be left trapped, forced by law to purchase ObamaCare insurance but left without the means to do so. This long-term ObamaCare trend is not sustainable. We have to act, and we are.

These are just a few of the major areas that Senate Republicans are focused on as we continue working on legislative solutions to move away from ObamaCare. In doing so, we will also work toward strengthening Medicaid and preserving access to care for patients with preexisting conditions—two areas of concern for many across the Nation.

I regret that Democrats announced early on that they did not want to be part of a serious bipartisan process to move past the failures of this law. Their ObamaCare law is collapsing all around us. It is hurting Americans. It will continue to hurt even more if we allow the unsustainable status quo to continue. So we have a responsibility to act, and Senate Republicans are working together, guided by the principles I mentioned, and acting on behalf of Americans, who deserve better than the status quo, better than continuing the pain of ObamaCare.

RESERVATION OF LEADER TIME

The PRESIDING OFFICER. Under the previous order, the leadership time is reserved.

CONCLUSION OF MORNING BUSINESS

The PRESIDING OFFICER. Morning business is closed.

EXECUTIVE SESSION

EXECUTIVE CALENDAR

The PRESIDING OFFICER. Under the previous order, the Senate will proceed to executive session to resume consideration of the Mandelker nomination, which the clerk will report.

The legislative clerk read the nomination of Sigal Mandelker, of New York, to be Under Secretary for Terrorism and Financial Crimes.

The PRESIDING OFFICER. Under the previous order, the time until 11 a.m. will be equally divided between the two leaders or their designees.

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 President, I ask unanimous consent that the order for the quorum call be rescinded.

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

HEALTHCARE LEGISLATION

Mr. CORNYN. Mr. President, we continue to make progress on legislation to clean up the mess left by the meltdown of ObamaCare, at least insofar as it affects the lives of millions of people who buy their insurance on the individual markets. These are individuals and small businesses that don't have the benefit of large employer healthcare plans, and they have been devastated by ObamaCare.

This is a rescue mission. ObamaCare is collapsing for millions of people, and we have to act in the interest of countless families and small businesses that are suffering tremendous harm.

I have told the stories myself; others have likewise told the stories. We have seen those reported in the media. For many people, healthcare costs, their insurance premiums are skyrocketing. We also know that because of the distortion in the insurance markets, many insurance companies are simply pulling out of counties and States around the country, so people have no choices when it comes to purchasing their healthcare on the exchanges. Of course, many people continue to lose access to their doctors.

We need to contrast this with what was promised when ObamaCare was passed. I know it sounds repetitive, but I am afraid that if we lose sight of what the promises were with ObamaCare, we can't actually calculate the tremendous harm and the deception that was involved in actually delivering on that promise.

President Obama said that if you liked your policy, you could keep it—not true. He said if you liked your doctor, you could keep your doctor—also not true. He also said that a family of four could see an average decrease in premiums of $2,500 a year—also not true.

What is the response of our Democratic friends? We saw last night that they took to the Senate floor, and they gave impassioned speeches.

First of all, they criticized the Republicans for coming forward to try to rescue the people who were being hurt by the failures of ObamaCare. They criticized us for that. Then they said that it was a secret bill after they had rejected every entreaty—every request—for them to work with us on a bipartisan basis to rescue the people who are being hurt by the failures of ObamaCare. They rejected that.

What did they do? They came to the Senate floor. They said that they hate the bill that they have not seen yet. Then they said: Oh, it is secret. So I guess it should be one or the other. Either they hate it because they know what is in it or it is secret. It cannot be both.

The fact is that we are working hard to meet our own internal deadline because we want to make sure that the people who will be hurt in 2018, when the insurance companies raise their premiums by digits—and they are in the process of getting those approved. It will occur in the July-August timeframe when insurance companies will have to calculate what the premium is that they will have to charge. Then they will have to go to the State regulators and get approval for that premium increase. What we are being told is that the 105-percent increase in premiums on the exchanges since 2013—that is right, a 105-percent increase—is going to go up 20 percent or more next year unless we come to the rescue of those who are being harmed by ObamaCare.

We would say to our Democratic colleagues: Please do not wear yourselves out by doing something that is going to accomplish nothing. Channel all of that energy and that passion into trying to do something that will actually help the people who are being hurt today by the failures of ObamaCare.

They went even further. They said, well, they may decide just to obstruct the Senate's business on other matters that are not healthcare related until they can see the bill, which they will get to see soon.

As soon as we see the final product, we will get it scored by the Congressional Budget Office. Then we will have, literally, a vote-arama, where there will be an opportunity to debate in a fulsome and comprehensive sort of way and an opportunity to offer dozens—if not hundreds—of amendments to the bill, and we will vote. We will vote, as that is what we do.

There is nothing happening in secret here. In the fullness of time, we will all see the product we have been working on. As a result of their refusal to work with us, we have been working on it the best we can to try to accomplish something better than the failed status quo of ObamaCare.

We are told that they may obstruct the Senate's other business, including committee work. That is unrelated to the healthcare debate but, I guess, is just their lashing out in trying to find some way that they can make life a little more difficult here in the Senate with regard to our accomplishing other important work as well.

I happen to serve on the Senate Intelligence Committee. One of the things that we are doing is a comprehensive investigation of Russia's active measures undertaken during the last election. We have a committee meeting this afternoon.

Are Democrats really going to obstruct the Senate Intelligence Committee's work in conducting and completing its investigation into Russian activities in the 2016 election? Are they really going to do that? It strikes me as nuts.

On Thursday, for example, we also have a Judiciary Committee meeting that is scheduled to consider a critically important bill that I introduced with my colleague from Minnesota, Senator KLOBUCHAR, to help fight human trafficking.

Are Democrats going to obstruct our ability to conduct our business and block our consideration of bills involving human trafficking and providing relief for the victims?

This bill reauthorizes key programs that support survivors, and it provides

additional resources to Federal, State, and local law enforcement officials who are on the frontlines of fighting this heinous crime.

Will the Democratic leader from New York jeopardize the committee's ability to actually consider and pass this law? Does he plan to block a Member of his own political party from advancing her bill to fight human trafficking as well?

This strikes me as wrong for a number of reasons, and I think it would actually be appalling if our Democratic colleagues, out of their frustration—frankly, borne out of their failure to do their job and work with us to find a solution to the meltdown of ObamaCare—lashed out in a way that affected victims of human trafficking and affected the Senate's ability to conduct its investigation into the Russian activities involved in our election.

Now is not the time to grandstand and make damaging, symbolic gestures like this because, while our Democratic colleagues talked a lot last night, we did not hear anything from them about the current realities of ObamaCare and how it has failed the American people. They seem to be whistling by the graveyard. We did not hear anything about rising costs or the lack of choices.

I talked to one of my Democratic colleagues this morning. He told me that his own son was looking at $7,500 premiums a year and at a $5,000 deductible. This friend, a Democrat—and I will not reveal his name because I do not think it would be appropriate to do so—told me that his own son had to spend $12,500 out of pocket before his insurance actually kicked in. That is a disaster, not just for his son but for millions of people who are negatively affected by ObamaCare. Yet our friends across the aisle want to flail about and threaten to block trafficking legislation or an investigation into the Russian involvement in the election.

The only thing they have not done is offer a constructive alternative. That is the only thing they have not done. They have tried about everything else. You know why, of course. It is that we know what the alternative is.

Basically, they did ObamaCare all by themselves. I remember. I was here on the Senate floor, in 2010, on Christmas Eve. I think it was at about 7:30 in the morning when we had the vote out of the Senate that passed ObamaCare. It was a pure party-line vote. So the Democrats have had it all to themselves—the ability to design a healthcare system that they thought America should have. It has failed time and again.

Do you know what their current proposal is right now? It is a single-payer option that puts our country even more in debt and that we know does not work.

The reason we know it does not work is that it will, no doubt, emulate things like the British National Health Service, which has resulted in two-tiered healthcare—healthcare for people who cannot otherwise afford to pay out of their pockets to get better healthcare, with all of the problems of government-run healthcare added to it, but far-left elements of the Democratic Party want a plan that goes even further than ObamaCare. That, I believe, could ultimately be their goal—one that would increase government spending on healthcare by $518.9 billion just this year, ballooning to $6.6 trillion between 2017 and 2026, according to the Urban Institute.

Take a look at the State of California, where a similar proposal—a single-payer system—was pushed at the State level there to enact a single-payer system that would add $400 billion each year to the California State budget. I think that is roughly double the amount of the whole budget for the State of California—$400 billion each year.

It strikes me that at least one conclusion you might draw from this is that our Democratic friends' solution, rather than trying to work with us in a bipartisan way to save people who are being hurt from the failures of ObamaCare, is to say: Let's throw more money at it. That is not going to work. What it will do is add to our national debt without solving the healthcare problem, and it will further burden future generations who will have to pay that money back at some point.

We already have about $20 trillion in national debt. These young people up here who are serving as pages are going to have to deal with that, I guess, unless we have the courage to do it ourselves. It strikes me as profoundly immoral for us to spend the money today and say: Well, our kids and grandkids are going to have to pay it back later. That is immoral.

If we thought ObamaCare crushed any semblance of competition in the healthcare marketplace, the single-payer plan from our friend Senator BERNIE SANDERS, from Vermont, who is the chief spokesman for the Democrats in the Senate on what an alternative might look like, removes competition completely because it is a government takeover. It takes away even more authority from State and local governments, and it takes away choices from individuals. Forget ''if you like your doctor, you can keep your doctor. If you like your plan, you can keep your plan.'' Forget all of that because it is the opposite of what American families have repeatedly asked for.

This is what the extreme factions in the Democratic Party want. They want to expand government. They want an even larger takeover of healthcare, and they want to simply throw more money at it—as if we are not spending enough money already. Throwing more money at the problem certainly will not fix it. I suggest that it will only make things worse.

We need to be realistic about what it will take to rework our healthcare system and put patients first. I am under no illusion as to what Republicans are going to be able to come up with on our own, given the constraints of the fact that the Democrats will not work with us at all and appear not to be in the business of lifting a finger to help the millions of people who are being hurt. I am not under any illusion that what we are going to be able to come up with—and it is an interim step—is going to be perfect, as no legislation ever is, but I think we are obligated to do our best. The fact that our Democratic friends will not help at all makes it a lot harder, but I do not think we can say: It is too hard. We cannot do it. We give up.

We are committed on this side of the aisle and invite our colleagues on that side of the aisle to work with us to fix the problems that are caused by ObamaCare and to implement real healthcare reforms that will work.

First of all, we need to stabilize the market—I mentioned this earlier—and rescue millions of folks who are losing all of their access to coverage because insurance companies are simply quitting because they are bleeding money. They cannot charge a high enough premium that somebody will actually pay, so they leave the market. In Texas, alone, there are dozens of counties that have only one insurance marketplace option. If we do nothing, I fear there will be no choices. When there is only one choice, the economic backlash is pretty simple. There is no competition to drive down costs and improve the quality of coverage.

I think this is, really, in some ways, a test of our convictions. If you really do believe that competition in the marketplace improves quality and cost for the consumer, as I do, then going to a single-payer system or even trying to repair ObamaCare is the opposite of what we should do. We need to return the market to a competitive one so that families can have the ability to make choices about their healthcare, what suits their needs, not what government is going to force you to buy, and if you do not buy the government-approved plan, it is going to punish you by fining you. That is what the status quo is like under ObamaCare.

ObamaCare is so bad that, currently, we have almost 30 million people who are still uninsured. About 6.5 million of them simply pay the penalty—I think it is $695 a year now—instead of buying the government-approved healthcare plan. They figure that paying the penalty is better than buying the insurance for them. Then there are others—millions more—who simply opt out because of hardship. If the goal of ObamaCare were universal coverage, it has failed that goal as well. So we need to stabilize the market.

Secondly, we need to address ObamaCare's skyrocketing premium increases. We all know that if ObamaCare stays in place, premiums will stand only to rise for consumers. That is something I think our friends across the aisle are missing as well.

Doing nothing is not an option because people are going to be even more priced out of the marketplace, assuming they can find an insurance company to sell them healthcare.

In Texas, a Houston-area insurer has asked for a 16-percent annual rate hike for its 2018 ObamaCare coverage—a 16-percent increase over this year they want for next year. That is what doing nothing will do. It warns it might even need a greater increase just to cover its costs.

Private businesses can't actually operate in the red like the Federal Government does. Private businesses can't just print more money or run up $20 trillion in debt. So when they can't make money, they simply have to raise premiums or they have to quit the market.

The third thing we need to do is this. Remember, the first thing I said is stabilize the market. The second is attack premiums to bring them down, and the third thing we need to do is make sure we continue to protect American citizens from preexisting conditions. This is something I think everybody believes that needs to happen, without regard to political or ideological affiliation. No one should be denied basic healthcare because they have a preexisting condition, and we want to preserve those protections. That is the third goal.

The fourth goal is to make Medicaid, which is the medical safety net for millions of people, sustainable into the future. Right now we know it is not sustainable, like our other entitlement programs. The way we want to do that is by giving States more flexibility. We want to make sure that those who rely on the program don't have the rug pulled out from under them, and we want to make sure that it continues to grow year after year, but at a sustainable rate.

Right now, there is no cap, no rate of increase provided. So it is an unlimited entitlement. One of the suggestions from the House bill is to grow it each year at the rate of the consumer price index for medical costs; that is, medical inflation plus 1 percent. In other words, more money would be spent next year than this year. Even more money than next year will be spent the following year and so on, but it will be done at a sustainable rate.

Finally, we want to free the American people from the onerous ObamaCare mandates that require them to purchase insurance they don't want and can't afford. It shouldn't be a surprise to anybody that if you take the penalty away and don't force the American people to buy insurance they don't want, many of them—the younger, healthy ones, in particular—will decide not to buy it. That is called freedom of choice. That is not what ObamaCare did. ObamaCare forced people to buy something they didn't want and penalized them if they didn't. So many people will choose not to purchase it and decide to handle their healthcare in other ways—perhaps, at the emergency room, where under Federal law everybody who comes in as a medical emergency is entitled to be treated. It is not what I would tell my daughters. It is not what I would recommend for anybody, but if somebody wants to make that choice, it is certainly their right.

So I would just conclude by observing that it is shameful that Members on the other side of the aisle sit on their hands and do nothing to fix a law that continues to hurt American families. We know that regardless of who won the last election—whether it was Hillary Clinton or whether it was Donald Trump—we would have to take steps to address this failed law. So I would implore our Democratic friends to listen to their own stories, which some have recounted to me in confidence. So I won't repeat their names here, but they know this is a problem. They have heard from their constituents just like we have. So we would implore them to work with us to try to help us help our constituents. That is what I thought we were here for.

Americans are ready for healthcare reform that actually works, and it is our responsibility to do our very best to provide that to them, and that is what we intend to do.

I yield the floor.

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

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

RECOGNITION OF THE MINORITY LEADER

The PRESIDING OFFICER. The Democratic leader is recognized.

HEALTHCARE LEGISLATION

Mr. SCHUMER. Mr. President, I listened to the majority leader this morning saying that ObamaCare was collapsing and Republicans are on a rescue mission. Honestly, the gall it must take to say, after Republicans and President Trump have spent all year sabotaging the marketplace, that ObamaCare is collapsing. They have threatened to stop critical cost-sharing payments that help keep deductibles and premiums down, hurting millions of people and sowing uncertainty in the market.

There is an easy way to fix it. Instead of crying crocodile tears, Republicans should guarantee that the cost-sharing payments will be made. That is not just Democrats saying it. That is the insurers. Listen to the insurers. What do they want? They want to keep premiums down and prevent them from leaving the exchanges. They want cost-sharing, which our Republican colleagues refuse to do, and, then, in a cynical ploy, they try to blame ObamaCare.

Listen to AHIP, the Nation's largest trade group of insurers. It is nonpartisan. It is a business group. Listen to what they said about the uncertainty about cost-sharing payments. They said it was ''the single most destabilizing factor in the individual market.'' A series of insurance companies, including Blue Cross Blue Shield and Anthem, have said explicitly that uncertainty caused by President Trump and Republicans about cost-sharing is causing them to pull out of certain markets.

So this idea, this cynical ploy—after sabotaging the bill and then blaming someone else other than themselves—is pitiful.

The House bill, of course, was so bad—TrumpCare was so bad—that our Republican friends are trying to switch the blame to ObamaCare. It is not true, and it will not work.

Now, last night, Democrats held the floor well into the night to discuss the Republican plan to pass a healthcare bill in just 2 weeks that no one in America has seen, without holding a single committee hearing or a robust debate on the floor. They want to bring the bill to the floor and rush it in the dark of night for a simple reason: They are ashamed of their bill. They don't want anybody to see it, least of all the public.

Last evening, I asked the majority leader if the minority would have more than 10 hours to debate and amend the final bill. He replied that ''there will be ample opportunity to debate and amend the bill.'' So I asked again: Will we get more than 10 hours? Ten hours is the maximum the rules allow us under reconciliation. He could only reply that ''There will be ample time.''

I have a feeling the majority leader and I disagree on the definition of ''ample,'' because 10 hours of debate time—a total of 10 hours of debate time on an issue this important—is a sham. It is a farce. We would have to read the bill, prepare amendments, and consider its consequences, all in 10 hours.

This is a bill that affects one-sixth of our economy, millions of Americans. For them, it is life and death, and we are supposed to rush it through.

The Affordable Care Act, for the sake of comparison, was debated for 25 consecutive days of Senate session and 169 cumulative hours of debate time, and that was after a robust hearing and committee process. Yesterday, the majority leader basically confirmed that we Democrats might only have 10 hours total—no committee hearings, no committee markups, no airing the bill—10 hours of debate. Can my colleagues believe it? This is supposed to be a democracy where we debate the greatest issues of our time.

I asked another question of the majority leader, and I ask him now and I hope he will answer: Will our 10 hours of debate time be on the House bill or will it be on the new Senate bill that he is crafting behind closed doors? Will he let us debate the full 10 hours on the new Senate bill—hardly enough—or is he even being more cynical and doing

the 10 hours of debate on the existing House bill and then putting a substitute in—the Senate bill they have written behind closed doors—and have no debate on that? With everything terrible that is happening, that could make it even worse. So I am asking the majority leader to publicly state what his plan is in that regard.

I have never heard of a more radical or a more reckless process in my entire career in politics—10 hours of total debate on a bill that would affect one-sixth of the American economy and millions of Americans. If the Senate bill, like the House bill, results in 23 million fewer Americans with insurance—23 million Americans losing their insurance—each hour of debate time would represent 2.3 million Americans losing their insurance. Each minute of debate time would represent 40,000 Americans losing their insurance. One minute, and 40,000 people's lives are changed; 40,000 people don't have the coverage they need.

It boggles the mind that the Republican leader is moving forward this way without letting anyone but Members of the Republican Senate caucus see the bill, and even many of them have said they haven't seen it. There is only one possible reason why my friends on the other side are going along with this process—only one reason: They are ashamed of the bill they are writing.

If they were proud of the bill, they would announce it. They would have brass bands going down Main Street America, saying: Look at our great bill. They can't even whisper what it is about, they are so, so ashamed of it. That is why they are hiding it. They must be ashamed that, just like the House bill, the Senate TrumpCare bill will put healthcare out of the reach of millions of Americans just to put another tax break into the pockets of the very wealthy.

President Trump likes to end many of his tweets with one word, almost like punctuation: ''Sad,'' ''unfair,'' ''wrong.'' It turns out the President has one word to sum up his healthcare plan as well: ''Mean.''

Last week, at a White House lunch with Republican Senators, the President reportedly told them he thought the House-passed healthcare bill was mean. That is what Donald Trump said on June 13, 2017.

For once, on the topic of healthcare, I find myself agreeing with the President. His healthcare bill is mean. Cutting Medicaid to the bone is mean. Cutting treatment for opioid abuse is mean. Cutting support for families with someone in a nursing home is mean. Allowing insurers to once again discriminate against Americans with preexisting conditions is mean. Charging older Americans five times or more for their health insurance is mean.

Passing a law which would cause millions of Americans to lose their health insurance in order to give a tax break to the wealthiest among us is pretty much the textbook definition of a mean bill—a mean bill—and even the President thinks so, but just like the Republicans in the Senate, President Trump doesn't want the American people to know what he really thinks of their healthcare plan. That is why he said it was mean behind closed doors at the White House, while in public a few weeks earlier he said it is a ''great plan,'' ''very, very incredibly well-crafted.'' Those are his words, the same bill—the same bill—out to the public: Great bill, great plan; while behind closed doors, what it really is: mean.

All the plaudits the President gave the House bill turned out to be flimsy salesmanship. Speaking candidly to fellow Republicans, the President didn't say: Take up and pass the House bill. He didn't say it was a great plan or that it was very, very incredibly well-crafted. He said it was mean. My Republican friends ought to take this to heart. Even President Trump thinks what Republicans are doing on healthcare is a cruelty to the American people.

As we on this side of the aisle have said before, there is a better way. Republicans shouldn't feel like this mean bill cooked up in secret is their only option. I have invited my Republican friends to meet in the Old Senate Chamber to discuss a bipartisan way forward on healthcare. The Republican leader seems to have foreclosed that option, but the invitation remains and the sentiment remains.

Democrats are willing to work with our Republican friends on improving our healthcare system. We have significant disagreements, sure, but Republicans haven't even tried to sit down with us to hash them out. We would like to try, but if Republicans continue down this path, ignoring the principles of transparency and the open debate that defined this legislative body, we Democrats will continue to do everything we can to shine light on what our Republican friends are doing.

I yield the floor.

The PRESIDING OFFICER (Mr. JOHNSON). The Senator from Idaho.

Mr. CRAPO. Mr. President, I ask unanimous consent to speak for up to 5 minutes.

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

Mr. CRAPO. Mr. President, I rise in support of Ms. Sigal Mandelker, President Trump's nominee to be Under Secretary of the Treasury for Terrorism and Financial Crimes.

Five weeks ago, at Ms. Mandelker's hearing, members of the Banking Committee were moved by her heartfelt story of her parents' escape from the Holocaust. As her father proudly sat behind her, she explained to the committee how, as Holocaust survivors who narrowly avoided death, her parents raised her to never take for granted our safety, security, or freedom.

It was this that motivated Ms. Mandelker to public service, where she had an impressive career in law enforcement and national security at the Departments of Justice and Homeland Security before joining the private sector.

Like many Americans, she was compelled to action following 9/11 and joined to serve in Justice's counterterrorism and national security mission. Throughout the nomination process, it was obvious Ms. Mandelker would be a strong leader to defend our Nation against terrorism and illicit finance threats. She received bipartisan support from the Banking Committee in a 16-to-7 vote advancing her nomination.

Also, with bipartisan support, just last week the Senate voted on the Iran sanctions bill and our Russia sanctions amendment. Part of Ms. Mandelker's job as Under Secretary would be directly overseeing sanctions policy on Iran, Russia, North Korea, Syria, and some 25 other programs.

In fact, when asked what her top priorities would be in assuming office, she noted that, first and foremost, she will focus on the areas posing the greatest threats—those being North Korea, Iran, ISIS, Syria, and Russia. She also affirmed that she would work closely with the Banking Committee and Congress in carrying out her duties.

I don't need to stress the importance of confirming Ms. Mandelker's nomination so Treasury can carry out this important mission, especially given that the Senate vote on our sanctions package last week was so strong. The two leaders and many Senators of both parties were able to work together to pass this important, comprehensive sanctions legislation, as they should, to ensure Senate confirmation of this nomination.

Given Ms. Mandelker's strong qualifications, dedication to service and mission, and bipartisan support from this committee of jurisdiction, I urge my colleagues to support her nomination.

I yield the floor.

EXECUTIVE CALENDAR

The PRESIDING OFFICER. Under the previous order, the Senate will resume consideration of the Long nomination, which the clerk will report.

The legislative clerk read the nomination of Brock Long, of North Carolina, to be Administrator of the Federal Emergency Management Agency, Department of Homeland Security.

The PRESIDING OFFICER. Under the previous order, the question is, Will the Senate advise and consent to the Long nomination?

Mr. CRAPO. 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 legislative clerk called the roll.

Mr. CORNYN. The following Senator is necessarily absent: the Senator from South Carolina (Mr. GRAHAM).

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