Over the years, the Congress—with the full knowledge of how the courts have interpreted this exemption—has never amended this exemption, nor called into question the universally held view that the exemption protects the personal privacy rights of individuals.

Given the clear legislative history and the longstanding case precedent in this area, I am deeply troubled by recent efforts to vastly—and I believe improperly—expand the scope of this exemption to reach corporations. While I do not quibble with the notion that certain corporate information should be exempt from public disclosure, I firmly believe that Congress has provided meaningful and adequate protections for sensitive corporate information in other parts of FOIA. Indeed, Congress specifically enacted FOIA exemption 4 to protect trade secrets and other sensitive corporate information from public disclosure. Tellingly, American corporations have successfully relied upon exemption 4 for decades, to safeguard their sensitive business information when it is shared with the government.

I fear that vastly expanding the personal privacy exemption for law enforcement records would close a vital window into how our government works. I also fear that extending this exemption to corporations would permit corporations to shield from public view critical information about public health and safety, environmental dangers, and financial misconduct, among other things—to the great detriment of the people's right to know and to our democracy.

As Senator Hart wisely noted during the debate of the 1974 FOIA amendments, ''survival for a society such as ours hinges very importantly on the access that a citizen can have to the performance of those he has hired.'' I sincerely hope that our Nation's highest Court will carefully consider these words and that the Court will narrowly construe the personal privacy exemption, consistent with congressional intent. Should the Court decide to do otherwise, I will work with others in the Congress to ensure that FOIA, and specifically the personal privacy exemption for law enforcement records, remains a meaningful safeguard for the American people's right to know.

BREAST CANCER AWARENESS MONTH

Mr. BAUCUS. Mr. President, women are the backbone of the American family and a driving force of our economy. They are our mothers, sisters, wives, and daughters. Women are the heart of American families and local communities.

October is National Breast Cancer Awareness Month, and this October we have many reasons to reflect and celebrate. Thanks to the concerted efforts of the public and private sectors, we have come a long way to ensuring that women have long, healthy lives.

Twenty years ago, Congress created the National Breast and Cervical Cancer Early Detection Program. Today, the program provides screening services for breast and cervical cancer in all 50 States, the District of Columbia, five U.S. territories, and 12 American Indian or Alaska Native tribes and tribal organizations. Since the program got started, almost 4 million women have been served—giving them access to breast and cervical cancer screenings that they otherwise could not afford.

We have recently expanded opportunities for women across the country to be screened by including free preventive care, like mammograms and cervical cancer screenings, in the new health care reform law. The Affordable Care Act eliminates all insurance copays for these screenings, which means more women will have access to early detection and more women's lives will be saved.

This October, we are also celebrating the 30th anniversary of the beginnings of Susan G. Komen for the Cure, an organization founded on Susan's sister's promise to end breast cancer forever. Today, Susan G. Komen for the Cure is the largest source of nonprofit funds dedicated to the fight against breast cancer, investing nearly $1.5 billion in grassroots advocacy for quality care and research.

These efforts have made a big difference. In the last 30 years, we have improved the rate of cancer screenings—increasing the percentage of women over 40 who receive regular mammograms from less than 30 to nearly 75 percent. We have improved the treatment outcomes for women with cancer—increasing the 5-year survival rate from 74 percent to 98 percent. We have also increased the amount of Federal funding going toward breast cancer research, prevention, and treatment—ensuring that American women benefit from the best that science has to offer.

Despite these advances, it is estimated that nearly 40,000 women will die of breast cancer this year. That means that 40,000 American families will lose their mother or grandmother, sister or daughter. We cannot let up in this fight. We made a commitment to improving women's health in health reform—ending insurance industry abuses that have disproportionately affected women for decades, providing preventive benefits tailored to meet women's unique health needs, and ensuring women of all ages have access to comprehensive, high-quality coverage.

Improving women's health has a positive effect on the whole family. According to the Department of Labor, women make four out of five health care decisions for their families and are more likely to be the caregivers when family members are ill.

Improving women's health also has a positive effect on the economy. A healthy pregnancy, for example, begins with a healthy woman and leads to long, productive lives for mother and child.

We have come a long way, but we are not there yet. I am confident that with the consistent efforts of Congress and private sector groups such as Susan G. Komen for the Cure, we will continue to make progress for years to come.

AMERICAN DIABETES MONTH.

Mr. JOHNSON. Mr. President, I rise today in recognition of November as American Diabetes Month. National studies estimate 23.6 million Americans have diabetes and a quarter of people with diabetes do not know they have this disease. The State of South Dakota is home to nearly 40,000 diabetic adults, a figure which does not take into account the number of people who are undiagnosed, who are living with prediabetes, or those under age 18 who have child-onset diabetes, which is a growing problem linked to the increase of childhood obesity.

American Diabetes Month focuses on increased awareness of the disease and its risks. The disease carries with it an increased rate of heart disease and stroke, high blood pressure, kidney disease, blindness, and amputation of the lower extremities, among other associated health problems. As the prevalence of diabetes increases, we are beginning to understand the costs to both our citizens' health and to our economy. The high costs to our government in direct medical and indirect costs, coupled with the personal costs of rising health care coverage and treatment, make diabetes control and prevention a national priority.

Throughout my career in the U.S. House and Senate, I have strongly supported initiatives that would advance research, funding and education about diabetes, such as those conducted at the National Institutes of Health, the National Institute of Diabetes and Digestive and Kidney Diseases, as well as the Centers for Disease Control and Prevention.

Two special funding programs hold great promise in our efforts to prevent and cure diabetes among South Dakotans and our Nation at large. The Special Funding Program for Type One Diabetes Research provides additional funding for the National Institutes of Health to expand its juvenile diabetes research efforts. The program has funded clinical trials to test various drugs and therapies, increased understanding about reversing complications from the disease, improving our ability to predict risk of development, and helped develop new technologies for treatment.

I also am a proud supporter of the Special Diabetes Program for Indians, SDPI, which has addressed the high incidence of diabetes among Native Americans for the past 13 years by providing grants to tribal and urban Indian programs to create or enhance diabetes prevention and treatment efforts. Through SDPI, the Indian Health