

rail lines, to become much more multi-mobile than it had been before.

What is going to happen to rural food demand? It is critically important. No country in the world is better suited than we are to meet the doubling of world food demand between now and 2050. In the doubling of the biggest area of commerce in the world, our inland ports in that discussion become particularly important.

Both the Congress and, in this case, the Missouri General Assembly are paying attention to the inland port structure like they have not before. The biggest single piece of contiguous agricultural ground in the world is the Mississippi River Valley. Unlike the others in the world that may be almost as big, it has its own built-in transportation network. The Missouri, the Ohio, the Arkansas, and the Illinois are rivers that flow into the Mississippi River and create that network that now links through the Panama Canal easily. You can go to Asia. You don't go through the Panama Canal. You easily get to the east coast of our country or you get to Europe and Africa. It is a great opportunity for us, and that kind of investment makes that opportunity more likely to pay the kind of dividends we would hope it would pay.

In September of this year, Congress passed and the President signed the Energy and Water appropriations bill, which included \$25 million for the Delta Regional Authority, which is an authority designed to benefit a part of our country in which the early focus on labor intensive occupations, particularly farming, has given way to looking at that part of our economy without thinking about what has happened to rural communities and the rural workforce as that has moved on. Broadband is part of that, and I think we are going to see that continue to be a big part of what goes on in the future.

We have the small ports and the Mississippi River and tributaries project. We have the Ste. Genevieve National Historic Park, and the President signed that bill in March. Ste. Genevieve has French architecture that goes back to the late 1700s and to the very early 1800s. It is unique in the kind of architecture that is preserved there. Some of the oldest buildings, certainly, in the middle of the country and, in some cases, west of the Mississippi are there, and we are moving forward. I hope, even this week, to do a couple of additional things that will make that historic park work and be open to people from all over the world. The French Ambassador wants to go there in the near future and see what we are doing, as an example, to maintain those buildings that are reflective of a different part of our heritage than we have in most of the country.

Research institutions, like the University of Missouri, the USDA ag research facility in Columbia, and other places across our State, have benefited from additional research money.

In East Locust Creek, in August of 2018, it was announced that the final

investment would be made for an East Locust Creek Reservoir in North Central Missouri. Water is a bigger and bigger challenge as we look toward the future, and thinking now about how we are going to have the kinds of water opportunities we need for drinking water or agriculture water and other water is very important.

In Sedalia, MO, a project to help—Congresswoman HARTZLER and I worked on a project to help make the industrial park work better. Nucor just announced this year a significant and brandnew steel facility in that part of our State.

In Kansas City, the Buck O'Neil Bridge, across the Missouri River, is something that has needed to be done for a long time. The community had come up with 90 percent of the money needed, a bridge grant that Secretary Chao called me about, that the community had applied for, gets that last \$25 million of that 200-and-some million-dollar project.

There has been a long fight at Whiteman Air Force Base in Warrensburg to maintain the A-10s and then do what we could to get the replacement wing there. That is important, as were the things that happened in Saint Joseph with the lift capacity, the ability with those C-130s, where 19 different countries come to that facility and train to figure out how to get the kind of support we need for military all over the world, including our NATO allies.

Senator BOOZMAN and I, from the days we were in the House together, formed an I-49 caucus. Another announcement just in the last month will allow the last few miles of I-49 to be completed in our State. I was there about 8 years ago when Highway 71 in Missouri became I-49, and in most of our State now it is I-49, and it will be I-49 in all of our State.

So what has happened there and what has happened with opioid grant funding and with our mental health leadership in our State have resulted in significant legislative achievements this year.

The HIRE Vets Act is legislation that provides not only for hiring vets, but it also establishes recognition. Everybody says they hire vets. This is following up on legislation that was passed here in the Senate and in the House and signed into law in May of 2017. The Labor Department came up with that new standard of acknowledging who hires vets and who is better at hiring vets than anybody else. The first five Missouri employers were recognized this year with dozens of employers all over the country, in a tiered situation. It is sort of like the LEED standard for energy efficiency; we now have a standard for hiring vets.

As with the FAA reauthorization bill I mentioned earlier, our efforts to move toward more rural broadband have moved significantly this year, but, still, that is one of the things we need to be looking at next year.

I would argue that this is certainly one of the most effective right-of-cen-

ter Congresses in a long time. I think it has been an effective Congress. We looked at the issues facing the country, and we have done the best we can, in a long- and short-range way, to deal with those issues. It is something we ought to be talking to people we work for about, trying to use that as a standard. We were good this year; let's figure out how to be even better next year.

I yield the floor.

The PRESIDING OFFICER. The Senator from West Virginia.

#### UNANIMOUS CONSENT REQUEST— S. RES. 734

Mr. MANCHIN. Mr. President, I ask unanimous consent that the Senate proceed to the immediate consideration of S. Res. 734, submitted earlier today; that the resolution be agreed to, the preamble be agreed to, and the motions to reconsider be considered made and laid upon the table with no intervening action or debate.

The PRESIDING OFFICER. Is there objection?

The Senator from Wyoming.

Mr. BARRASSO. Mr. President, reserving the right to object, whether you support ObamaCare or oppose it—and I clearly oppose it—it remains the law. The decision in the Texas case is being appealed, and I expect it will eventually end up before the Supreme Court.

Regardless of what happens in this legal process, our commitment has always been to protect people with pre-existing conditions. As a doctor and husband of a breast cancer survivor who has had three operations and who has been through chemotherapy twice, I know the importance of making sure that patients can get access to quality healthcare at an affordable cost. Since ObamaCare passed, this has not happened for many families I speak to in Wyoming. They keep telling me that ObamaCare has made their insurance unaffordable, whether it is premiums, copays—all of it. It has made it more difficult to get the care they need.

Simply put, they know ObamaCare has failed because they personally have experienced the law's sky-high premiums and few choices.

It has taken Washington Democrats a little longer to figure this out. Now they are clamoring for a federally mandated, single-payer system. They want a healthcare system dominated and controlled by Washington.

As a doctor, my focus is on making healthcare better for patients, period. It shouldn't take a judge to force us to get it done. We need to reform healthcare to give American families better care at a lower cost, which ObamaCare failed to deliver.

The question is whether Washington Democrats are interested in solving problems or playing politics. I am ready to work.

Therefore, Mr. President, I object.

The PRESIDING OFFICER. Objection is heard.

The Senator from West Virginia.

Mr. MANCHIN. Mr. President, I respectfully disagree with my friend from Wyoming. First of all, the reason I asked for a live unanimous consent request on my resolution was to protect the 800,000 West Virginians with preexisting conditions, along with millions and millions of Americans.

We have tried. We have come to an agreement on how to fix the high cost of third-party and individual payer. It has been lying on the majority leader's desk for a year with no movement or action.

People say that we all have sympathy and empathy for people with preexisting conditions. If you want to protect that, then remove your lawsuit or at least allow us to move forward on a unanimous consent request so that we can fight and have a fighting chance, as this will be appealed to the higher courts.

It is absolutely wrong that people who have insurance for the first time, now have the threat of having it taken away from them.

As a former Governor, let me tell you how this system works. If you think people are not deserving of insurance or should not be able to have affordable access to insurance, then you are paying anyway, because the people who don't have that or didn't have it before go to the emergency room at the highest cost. They go right to the emergency room. They don't pay. That cost is then distributed on to the Governor, and the Governor of each State has to come up with supplemental payments to keep hospitals and rural clinics open. That is the way the system works.

If you work for a company and couldn't afford the copayment, if you work for a company that didn't offer insurance—a small company that didn't have insurance at all—what you would do if you got hurt at home or got sick, you would hobble into work and make a workers' comp claim. That is the only access to insurance.

If you want to go back to those draconian days, that is where we are headed if this lawsuit succeeds. What we have asked for is simply the ability to fix what we have in front of us.

I haven't supported the single-payer system; we are not talking about a single-payer system. We are not talking about anything but fixing the existing Affordable Care Act.

The President of the United States, Donald Trump, could do this very easily, taking this up. I will be happy to call it Trump RepairCare. I think it would be a fitting name because he can fix it. He can bring us together so that we can basically look at a bipartisan solution to bring down the high cost of premiums. We can also look at a bipartisan solution to fix the runaway costs, teaching people how to take care of themselves, keep themselves healthier and be preventive in the care they receive.

This resolution allows the Senate and legal counsel to intervene and de-

fend West Virginians and Americans with preexisting conditions from this inhumane lawsuit. If you believe in that, there should be no consideration for objections. We should be able to sit down and let the legal staff that we have here in the Senate intervene on our behalf and the people we represent. That is all we have asked for.

Millions of Americans with preexisting conditions have been trusting us to defend their rights. Now they are hearing the political rhetoric. They hear it every day when anybody goes on the campaign trail. The last thing I heard from my colleagues on the Republican side—and these are my friends—they said: Oh, yes, JOE, we want to make sure that people with preexisting conditions have access; they cannot be denied.

But guess what the proposal is that they were going to come forward with. It would say simply this: We will make sure insurance companies offer you affordable insurance, but, basically, they will not have to protect you or insure you for an existing condition you have had. So we will basically insure your entire body, except for the cancer or the heart condition that you might have had prior to that. That made no sense whatsoever.

So they are really not sincere about coming up with allowing people with preexisting conditions to have access to affordable care. That is all we are doing today.

Right here and right now we have the opportunity, and we have heard the objection, and I am so sorry for that. We could have done the right thing and directly been involved in defending the lives of Americans.

I believe that the Texas judge was wrong in his ruling because we never removed—even those who voted for the tax cuts, and I think a lot of people begrudgingly did that, looking back on that—but, with that, it said they removed the mandate. The mandate did not remove the language of the code of the law. It removed the money from it, but it didn't take the language away. So I think anybody with any type of background in the legal process understands that will not hold up in court. All we have asked for is the right to defend the people we represent.

So I am very sorry for the decision to object. I really thought that we could get a unanimous consent agreement and move forward, and then, really, you could go out and talk to your constituents and say: I truly am fighting to make sure that any of you all who have preexisting conditions—800,000 West Virginians who have a preexisting condition—will have affordable access and cannot be denied and cannot be overcharged. That is all. Give them a chance.

I don't know where you come from, but where I come from, before we had any access to healthcare, before there was a law that forbade insurance companies to charge outrageous prices or cut people off to say that, basically,

you have hit your cap and you are no longer able to be insured—you are too sick for us to invest any more into you—they would say: I don't want to be a burden to my family.

What a person is telling you, if they have a preexisting condition is this: I don't want to be a burden to my family because I don't want to put them in a position that would be absolutely ruinous for them, put them in bankruptcy; one of my illnesses could put my family in bankruptcy because I cannot buy nor will the insurance company sell me insurance, nor can I afford what they want for it.

That is what we did away with, and that is where we are going back. We want to intervene so we do not go back to those dark ages.

With that, I hope my friends on the Republican side will reconsider this, and, as a body, let this move forward to protect the people of America.

With that, I yield the floor.

The PRESIDING OFFICER. The Senator from Pennsylvania.

Mr. CASEY. Mr. President, I rise to join in the remarks of the Senator from West Virginia, who worked very hard to make sure we had a resolution that would allow us to direct the Senate legal counsel to intervene in the lawsuit.

Of course, the lawsuit is beyond the district court. We await what might happen in an appellate court. But the best way for anyone in this body to express their disagreement with the removal of the protections for those who might have a preexisting condition, if you believe that those protections should remain the law of the land as they are now, then you should, as a Member of the House or the Senate—even if you wanted to be in favor and voted in favor of repealing the Affordable Care Act, you could still argue that in the interest of preserving those protections, without question, in the interest of providing certainty to not just tens of millions of Americans but many millions more than that who have these protections in law right now—did not have those protections before the Affordable Care Act—if that is what you believe, you could very easily say: Let's preserve them and make a different argument in this court case, file a brief, and try to intervene, as you could in this case.

But for some reason around here, some people think they can have it both ways. They do television ads and campaigns or give speeches back home saying: Oh, don't worry, I want to protect and I want to preserve the protections for preexisting conditions, but at the same time do nothing about it.

There is no third way here. You are either in favor of those protections, maintaining in law the protections for those who have a preexisting condition, or you are not. You are either for that or you are not. If you are for it, I think you are dutybound to take action to preserve it.

Right now, these protections are at risk. They will be in greater jeopardy if

an appellate court were to agree with the district court. So I think folks here have to make a decision: You are either for maintaining these protections, which carries with it a responsibility to take action to make sure that those protections are in law—are kept in law, remain a part of our law—or you have to go to the other side, which is you throw up your hands and say: Either I am not for those protections or I am not going to do anything about it.

So you have to take action or not. I think that is true of people in both parties and both Chambers, but when you consider what is at stake in a State like Pennsylvania, we have a huge portion of our population—more than 3 million people—who live in rural communities. With 67 counties in Pennsylvania, 48 of them are rural.

A couple years after the Affordable Care Act passed we saw in Pennsylvania—this is only maybe 2 years ago now, and I am sure the numbers haven't changed that much—we had about 280,000 people who got their healthcare through the Affordable Care Act but lived in those 48 rural counties. Of the roughly 280,000 who got coverage, 180,000 were in rural communities. Lots of folks in rural areas are worried about the protections they got because they were benefited by Medicaid expansion, and the balance of those got their healthcare through the exchanges.

If you are in a rural community and you got healthcare most recently through the exchanges or even if you had healthcare prior to 2010 or prior to the last several years, you have protections that you didn't have before. Of course, in rural communities in Pennsylvania, you have even higher incidents in many cases of those who have an opioid problem. These healthcare decisions, these healthcare votes that we cast, these healthcare court cases have even greater significance in rural communities—whether it is preexisting condition protections, whether it is having the coverage of Medicaid that allows you to get treatment and services for an opioid problem, or whether you are just dependent on healthcare because of your own health or that of a family member, especially children.

I would just make a couple more points because I know we are limited in time. Here is some data on the impact of the Affordable Care Act and what could happen in some communities in a State like Pennsylvania that have a high significant rural population.

We are told in one study that since 2010, 83 percent of rural hospitals have closed, and 90 percent of these rural hospitals that closed have been in States that have not—or have not as of that time period—expanded Medicaid when the hospital closed. So we are talking about a court case that would, in essence, invalidate the Affordable Care Act. We are talking about not just healthcare loss or coverage loss in a rural community, we are talking about job loss and devastation.

In our State, we have something on the order of 25 rural counties where the No. 1 or No. 2 employer is a hospital. If that hospital is badly undermined, if they can't make the margins work because of cuts to Medicaid or the elimination of Medicaid expansion, as some around here want to do—not just cut it but eliminate it—you are going to have economic devastation in those communities in addition to healthcare devastation.

The staff of the Joint Economic Committee has estimated that if the Affordable Care Act were struck down, which is the effect of this Federal court case of just last week, 17 million people would lose coverage next year—17 million people in just 1 year.

What we should be doing around here, in addition to urging a court—or any court—not to strike it down, is to have bipartisan hearings for a long time on lots of ideas. We need at least weeks of that, if not longer. If there is one area or one place of consensus around here, it is that healthcare costs for too many Americans are too high. We have to get costs down, and people in both parties have a lot of work to do on that.

The second thing we hear back home and across the country is prescription drug costs especially are too high for too many families. Neither party has done enough on that issue. We have to get those down as well.

If we focus on the priorities of most Americans, which is not repealing this law; it is not throwing out or ending Medicaid expansion, which helps with the opioid crisis and helps a lot of our rural communities especially—what we would do is focus on the priorities of the American people: get the cost of healthcare down, get the cost of prescription drug costs down, and deal with any other issues that have been brought to the table for those who care about improving our healthcare system.

If the American people see only a battle about one side wanting repeal and the other side working every day to try to stop that, we are not going to advance very far on their agenda. Their agenda is not that fight. Their agenda is to protect the gains we have, make sure people don't lose coverage, and make sure a much larger portion of the population—virtually everyone you know—doesn't lose protections that were put into law a couple of years ago.

If we do that and focus on those priorities, I think the American people will believe we are beginning to do our job in both parties on healthcare. The worst thing we can do is go back to the days when someone with a preexisting condition was denied coverage or was charged a higher rate because of that preexisting condition. We don't want to go back to those dark days. We should insist that we never reverse course on this issue.

I yield the floor.

The PRESIDING OFFICER. The Senator from Arizona.

# UNANIMOUS CONSENT REQUEST— S. 2644

Mr. FLAKE. Mr. President, I ask unanimous consent that the Senate proceed to immediate consideration of Calendar No. 393, S. 2644. I further ask that the committee-reported substitute amendment be agreed to, the bill, as amended, be considered read a third time and passed, and that the motions to reconsider be considered made and laid upon the table.

The PRESIDING OFFICER. Is there objection?

Mr. MCCONNELL. I object.

The PRESIDING OFFICER. Objection is heard.

The Senator from Arizona.

Mr. FLAKE. Mr. President, I rise for the third time in the past 2 months to defend the integrity of our political process by defending the ongoing investigation led by Special Counsel Robert Mueller.

The continuity of this investigation is critical to upholding public trust in our institutions of government due both to the substance of the investigation, the extent to which a foreign government was able to interfere in our political process, and the principle that no person—no person, no matter how high the rank—is above the law.

The investigation has produced results already, including the indictment of more than 12 Russian nationals for interference in the 2016 elections. It has also led to much knowledge about what was going on during the period of 2016 and beyond with regard to individuals in the United States. We need to protect the independence of the special counsel and allow this crucial investigation, and any like it in the future, to run their course.

This particular bill, S. 2644, Special Counsel Independence and Integrity Act, was approved by a bipartisan vote of 2 to 1 in the Judiciary Committee—14 to 7. We don't have many votes like that, the Senator from New Jersey will attest, in the Judiciary Committee. It has awaited a floor vote ever since. That is 9 months—9 months without a vote on this bipartisan bill that came out of the Judiciary Committee.

I just asked a moment ago for unanimous consent to pass this legislation. It was objected to for the third time. I know some of my Republican colleagues have some sincere objections to this bill. Some of them believe a President must be able to fire anyone within the executive branch, at any time, since the President is the head of it. I understand the constitutional arguments. I know some of my colleagues hold them sincerely. I would respond that, if this bill becomes law, the President still has a key role in overseeing the process. There is accountability to him. The Constitution requires that there must be.

Under this act, the Attorney General would still oversee the investigation and still be able to remove the special counsel for good cause. So the special counsel would not be fully insulated