

VOTE EXPLANATION

• Mr. MENENDEZ. Mr. President, I was unavailable for rollcall vote No. 259, on the nomination of Allison Eid, of Colorado, to be U.S. circuit judge for the Tenth Circuit. Had I been present, I would have voted nay.

Mr. President, I was unavailable for rollcall vote No. 260, on the motion to invoke cloture on Stephanos Bibas, of Pennsylvania, to be U.S. circuit judge for the Third Circuit. Had I been present, I would have voted nay.

Mr. President, I was unavailable for rollcall vote No. 261, on the nomination of Stephanos Bibas, of Pennsylvania, to be U.S. circuit judge for the Third Circuit. Had I been present, I would have voted nay. •

VOTE EXPLANATION

Mr. DONNELLY. Mr. President, earlier today, on rollcall vote No. 260, the motion to invoke cloture on Stephanos Bibas, of Pennsylvania, to be U.S. circuit judge for the Third District, I voted yea when I had intended to vote nay.

ARMS SALES NOTIFICATION

Mr. CORKER. Mr. President, section 36(b) of the Arms Export Control Act requires that Congress receive prior notification of certain proposed arms sales as defined by that statute. Upon such notification, the Congress has 30 calendar days during which the sale may be reviewed. The provision stipulates that, in the Senate, the notification of proposed sales shall be sent to the chairman of the Senate Foreign Relations Committee.

In keeping with the committee's intention to see that relevant information is available to the full Senate, I ask unanimous consent to have printed in the RECORD the notifications which have been received. If the cover letter references a classified annex, then such annex is available to all Senators in the office of the Foreign Relations Committee, room SD-423.

There being no objection, the material was ordered to be printed in the RECORD, as follows:

DEFENSE SECURITY
COOPERATION AGENCY,
Arlington, VA.

Hon. BOB CORKER,
Chairman, Committee on Foreign Relations,
U.S. Senate, Washington, DC.

DEAR MR. CHAIRMAN: Pursuant to the reporting requirements of Section 36(b)(1) of the Arms Export Control Act, as amended, we are forwarding herewith Transmittal No. 17-22, concerning the Department of the Air Force's proposed Letter(s) of Offer and Acceptance to the Government of Qatar for defense articles and services estimated to cost \$1.1 billion. After this letter is delivered to your office, we plan to issue a news release to notify the public of this proposed sale.

Sincerely,

CHARLES W. HOOPER, *Lieutenant
General, USA, Director.*

Enclosures.

TRANSMITTAL NO. 17-22

Notice of Proposed Issuance of Letter of Offer Pursuant to Section 36(b)(1) Of the Arms Export Control Act, as amended

(i) Prospective Purchaser: Government of Qatar

(ii) Total Estimated Value:
Major Defense Equipment* \$ 0 billion.
Other \$ 1.1 billion.
TOTAL \$ 1.1 billion.

(iii) Description and Quantity or Quantities of Articles or Services under Consideration for Purchase:

Major Defense Equipment (MDE): None

Non-MDE: Design and construction services, new parking/loading ramps, hot cargo pads, taxiways, hangars, back shops, alert facilities, weapons storage areas, hardened shelters, squadron operations facilities, maintenance facilities, training facilities, information technology support and cyber facilities, force protection support facilities, squadron operations facilities, other F-15QA related support structures, construction/facilities/design services, cybersecurity services, mission critical computer resources, support services, force protection services, and other related elements of logistics and program support.

(iv) Military Department: Air Force (X7-D-QAL).

(v) Prior Related Cases, if any:

Air Force: QA-D-SAC, QA-D-TAH, QA-D-YAB.

Navy: QA-P-AAG, QA-P-AAE, QA-P-AAH, QA-P-LAC, QA-P-LAE.

(vi) Sales Commission, Fee, etc., Paid, Offered, or Agreed to be Paid: None.

(vii) Sensitivity of Technology Contained in the Defense Article or Defense Services Proposed to be Sold: None.

(viii) Date Report Delivered to Congress: November 1, 2017.

*As defined in Section 47(6) of the Arms Export Control Act.

POLICY JUSTIFICATION

Qatar—F-15QA Construction, Cybersecurity, and Force Protection Infrastructure

The Government of Qatar has requested support of its F-15QA multi-role fighter aircraft program to include design and construction services, new parking/loading ramps, hot cargo pads, taxiways, hangars, back shops, alert facilities, weapons storage areas, hardened shelters, squadron operations facilities, maintenance facilities, training facilities, information technology support and cyber facilities, force protection support facilities, squadron operations facilities, other F-15QA related support structures, construction/facilities/design services, cybersecurity services, mission critical computer resources, support services, force protection services, and other related elements of logistics and program support. The estimated cost is \$1.1 billion.

This proposed sale supports the foreign policy and national security objectives of the United States. Qatar is an important force for political stability and economic progress in the Persian Gulf region. Our mutual defense interests anchor our relationship and the Qatar Emiri Air Force (QEAF) plays a predominant role in Qatar's defense.

The proposed sale improves Qatar's capability to operate and sustain its F-15QA aircraft. A robust construction, cybersecurity, and force protection infrastructure is vital to ensuring the QEAF partners can utilize the F-15QA aircraft to its full potential. Qatar will have no difficulty absorbing this support into its armed forces.

The proposed sale of this construction, cybersecurity, and force protection infrastructure will not alter the basic military balance in the region.

The prime contractor for construction, cybersecurity, and force protection infrastructure will be determined through competition. The purchaser typically requests off-sets. Any offset agreement will be defined in negotiations between the purchaser and the contractor.

Implementation of the construction, cybersecurity, and force protection aspects of this notification include the establishment of a construction office in Doha with as many as ten (10) U.S. Government civilians which will adjust in size as case workload varies. Anticipated contractor footprint for this effort is approximately fifteen (15) to fifty (50) personnel, which may vary based on phases of construction and establishment of required services.

There will be no adverse impact to U.S. defense readiness as a result of this proposed sale.

HEALTHCARE

Mr. ALEXANDER. Mr. President, I ask unanimous consent to have printed in the RECORD a copy of the article, "More ACA Plans to Come With No Premiums in 2018," by Anna Wilde Mathews and Christopher Weaver that was published in the Wall Street Journal on October 27, 2017.

There being no objection, the material was ordered to be printed in the RECORD, as follows:

MORE ACA PLANS TO COME WITH NO PREMIUMS IN 2018

Insurers selling Affordable Care Act plans have a compelling new pitch: free health insurance.

When sales of plans on the law's exchanges begin Nov. 1, a growing number of consumers around the country will be able to get coverage for 2018 without paying any monthly premium, according to health insurers and an analysis of newly available federal data.

In nearly all of the 2,722 counties included in the data, some consumers will be able to obtain free health insurance because they qualify for larger federal premium subsidies that cover the full cost of a plan, according to the new analysis.

The growing availability of no-premium plans is a side effect of a decision by President Donald Trump's administration to end federal payments that are used to reduce out-of-pocket costs, such as deductibles, for low-income enrollees. The administration didn't halt—and indirectly bolstered—the federal subsidies that help consumers with their insurance premiums.

The new analysis doesn't project exactly how many consumers could be eligible for the no-premium plans, a figure that depends on variables including people's income, household size, age, location and access to other types of health coverage.

In the coming weeks, insurers are gearing up to promote the no-premium option. Amid uncertainty about the future of the 2010 health law, known as Obamacare, many insurers have pulled back from the law's marketplaces. Many of the remaining ones are worried about losing enrollment next year—largely among consumers who aren't eligible for subsidies and won't be able to get premium-free plans.

Insurers hope the no-premium insurance draws in more enrollees, particularly those they need most: people with few health needs. Healthy consumers help bolster the stability of the market by balancing out the health costs of sicker enrollees.

"We absolutely will be promoting this opportunity to get coverage at a zero price,"

said Wendy Curran, a spokeswoman for Blue Cross Blue Shield of Wyoming, which is mentioning the no-premium plans in print, radio and social-media advertising. "We hope those younger people will say, 'Well yeah, if it's not going to cost me anything, sure.'"

Ms. Curran said it was "astounding even to us" how many people will be able to get no-premium insurance in Wyoming.

The no-premium plans will also receive a hefty promotional push from insurance agents. EHealth Inc. and HealthMarkets Inc., both big national agencies, said they're preparing to highlight the option in advertising and other outreach.

"It's just the idea of something free being really appealing," said Nate Purpura, a vice president at eHealth. The company's surveys have consistently shown that price is the most important factor in consumers' choice of plan, he said.

Availability will vary by age and income, but some enrollees who don't have a very low income may be able to land zero-premium coverage, according to the analysis of federal data conducted by consulting firm Oliver Wyman, a unit of Marsh & McLennan.

The firm found that zero-premium ACA exchange plans would be available next year to at least some consumers in a total of 2,692 counties, out of 2,722 in the study.

A 60-year-old making about \$36,000 a year could find free 2018 plans in 1,590 counties, while one with income of about \$48,000 could do so in 654 counties, according to the analysis, which used data released Wednesday for plans available on HealthCare.gov, the federal marketplace used by 39 states.

For 2017, no-premium plans were available in many places for the very lowest-income enrollees, but for those at slightly higher levels, they were much more scarce. For instance, in 2017, a 60-year-old making about \$36,000 could find free plans in about 300 of the counties.

That is what is different in 2018, said Kurt Giesa, a partner at Oliver Wyman. The zero-premium plans are "much more prevalent now than they were," he said.

In California, which isn't included in the federal data, consumers must pay a minimal \$1 a month. But there is a "huge increase from last year" in the number of people who will be able to buy virtually free plans, said Peter V. Lee, executive director of Covered California, the state's ACA exchange. Covered California currently has about 1.1 million enrollees who receive federal-premium subsidies, and more than half of them will be able to buy a plan for \$1 for 2018, he said.

The growing availability of no-premium plans is tied to the complicated dynamics of the 2010 health law, as well as a recent move by the GOP president.

Under the law's rules, subsidies that help pay for premiums are available to people making up to about \$48,000 a year. Those subsidy amounts are linked to the cost of the second-cheapest silver plan in an enrollee's location. So, when silver premiums go up, subsidies go up.

Earlier this month, Mr. Trump's administration cut off federal payments to insurers for covering certain out-of-pocket costs for low-income enrollees in silver plans. In response, insurers raised premiums on their 2018 policies sharply to cover the extra expense, now coming out of their pockets—and in many cases, they loaded the extra boost only onto the silver plans.

Because the separate premium subsidies, which Mr. Trump didn't cut, are linked to silver-plan prices, those subsidies are rising, too. In many states, the costs for cheaper bronze plans are going up much less rapidly than silver plans, so many more people will wind up being eligible for no-premium plans.

On the flip side, those who don't get premium subsidies under the 2010 law may be re-

sponsible for the full brunt of steep rate increases, though they may be able to mitigate the impact by staying away from silver plans.

For those who can get free plans, the lure may be irresistible.

Medica, an insurer that is offering exchange plans in states including Iowa, Nebraska and Wisconsin, is running ads in some places that say "\$0 premium plans for individuals who qualify." It is also sending letters to some current exchange enrollees with bronze plans, who are likely to be enrolled with Medica in 2018, informing them that they can stop paying premiums next year. "That's a nice letter to get," said Geoff Bartsh, a vice president at Medica.

Jerry Dworak, chief executive of Montana Health Co-op, said, "of course we're hoping that" young and healthy enrollees flock to the no-premium plans.

"If they see that it's free, why not take it?," he said.

Mr. Dworak said that a person making as much as \$33,000 a year could get one of his company's Idaho plans and pay no premium.

The plans may attract more older consumers than younger because premiums and subsidies rise with age, making free plans more available to older people.

And for some, the zero-premium plans won't actually be the best deal, insurers and insurance agents say. The silver plans could be cheaper overall for people who use much health care, despite their higher premium costs, if these people are eligible for the health law's cost sharing help.

According to HealthCare.gov, for instance, a 40-year-old man in Cheyenne, Wyo., who makes about \$24,000 a year could get a zero-premium bronze plan, but he could pay as much as \$6,650 over the course of 2018 in deductibles and other out-of-pocket charges. Or he could get a silver plan that would cost him around \$125 a month, but cap his out-of-pocket costs at \$2,450.

"There's this trade-off," said Michael Z. Stahl, a senior vice president at HealthMarkets, who said the company's agents will walk through the pros and cons with clients.

TRIBUTE TO SUSIE McMURRY

Mr. BARRASSO. Mr. President, today I wish to honor Susie McMurry.

On November 10, 2017, the Greater Wyoming Council of the Boy Scouts of America will hold their annual "Strength of America Banquet" and celebrate Susie McMurry, a remarkable Wyoming philanthropist. Every year at this event, the council honors an individual who made invaluable contributions to the community and demonstrates the values of the Scout oath and law.

Susie McMurry is a perfect choice to receive this special recognition. She is a role model in our community and truly represents a spirit of citizenship, leadership, and service. Throughout her life, Susie has always demonstrated an enduring devotion to God, her family, and Wyoming. She loves her family. She loves her home State of Wyoming. She loves her country.

She truly exemplifies the Scout promise "to help other people at all times." Should an opportunity arise to improve the life of a child, Susie is the first to offer her assistance, time, and resources. Susie strongly supports pro-

grams for children that focus on mentoring, developing leadership skills, encouraging community service, and building self-esteem. She believes "Children are the sunshine in our lives. If we don't take care of our children, our world will be without sunshine."

Her parents raised her with a deep understanding of the importance of giving back. While growing up, her parents always lent a helping hand and opened their homes to individuals in need. Throughout her life, she has tried to follow their example. For nearly 30 years, she and her husband, Mick McMurry, were foster parents. They provided a safe and caring home for hundreds of children in Wyoming.

Susie is a strong, compassionate, and caring woman. In 1946, she was born in Casper at Memorial Hospital of Natrona County. She called both Elk Mountain and Hanna home before eventually moving to Casper. Susie discovered her calling to help children early in life. She studied elementary education at Casper College and the University of Wyoming. After graduation, she returned to Casper and taught first grade at Crest Hill Elementary School.

She met her husband of 41 years, Mick McMurry, in Casper. On December 21, 1973, Susie and Mick McMurry were married in Glenrock, WY. A few years later, they adopted their daughter, Trudi, and Susie retired from teaching. In 1979, Susie and Mick became foster parents. Their second daughter, Jillian, was adopted from the foster program. Susie has eight grandchildren: Lou Davis, Tayla Davis, Tillie Holthouse, Ellie Holthouse, Evie Kaschmitter, Lily Kaschmitter, Max Kaschmitter, and Andrew Kaschmitter. She also has one great-grandchild, Neil Campbell. In 2015, Susie, the McMurry family, Casper, and the State of Wyoming mourned the loss of her husband, Mick. Susie's compassion and strength continues to guide her family and our community.

The McMurry family has a remarkable history of helping people across the State of Wyoming. Susie explained, "One of our goals is to teach the younger generation how to give back, how to participate, and love making a difference." Mick and Susie established the McMurry Foundation in 1998 with a mission to make a significant and beneficial impact on the lives of others. Guided by the values of excellence and compassion, the foundation has awarded more than \$50 million since it was established. It focuses on education, religion, children and advocacy for children, health and human resources, the arts and humanities, and favorable business environments.

Buildings across the State bear the McMurry name as a mark of gratitude for their wonderful support. The number of places in Wyoming that have benefited from the contributions of the McMurry family is incredible, but one organization especially dear to Susie is the Wyoming Medical Center. Susie has spent a tremendous number of