1 concern of businesses across America when it comes to the cost of doing business and competitiveness. It is the No. 1 concern of labor unions across America when it comes to fair compensation for their employees. It is the No. 1 concern of more and more families across the United States as they realize how vulnerable they are.

What is that concern? The cost of health insurance. Time and time again that issue resurfaces. I have to tell my constituents in Illinois, my friends in business and labor, that I understand what they are saying. But this is an issue which has gone unaddressed in Washington in the time I have been here, for the last 7 years, in the Senate. It is as if the people in the Senate, the men and women like myself who are talking back home, are not listening or at least they are not coming back here and saying: What can we do about this?

There are some who have an automatic reaction and say: Don't jump in with a Government solution. The market will solve this problem.

I would say to them that the market is addressing this problem. The market of health insurance in America is reducing coverage, reducing their exposure to risk, and raising costs to increase their profitability.

What I am about to say is not just anecdotal evidence of a trip around Illinois this year or for the last 4 years, but it is the same thing we found when the Kaiser Family Foundation released their annual report on health insurance across America, and I commend it to those following this debate: KFF.ORG, KFF.ORG. Go to that Web site and you will find this report on the cost of health insurance.

According to this report, monthly premiums for employer-sponsored health insurance went up 13.9 percent between 2002 and 2003, the third successive year of double-digit increases in the cost of health insurance, while inflation in general is going up 2.2 percent. Of course workers are paying more out of pocket and receiving less coverage.

Small businesses are getting hammered if they can afford health insurance. If they can't afford it, frankly, they are on their own, and that is not a good outcome here. The question is, Why are these rates going up?

When the Kaiser Foundation asked the businesses what they thought, the No. 1 reason was the cost of prescription drugs going through the roof.

I talked to the CEO of the biggest company in Illinois during my August recess. They are self-insured for health. He told me they are now spending more

money on prescription drugs for their employees and retirees than they are for the rest of their health insurance costs—more on prescription drugs. Prescription drugs are skyrocketing in cost. We are doing nothing about it, either in the prescription drug benefit for seniors or in any other legislation.

The second reason, of course, for the cost of health insurance going up is the cost of hospital services. So you might ask, What about the health insurance companies? How are they doing? That is interesting.

The Weiss Ratings, an insurance rating agency, looked at the profits for 519 health insurance companies. They evaluated these companies and they learned that between 2001 and 2002, of these 519 health insurance companies, their profits went up 77 percent. The same review had shown a 25-percent increase in the years 2000 to 2001. And the trend is continuing this year.

Have you seen the ads for PacificCare Health Systems where the whale jumps out of the water and splashes in? In the second quarter of 2003, PacificCare Health Systems, which serves 12 million Americans, reported a profit increase of 260 percent. UnitedHealth Group reported a 35-percent increase. Aetna reported a 28-percent increase.

These are extraordinary profit margins in the midst of a recession in America. They are profit margins at the expense of businesses, their employees, of labor unions and their members, and families across America. For my colleagues who say it is hands off, Government cannot get involved in this debate, this is an issue to be resolved in the marketplace, I remind you again it is being resolved in the marketplace as health insurance premiums skyrocket and coverage disappears.

A friend of mine with a small business in downstate Illinois and 10 employees had 1 employee whose wife had a baby who was sick. The baby incurred great costs at the hospital. The next year, when his small business went in for their health insurance, they were told their premiums would double—a 100-percent increase from one year to the next because of one claim.

This man and his wife had this company in their family for generations. They called together the 10 employees and said: We cannot do it. We cannot pay it anymore. We are going to give you the money which we would have put in your monthly paycheck each month for your health insurance. You have to go try to find coverage.

The family with the sick baby could not find any. The others went out and did the best they could. I asked the owner of the company, who was genuinely saddened when it reached that point, what did it mean? He said: I'm in the open market for health insurance. It meant at his age, about 58-years-of-age, and his wife about the same, that whatever they make a claim for under their health insurance policy this year will be excluded from next year.

Whether it is part of your body or disease or illness, you are stuck.

Next year it is excluded.

Let me tell you the lengths to which they have gone. When this woman, who is now with her husband in the private health insurance market, goes in for a mammogram and they say, Where should we send the results, she says: Send them to me personally. I don't want them to go to a doctor because if they become part of my medical record, it will be used against me when we apply for health insurance next year.

That is what it has come to and that is what people are facing across America—outrageous copayments, increases in premiums they cannot afford, and less and less coverage every year.

What have we done about it? What has this Government done to stand behind these businesses and labor unions and families? Absolutely nothing.

That is unacceptable. If we really want to address an issue that business cares about and labor cares about, this is the issue.

If you are concerned about competitiveness, consider this: The cost of health insurance is embedded in the cost of every American product that we export overseas. In other countries, the government provides the health insurance. It is a government obligation, paid for in taxes. The individual companies do not have to add it to the cost of the car they are selling in the United States. But we do. Every time we produce something in the United States with American workers, covered by health insurance premiums that are going through the roof, the cost of that health insurance is embedded in every product and, frankly, takes away from our competitiveness.

I challenge myself as a Senator here and my colleagues. We cannot escape the responsibility to address this issue honestly, and we cannot escape the reality that the marketplace is now driving health insurance beyond the reach of conscientious businesses that want to protect their employees and labor unions that are trying to stand up for working men and women and of families who, if they are left to their own devices, will find this to be a very cruel alternative when they seek health insurance.

I yield the floor.

MEASURE PLACED ON THE CALENDAR—S. 1618

Mr. SANTORUM. Mr. President, I understand S. 1618 is at the desk and is due for a second reading.

The PRESIDING OFFICER. The clerk will read the bill for the second time.

The legislative clerk read as follows:

A bill (S. 1618) to reauthorize Federal Aviation Administration Programs for the period beginning on October 1, 2003, and ending on March 31, 2004, and for other purposes.

Mr. SANTORUM. I object to further proceedings on the bill.

The PRESIDING OFFICER. Objection is heard. The bill will be placed on the calendar.

The PRESIDING OFFICER. The Senator from Pennsylvania.

PARTIAL-BIRTH ABORTION BAN ACT OF 2003—Continued

Mr. SANTORUM. Mr. President, I believe we are now on S. 3, which is the partial-birth abortion bill?

The PRESIDING OFFICER. The Senator is correct.

Mr. SANTORUM. Mr. President, for the information of Members, we will have an hour of debate, a half hour each side, and then we will have a vote at 2:40 this afternoon, followed by a series of five votes on judges.

This is a vote that, candidly, is not necessary. It is a vote that will be 100 to nothing, or as many Senators as are still here to nothing.

It is a vote to get this bill to conference. The House passed one bill. The Senate has passed a different bill. The normal rules are you adopt a motion of disagreement and go to conference. Otherwise, you keep bouncing back and forth to the House and the Senate with a fully amendable vehicle which doesn't get you anywhere.

I am asking all of my colleagues to vote on this procedural matter to get the bill to conference. I will tell you that I fully anticipate the bill coming out of conference within a very short period of time before we recess for the rest of the year. We will have a bill that will pass here overwhelmingly. It will pass in the House overwhelmingly and be signed by the President, which is the objective I think certainly the vast majority of the people in this Chamber would like to see done.

I understand there may be some reasons the Senator from California wanted to have this debate and have this vote. This is probably the only time where all of us will agree on this issue and vote for this resolution and get it to conference. We will then move, hopefully expeditiously, from that point.

I see the Senator from New Jersey is here. I will be happy to yield the floor and allow him time to speak.

The PRESIDING OFFICER. The Senator from New Jersey.

Mr. CORZINE. Mr. President, thank you. I thank the Senator from Pennsylvania.

Mr. President, I come to the floor and stand with my good friend, Senator BOXER, and the women across America to express my support for the landmark Roe v. Wade decision and the importance of protecting a woman's fundamental right to choose. I think that really is what the issue is about—not the parliamentary procedures we are talking about. Earlier this year, we marked the 30th anniversary of this critical decision which clearly established a woman's fundamental right to reproductive choice. I strongly support that right. The decision about this dif-

ficult choice for an individual should be made by the woman, her doctor, and her moral counsel and, in my view, not by politicians and not by Government. Simply put, I trust the women of America to make their own health and moral decisions without the intrusion of Government. I think that is what Roe v. Wade indicates.

Having said that, I recognize women and men of good faith can and will reach different conclusions about this difficult moral question involved in the debate. But Roe v. Wade is the law of the land. I am very troubled by this administration's—and frankly Congress's—attempts to undermine that basic right by that decision. Whether it is through the so-called partial-birth abortion bill, reduced access to family planning, efforts in redefining the legal status of fetuses, or far-right traditional nominations, this administration and this Congress are constantly knowingly chipping away at women's fundamental freedoms.

That is why I was pleased when, in the context of the so-called partial-birth bill, the Senate adopted the Harkin resolution expressing support for Roe v. Wade, which is what the debate is about today.

First, let me make clear I oppose the underlying bill, and I still do. I believe the bill is unconstitutional, and it doesn't take into account the health of the woman that the Supreme Court requires. Its practical effect would be to deny women access to some of the safest procedures at all stages. That said, with the Harkin amendment included, I was at least partially satisfied that the Senate has reaffirmed the importance of Roe v. Wade.

Again, the reason we are having this debate is to make sure our conferees are embracing something we supported here in an open vote on the floor of the Senate. All of us know the House has stripped away the resolution affirming Roe, laying bare, in my view, the true purpose of the underlying legislation—to undermine Roe and ultimately roll back women's rights.

When Roe v. Wade was decided in January of 1973, abortion, except to save a woman's life, was banned in two-thirds of the States, including my home State of New Jersey. Roe rendered these laws unconstitutional, making abortion services safer and more accessible to women throughout the country—not just to a select few—and certainly on a safe basis. Many of these statutes are still on the books waiting for an anti-choice majority in the Supreme Court to overrule Roe.

I hope my colleagues will think long and hard about the implications of forsaking Roe. We need to be very careful to avoid returning to a period in which abortion was illegal and when the only choice women had was to seek illegal and unsafe abortions—particularly when economic position determined who had a safe choice. In those days, thousands of women died each year as a direct result of the abortion ban. In