

said before, we celebrate our diversity as the sharing of our cultures, traditions, and languages; it is what makes us so special in Hawaii. Our diversity unifies us.

Colleagues, I want you to know that during the period of the Kingdom, many people traveled through and to Hawaii. In 1832, records indicate that there were 400 foreigners in Hawaii. Starting in 1852, sugar plantations began to recruit foreign workers to Hawaii. They included Chinese, Portuguese, Japanese, and Filipino workers. While many of these workers were temporary and returned to their homelands, a number of them stayed in Hawaii and have embraced the culture and traditions of Hawaii's indigenous peoples.

The opponents of this legislation first tried to represent this issue as a native vs. non-native issue. They failed to understand how we celebrate diversity in my home State and how so many embrace all things Hawaiian whether or not they can trace their lineage back to the aboriginal, indigenous peoples of Hawaii. The opponents also fail to understand the tremendous respect the people of Hawaii have for Native Hawaiian culture and the fact that the average person is not threatened by the idea of Native Hawaiians having recognition. The people of Hawaii understand that the preservation of rights for Native Hawaiians does not happen to their detriment.

The opponents of this legislation have tried to spread misinformation about the bill to lead non-Hawaiians to believe that their rights will be taken away if the bill is passed. This is not true. In the days to come I will elaborate more. Today, however, I wanted to share Hawaii's history and to explain the celebration of diversity and of multiculturalism in my home state. I am proud of my constituents—proud of their many cultures and traditions—and the fact that they are secure enough in their heritage to be able to support parity in federal policies for Native Hawaiians.

I ask my colleagues to join me in helping to do what is right, what is just for Native Hawaiians.

I look forward to the support that I will receive from my colleagues.

Thank you, Mr. President, for this opportunity to tell you about my history.

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 President, I ask unanimous consent that the order for the quorum call be rescinded.

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

TAX INCREASE PREVENTION ACT

Mr. McCONNELL. Mr. President, we have had a very good week in the Senate. We had an opportunity to pass the

Tax Increase Prevention Act an hour or so ago, which is going to make an important difference not only in the lives of a great number of individual Americans, but also it will be very critical in continuing this robust economy that America currently enjoys.

I commend Members of the Senate for stepping to the plate and passing this very important measure, and particular congratulations go to Chairman CHUCK GRASSLEY of the Finance Committee for his tenacious pursuit of this very important piece of legislation.

REAUTHORIZATION OF THE SECURE RURAL SCHOOLS AND COMMUNITY SELF-DETERMINATION ACT OF 2000

Mr. SMITH. Mr. President, I rise today to engage in a colloquy with the majority leader, the Senator from Tennessee, regarding the reauthorization of the Secure Rural Schools and Community Self-Determination Act of 2000. This program is critical to bridge the gap in my State and others between what was, what is, and what will be the management direction of Federal forests. For nearly 100 years, counties across the country have shared in the productivity of Federal lands. They have received 25 percent of revenues derived from commercial activity on Forest Service lands, and under a separate statute—50 percent of BLM revenues derived from the O & C lands of western Oregon. In areas that are dominated by Federal forests, these revenues also dominate county government budgets—budgets that pay for public schools, road maintenance and public safety.

This issue is not one of permanently replacing forest productivity with a Government check. While I am a lead proponent of the safety net, which was not intended to be permanent, I have also tried very hard to restore common sense, predictability and productivity to the management of Federal forests. These lands are both ecological and economic assets that must be treated better.

Unfortunately, that day has not yet arrived. That is why we created a safety net in 2000. That is why we also passed the Healthy Forests Restoration Act. That is why we must consider dealing with postcatastrophic event legislation, why we must continue funding the Forest Service and BLM forest management programs and do the other things that are needed to create real jobs in the woods and return viability to rural communities.

Again, the day when forests are ecologically and economically sustainable has not yet arrived. What has arrived is an impending disaster if the county payments safety net is not extended. Oregon counties are not alone facing the hard times. Places such as Clearwater County, ID; Chelan County, WA; and Siskiyou County, CA, will also be devastated by failure to make a short-term extension of the Secure Rural Schools Act.

A commitment from the majority leader to work with me to identify offsets for an extension of the Secure Rural Schools Act will embolden our efforts and reassure rural counties in my State that this issue is of the utmost importance to the Senate.

Mr. FRIST. I thank the Senator from Oregon for his dedication to his State and all States that have been affected by the downturn in Federal timber receipts. He has been in close contact with me, the assistant majority leader and the chairman of the Senate Finance Committee communicating the significance and urgency of his cause. I commit to him to address the needs of rural counties and schools in Oregon and elsewhere. Working with the committees of jurisdiction, I commit to a thorough search for funding offsets so that these critical rural education programs can continue to serve the youth of those communities.

Mr. GRASSLEY. I am aware of Senator SMITH's concerns and pledge to work with him within the Finance Committee's jurisdiction, especially in the area of tax-exempt financing, to find the resources to assist the hard-hit areas to which he refers.

Mr. SMITH. I appreciate the commitment of the Senator from Tennessee to help identify the needed offsets to extend the Secure Rural Schools program and look forward to working with him closely in the coming weeks. I also thank the chairman of the Finance Committee for his consideration of this issue.

MEDICAL CARE ACCESS PROTECTION ACT OF 2006 AND HEALTHY MOTHERS AND HEALTHY BABIES ACCESS TO CARE ACT

Mr. KYL. Mr. President, I regret that, twice this week, the Senate has failed to address the problem of medical liability costs. I support S. 22, the Medical Care Access Protection Act of 2006, and S. 23, the Healthy Mothers and Healthy Babies Access to Care Act. Both of these bills would address the very real problem of access to medical care for people in my State and across the country. We have a crisis in the United States, and in particular in Arizona, when it comes to the availability of providers.

The terrible distortions in our medical liability system have been with us for years. In Arizona, we have seen emergency rooms that cannot remain open because there are not enough trauma surgeons and specialists to staff the ER, physicians who have decided to move from my State to States with more supportive medical liability law, and finally, doctors who have opted to retire early. It is troubling to have highly trained, dedicated, qualified members of the medical community leave or to give up their profession—all to the detriment of their patients.

This shrinking availability of physicians is due in part to the high insurance premiums that doctors are facing.

In just 5 years, the premiums for general surgery in Arizona increased from \$37,804 to \$56,862—an increase of 50 percent. For obstetricians in Arizona, premiums in 2001 were \$49,436 and are now averaging \$72,734. These premiums are rising at a staggering rate in part because juries in malpractice cases have given high-dollar verdicts to plaintiffs. Some of the verdicts are merited; many, we know, are not. In the end, these legal excesses damage the medical liability system, push up premiums, and lead to the early exodus of physicians. The system is broken and it is patients who suffer.

Hard-working men and women who need emergency medical treatment face longer waiting times when there are too few physicians to staff hospitals. Instead of a few days, it takes weeks for children to be seen for complex conditions because of the lack of pediatric specialists. Our seniors are forced to drive longer distances because they are told that physicians are no longer seeing any new Medicare patients. The situation for both physicians and patients has grown bleak, and care is compromised.

We should address this by enacting meaningful medical liability reform. S. 22 provides full recovery of the cost of necessary medical expenses and lost wages in a medical negligence case. When a wrong has occurred, it is important that the patient be able to gain a legal settlement or verdict that meets his or her future needs. This has always been a hallmark of medical liability legislation I have supported because it is in the best interest of the patient. New to S. 22 is the Texas model of caps on noneconomic damages, limiting them to \$750,000 for noneconomic damages from three parties. I hear constantly from physicians who share with me the escalating costs of medical liability insurance and the ways they have had to alter their practice to pay these bills.

We have had an exodus of specialists from emergency room on-call rosters, and as you might have expected, hospitals are having trouble recruiting new physicians to the area. Compared to the national average of 283 physicians per 100,000 people, Arizona has only 207 physicians per 100,000 people.

I recently got an e-mail from an emergency physician, Todd Taylor of Phoenix, who is leaving the clinical practice to go to Tennessee. He is giving up medicine at the age of 49, in part, he said, because he sees a bad situation getting worse. The American College of Emergency Physicians recently issued a “national report card” and graded the medical liability environment in Arizona a D-minus.

I also heard about a woman in Arizona who returned to her obstetrician to deliver her second child, only to find out that physician had stopped delivering babies because of the high liability premiums. Arizona cannot afford to have physicians leave the State or curtail their practices.

There are areas of my State like Apache County that don't have even a single obstetrician. That means women in labor have to drive to neighboring counties to deliver their children. Apache had only 34 physicians in the whole county in 2004 and has seen even more physicians leave the area since then. One physician there, Thomas Bennett, said that his liability premiums, coupled with decreasing reimbursement, forced him out of his practice after 25 years. Dr. Bennett was an OB/GYN and always practiced in rural areas. What a loss to that community and to our State. S. 23, the second bill I mentioned, would provide liability protection for those who deliver babies and might keep physicians in practice or encourage obstetricians to practice in underserved areas like Apache County, AZ.

This is not how the system was ever intended to work. If we want women and babies to enjoy the medical care they expect and deserve, we need to find ways to encourage physicians to practice throughout my State and throughout the country. We cannot afford to have doctors relocating to different States to find more favorable laws and for communities to go without vital services.

The health care community has asked for the protections it needs to continue to provide services.

My Senate colleagues should do the right thing for patients, physicians, and hospitals, and reconsider their opposition to medical liability reform now. We will keep coming back until they are willing to address this situation—not just for the medical community but for all of the patients it serves.

Mr. CHAMBLISS. Mr. President, I rise today to speak on the issue of medical liability reform. Earlier this week, we attempted to bring the issue of medical liability reform to the Senate floor for a debate. Two bills were offered, S. 22, the Medical Care Access Protection Act, and S. 23, the Healthy Mothers and Healthy Babies Access to Care Act, both medical liability reform bills. We had two votes that would have simply allowed us to proceed to a debate on these two bills. Both of these procedural motions failed, and unfortunately we were unable to discuss this very important issue in the United States Senate.

The American Medical Association has declared a medical malpractice crisis in 21 States, including my home State of Georgia. Hospitals, physicians, and patients in Georgia and across the Nation are being negatively impacted by rising costs in medical care and medical liability insurance premiums. Many health care providers have left their practices, retired, or moved to another State. As a result, we have seen a reduction in access to health care services and an adverse impact on the health and well-being of the citizens of Georgia. A new medical liability law in Georgia hopefully will help

to improve the quality of health care services and assist in lowering the cost of health care liability insurance in my State. I applaud the lawmakers in the State of Georgia who took the time to address this issue on the State level and craft a law that will be beneficial to our physicians and patients.

I was disappointed that the Senate was not able to bring this discussion to the floor. Many of my colleagues and I would have enjoyed the opportunity to participate in a healthy debate. While I do not agree with all aspects of the two proposed pieces of legislation, it is vital that we move forward with a discussion if we ever expect to find a solution. Many of the issues that come before the Senate are not easy ones. In order to find compromises, this body must participate in debates.

Meaningful medical liability reform, at the Federal level, should help rid our court system of frivolous lawsuits, while addressing those who are seriously injured because of negligence. This reform would have to allow injured victims compensation for economic damages—medical expenses, rehabilitation costs, and loss of wages and future earnings—as well as reasonable awards for pain and suffering. We need a system that allows patients the right to pursue any cause where injury is the result of negligence; while at the same time, we need a system that provides reasonable protection to hospitals and physicians.

Our doctors throughout the country do amazing and heroic things everyday. I commend all of them for the hard work and long hours they put in to help ensure the health and wellness of the citizens in our great Nation. I am disappointed that the Senate could not move forward with a discussion on medical liability reform.

HONORING OUR ARMED FORCES

STAFF SERGEANT GREGORY WAGNER

Mr. JOHNSON. Mr. President, I rise today to pay tribute to SSG Greg Wagner and his heroic service to our country. As a member of the South Dakota National Guard, Staff Sergeant Wagner was deployed to Iraq with the Battery C, 1st Battalion, 147th Field Artillery based out of Yankton. On May 8, 2006, he died when his convoy was attacked in a Baghdad neighborhood.

Greg graduated in 1989 from Hanson High School in Alexandria. Soon after his graduation, he enlisted in the South Dakota National Guard. Al Blankenship, the Commander of the American Legion in Alexandria, remembers him as a true military man. Dedicated to the South Dakota National Guard, he worked full time as a heavy equipment mechanic at the National Guard maintenance complex in Mitchell until his unit was deployed in October 2005. Greg was a team leader for his unit, which was tasked with training and evaluating the Iraqi police force in one of the city's police districts.