

S. 386

At the request of Mr. LEE, the name of the Senator from Alabama (Mr. JONES) was added as a cosponsor of S. 386, a bill to amend the Immigration and Nationality Act to eliminate the per-country numerical limitation for employment-based immigrants, to increase the per-country numerical limitation for family-sponsored immigrants, and for other purposes.

S. 497

At the request of Mr. CARDIN, the name of the Senator from New York (Mrs. GILLIBRAND) was added as a cosponsor of S. 497, a bill to improve diversity and inclusion in the workforce of national security agencies, and for other purposes.

S. 521

At the request of Mr. BROWN, the name of the Senator from Montana (Mr. TESTER) was added as a cosponsor of S. 521, a bill to amend title II of the Social Security Act to repeal the Government pension offset and windfall elimination provisions.

S. 599

At the request of Mr. COTTON, the name of the Senator from South Dakota (Mr. ROUNDS) was added as a cosponsor of S. 599, a bill to amend the Immigration and Nationality Act with respect to aliens associated with criminal gangs, and for other purposes.

S. 651

At the request of Mr. CASEY, the name of the Senator from Oregon (Mr. WYDEN) was added as a cosponsor of S. 651, a bill to amend the Internal Revenue Code of 1986 to increase the age requirement with respect to eligibility for qualified ABLE programs.

S. 668

At the request of Mr. BROWN, the name of the Senator from Montana (Mr. TESTER) was added as a cosponsor of S. 668, a bill to amend title XVIII of the Social Security Act to waive coinsurance under Medicare for colorectal cancer screening tests, regardless of whether therapeutic intervention is required during the screening.

S. 738

At the request of Mr. UDALL, the name of the Senator from Oregon (Mr. WYDEN) was added as a cosponsor of S. 738, a bill to require the Federal Communications Commission to make the provision of Wi-Fi access on school buses eligible for E-rate support.

S. 866

At the request of Mr. VAN HOLLEN, the names of the Senator from Alabama (Mr. JONES), the Senator from California (Ms. HARRIS), the Senator from New Hampshire (Ms. HASSAN), the Senator from New Hampshire (Mrs. SHAHEEN), the Senator from Hawaii (Ms. HIRONO), the Senator from Pennsylvania (Mr. CASEY) and the Senator from Montana (Mr. TESTER) were added as cosponsors of S. 866, a bill to amend part B of the Individuals with Disabilities Education Act to provide full Federal funding of such part.

S. 867

At the request of Ms. HASSAN, the names of the Senator from California (Ms. HARRIS) and the Senator from Minnesota (Ms. KLOBUCHAR) were added as cosponsors of S. 867, a bill to protect students of institutions of higher education and the taxpayer investment in institutions of higher education by improving oversight and accountability of institutions of higher education, particularly for-profit colleges, improving protections for students and borrowers, and ensuring the integrity of postsecondary education programs, and for other purposes.

S. 879

At the request of Mr. VAN HOLLEN, the name of the Senator from New York (Mrs. GILLIBRAND) was added as a cosponsor of S. 879, a bill to provide a process for granting lawful permanent resident status to aliens from certain countries who meet specified eligibility requirements, and for other purposes.

S. 931

At the request of Mr. CASEY, the name of the Senator from New Mexico (Mr. HEINRICH) was added as a cosponsor of S. 931, a bill to amend the Internal Revenue Code of 1986 to enhance the Child and Dependent Care Tax Credit and make the credit fully refundable.

S. 971

At the request of Ms. SMITH, the names of the Senator from Maryland (Mr. CARDIN), the Senator from Maryland (Mr. VAN HOLLEN), the Senator from Ohio (Mr. BROWN), the Senator from Virginia (Mr. KAINE) and the Senator from Virginia (Mr. WARNER) were added as cosponsors of S. 971, a bill to amend title 5, United States Code, to clarify that during a lapse in appropriations certain services relating to the Federal Employees Health Benefits Program are excepted services under the Anti-Deficiency Act, and for other purposes.

S. 973

At the request of Ms. SMITH, the names of the Senator from Maryland (Mr. CARDIN), the Senator from Maryland (Mr. VAN HOLLEN), the Senator from Ohio (Mr. BROWN), the Senator from Virginia (Mr. KAINE) and the Senator from Virginia (Mr. WARNER) were added as cosponsors of S. 973, a bill to amend title 5, United States Code, to continue supplemental dental and vision benefits and long-term care insurance coverage for Federal employees affected by a Government shutdown, and for other purposes.

S. CON. RES. 9

At the request of Mr. ROBERTS, the names of the Senator from Oregon (Mr. MERKLEY) and the Senator from North Dakota (Mr. CRAMER) were added as cosponsors of S. Con. Res. 9, a concurrent resolution expressing the sense of Congress that tax-exempt fraternal benefit societies have historically provided and continue to provide critical benefits to the people and communities of the United States.

S. RES. 85

At the request of Mr. PORTMAN, the names of the Senator from Maine (Ms. COLLINS) and the Senator from West Virginia (Mrs. CAPITO) were added as cosponsors of S. Res. 85, a resolution recognizing the 100th anniversary of the founding of Easterseals, a leading advocate and service provider for children and adults with disabilities, including veterans and older adults, and their caregivers and families.

S. RES. 98

At the request of Mrs. BLACKBURN, the name of the Senator from Michigan (Mr. PETERS) was added as a cosponsor of S. Res. 98, a resolution establishing the Congressional Gold Star Family Fellowship Program for the placement in offices of Senators of children, spouses, and siblings of members of the Armed Forces who are hostile casualties or who have died from a training-related injury.

S. RES. 120

At the request of Mr. CARDIN, the name of the Senator from New Hampshire (Mrs. SHAHEEN) was added as a cosponsor of S. Res. 120, a resolution opposing efforts to delegitimize the State of Israel and the Global Boycott, Divestment, and Sanctions Movement targeting Israel.

S. RES. 123

At the request of Mr. RISCH, the names of the Senator from Georgia (Mr. ISAKSON), the Senator from Colorado (Mr. GARDNER), the Senator from South Carolina (Mr. GRAHAM), the Senator from Massachusetts (Mr. MARKEY), the Senator from Virginia (Mr. KAINE) and the Senator from Texas (Mr. CRUZ) were added as cosponsors of S. Res. 123, a resolution supporting the North Atlantic Treaty Organization and recognizing its 70 years of accomplishments.

AMENDMENT NO. 234

At the request of Mr. LEAHY, the name of the Senator from Alabama (Mr. JONES) was added as a cosponsor of amendment No. 234 intended to be proposed to H.R. 268, a bill making supplemental appropriations for the fiscal year ending September 30, 2019, and for other purposes.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. REED (for himself, Mr. COONS, Ms. DUCKWORTH, Mrs. GILLIBRAND, Ms. KLOBUCHAR, Ms. BALDWIN, Mr. BROWN, and Mr. BLUMENTHAL):

S. 994. A bill to establish a National and Community Service Administration to carry out the national and volunteer service programs, to expand participation in such programs, and for other purposes; to the Committee on Finance.

Mr. REED. Mr. President, today is National Service Recognition Day, when we take a moment to honor AmeriCorps and Senior Corps members for the many contributions they make

in communities across the nation. As Americans, we take inspiration from those who have answered the call to serve, whether in defense of our Nation abroad or to strengthen our communities at home. The willingness to serve a purpose greater than ourselves is a hallmark of our Nation and those who commit themselves to the betterment of our country deserve and have earned our support. That is why this year, on National Service Recognition Day, I am joining Senators COONS and DUCKWORTH and Congressman LARSON and other colleagues in introducing the America's Call to Improving Opportunities Now (ACTION) for National Service Act of 2019. Our legislation calls for a great expansion of the number of service opportunities and an increased investment in those who serve.

Since 1994, over one million individuals have served through the AmeriCorps program. Annually, roughly 220,000 seniors over the age of 55 volunteer through the Senior Corps programs. These individuals have addressed critical community needs in education, economic development, health, and many other areas. They are among the teams of first responders when disaster strikes. Unfortunately, we have not created the capacity to support all Americans who want to serve.

The question of service is vital to our Nation. I was proud to have joined my friend and colleague, the late Senator John McCain, in laying out a vision and plan to support and encourage service—military, national and public—by establishing the National Commission on Military, National, and Public Service. After meeting with communities across the country, the Commission submitted its interim report, which highlighted that Americans value service and are interested in pursuing transformative efforts to involve many more Americans in service. Yet, the Commission also reported that there are many barriers to service, particularly financial ones. Furthermore, there is a lack of awareness about existing programs and opportunities.

The ACTION for National Service Act will honor our national value of service, while addressing the barriers that limit citizens' opportunities to serve. Our legislation will set us on a path to one million national service positions within ten years. It will increase the educational award so that an individual completing two full years of service will earn the equivalent of four years of the average in-state tuition at a public institution. Those who are willing to serve should not have to carry a heavy burden of student loan debt to achieve their educational goals. The ACTION for National Service Act will also ease other financial barriers to service, increasing the living allowance and eliminating the tax liability for the education awards and living stipends. The bill calls for a robust outreach campaign, requiring that all eligible individuals be notified of their

options to serve. Finally, the ACTION for National Service Act calls for elevating the Corporation for National and Community Service to a cabinet-level agency and establishes a National Service Foundation to leverage private sector resources to support national service activities.

Mr. President, it is time we reinvigorate the social contract between America and its citizenry. Americans have a deep tradition of national service, starting with the dedicated men and women of our armed forces and including all those who have served in AmeriCorps, Senior Corps, and the Peace Corps. However, as more Americans wish to serve, it is important that they be given the opportunity to do so. Just as critical is investing in the education and professional development of those who have sacrificed and given so much to our Nation. Developing the talents of our most committed citizens pays life-long dividends. Our investment in the GI Bill not only honors our service members, but also enriches our Nation. Similarly, the education awards for those who have served through our national programs have economic impacts beyond the individuals who earn them. That is the new deal that the ACTION for National Service Act offers.

All AmeriCorps members take a pledge to get things done for Americans, to make communities safer, smarter and healthier, and to bring us together. I'd like to thank Senators COONS, DUCKWORTH, GILLIBRAND, KLOBUCHAR, BLUMENTHAL, BROWN, BALDWIN, and BLUMENTHAL for signing on as original cosponsors and urge our colleagues to join us in pledging to ensure that all who want to answer the call to serve can do so by cosponsoring the ACTION for National Service Act and working for its passage.

By Ms. COLLINS:

S. 995. A bill to amend title XXIX of the Public Health Service Act to reauthorize the program under such title relating to lifespan respite care; to the Committee on Health, Education, Labor, and Pensions.

Ms. COLLINS. Mr. President, I rise today to introduce legislation with my colleague from Wisconsin, Senator BALDWIN, to reauthorize the Lifespan Respite Care Program. Respite care provides full-time caregivers with the much-needed opportunity to take a temporary break from their responsibilities caring for aging or disabled loved ones.

Every day, an estimated 43 million family caregivers attend to loved ones who are experiencing chronic, disabling health conditions. While many of these individuals care for an older adult, almost one-third of caregivers attend to persons under the age of 50. Caregivers help their loved ones remain at home, often delaying the need for nursing home or foster care placements. The value of their efforts is tremendous, amounting to more than \$470 billion in uncompensated care.

This compassionate task, however, can take a toll. Caregivers experience higher mortality rates and are more likely to acquire acute and chronic health conditions. Respite care, which provides temporary relief to caregivers from their ongoing responsibilities, helps to reduce mental stress and physical health issues they may experience, keeping caregivers healthy and families intact. Yet, almost 80 percent of America's caregivers have never received any respite services.

As a senator representing the State with the oldest median age in our Nation and as Chairman of the Senate Aging Committee, the well-being of our seniors and their caregivers is among my top priorities. Since the Lifespan Respite Care Act was enacted in 2006, 37 States and the District of Columbia have received grants to increase the availability and quality of respite services. Still, the need for respite care continues to increase and outpace available resources.

When I ask family caregivers about their greatest needs, the number one that I hear is respite. The Maine Department of Health and Human Services recognized this urgent need in a report released in December 2018 on children's behavioral health services. The report recommended expanding access to respite care services for families. One Maine mother shared, "Respite has helped our family because we have been able to take other children to doctors appointments without everyone having to go. My husband and I have been able to have a little time away. I have been able to attend to my own mental health needs." From families caring for children with disabilities to those caring for older adults, the need for respite care today continues to grow.

Our legislation will help to close the resource gap experienced by our nation's caregivers. Specifically, the Lifespan Respite Care Act will authorize robust funding for this program over the five years, through 2024, to assist states in establishing or enhancing statewide Lifespan Respite systems. It would authorize \$20 million for fiscal year 2020, with funding increasing by \$10 million annually, in order to reach \$60 million for fiscal year 2024. This bill is widely supported by leading caregiver and respite organizations, including the ARCH National Respite Network and Resource Center, the American Psychological Association, the Arc, and the Elizabeth Dole Foundation. Mr. President, I ask to include letters from these supporting organizations in the RECORD.

Mr. President, there is a large gap between caregivers who need respite services and those who receive it. Our legislation would provide the necessary resources to state respite agencies to ensure that more caregivers have access to the respite services they need. I urge all of my colleagues to join in support of this important bipartisan legislation, the Lifespan Respite Care Reauthorization Act of 2019.

APRIL 1, 2019.

Hon. SUSAN COLLINS,
U.S. Senate, Washington, DC.
Hon. TAMMY BALDWIN,
U.S. Senate, Washington, DC.
Hon. JIM LANGEVIN,
House of Representatives, Washington, DC.
Hon. CATHY MCMORRIS RODGERS,
House of Representatives, Washington, DC.

DEAR SENATOR COLLINS, SENATOR BALDWIN, REPRESENTATIVE LANGEVIN AND REPRESENTATIVE MCMORRIS RODGERS: We, the undersigned national organizations representing all ages and disabilities, are writing to offer our fervent support for and endorsement of the Lifespan Respite Care Reauthorization Act to reauthorize the Lifespan Respite Care Program at \$200 million over five years. We also want to thank you for your leadership in supporting the nation's family caregivers.

Every day, millions of American families are faced with unexpected illness, disease, or disability. A soldier is injured in war, a spouse develops multiple sclerosis or Alzheimer's disease, or a child is diagnosed with a developmental or physical disability or chronic illness. These are but a few examples of events that can forever change an individual's and family's trajectory.

While each situation is unique, the one thing that they often have in common is the incredible value of family caregivers. Forty-three million family caregivers provide a vast majority of our nation's long-term care, permitting individuals of all ages to remain in their communities and avoid or delay nursing home or foster care placements. AARP has estimated that in 2013, family caregivers provided \$470 billion in uncompensated care to adults, a staggering statistic that exceeds federal and state spending on Medicaid health services and long-term services and supports that same year.

While the benefits of family caregiving are plentiful, caregiving can take its toll—with older spousal family caregivers experiencing higher mortality rates, rates of acute and chronic conditions, and depression than non-caregivers. Respite—short-term care that offers individuals or family members temporary relief from the daily routine and stress of providing care—is a critical component to bolstering family stability and maintaining family caregiver health and well-being. Respite is a frequently requested support service among family caregivers, but 85% of family caregivers of adults receive no respite and the percentage is similar for parents caring for their children with special needs. Not surprisingly, high burden family caregivers (defined as those who assist their loved one with personal care such as getting dressed or bathing) cite lack of respite as one of their top three concerns.

To help provide family caregivers the support they need, the Lifespan Respite Care Program was enacted in 2006 with strong bipartisan support. The program provides competitive grants to states to establish or enhance statewide Lifespan Respite systems that maximize existing resources and help ensure that quality respite is available and accessible to all family caregivers. With more than half of care recipients under age 75 and more than one-third under age 50, Lifespan Respite rightly recognizes caregiving as a lifespan issue and serves families regardless of age or disability.

Though the program has been drastically underfunded since its inception, thirty-seven states and the District of Columbia have received grants and are engaged in impressive work such as identifying and coordinating respite services available through various state agencies, including veterans caregiver services; helping unserved families pay for respite through participant-directed voucher programs or mini-grants to community and

faith-based agencies; building respite capacity by recruiting and training respite workers and volunteers; and raising awareness about respite through public education campaigns. Originally authorized through Fiscal Year 2011, enactment of the Lifespan Respite Care Reauthorization Act is necessary to continue this excellent momentum, better coordinate and supply respite care to our nation's 43 million family caregivers through statewide Lifespan Respite programs and ensure that states are able to sustain the great work they have begun and still allow new states to receive a grant.

We thank you for your commitment to individuals living with disabilities, older individuals in need of assistance and support, and the loved ones who care for them and we look forward to continuing to work with you as the bill moves forward. If you would like more information, please contact Jill Kagan.

Sincerely,

AARP; Alzheimer's Association; Alzheimer's Foundation of America; Alzheimer's Impact Movement; American Association of Caregiving Youth; American Association on Intellectual and Developmental Disabilities (AAIDD); American Dance Therapy Association; American Music Therapy Association; The Arc of the United States; Association of University Centers on Disabilities (AUCD); Autism Society of America; Brain Injury Association of America; Caregiver Action Network; Caring Across Generations; Christopher & Dana Reeve Foundation; Easterseals.

Elizabeth Dole Foundation; Epilepsy Foundation; Family Caregiver Alliance, National Center on Caregiving; Family Voices; Generations United; The Jewish Federations of North America; Justice in Aging; LeadingAge; Lupus Foundation of America; The Michael J. Fox Foundation for Parkinson's Research; National Alliance for Caregiving; National Alliance of Children's Trusts and Prevention Funds; National Association for Home Care and Hospice; National Association of Area Agencies on Aging (n4a); National Association of Councils on Developmental Disabilities; National Association of Social Workers (NASW).

National Association of State Directors of Developmental Disabilities Services; National Association of State Head Injury Administrators; National Association of States United for Aging and Disabilities; National Down Syndrome Congress; National Down Syndrome Society; National Hospice and Palliative Care Organization; National Military Family Association; National Multiple Sclerosis Society; National Respite Coalition; Paralyzed Veterans of America; Program to Improve Eldercare, Altarum; Rosalynn Carter Institute for Caregiving; Sibling Leadership Network; TASH; United Spinal Association; Well Spouse Association.

SUBMITTED RESOLUTIONS

SENATE RESOLUTION 134—EX-PRESSING THE SENSE OF THE SENATE THAT THE DEPARTMENT OF JUSTICE SHOULD REVERSE ITS POSITION IN TEXAS V. UNITED STATES, NO. 4:18-CV-00167-O (N.D. TEX.)

Mrs. SHAHEEN (for herself, Mr. SCHUMER, Mr. WYDEN, Mrs. MURRAY, Mrs. FEINSTEIN, Mr. JONES, Mr. BROWN, Mr. CARPER, Ms. ROSEN, Mr. DURBIN, Mr. MURPHY, Mr. BOOKER, Mr. REED, Mr. TESTER, Ms. HIRONO, Ms. BALDWIN, Ms. KLOBUCHAR, Mr. SANDERS, Mr.

LEAHY, Mr. VAN HOLLEN, Mr. WARNER, Mr. PETERS, Mr. WHITEHOUSE, Ms. HASSAN, Ms. STABENOW, Mr. UDALL, Mr. MERKLEY, Mr. MANCHIN, Mr. BLUMENTHAL, Mr. MENENDEZ, Ms. CORTEZ MASTO, Mr. CARDIN, Ms. SINEMA, Ms. DUCKWORTH, Mr. MARKEY, Mrs. GILLIBRAND, Mr. COONS, Ms. WARREN, Mr. HEINRICH, Mr. CASEY, Ms. CANTWELL, Mr. KAINE, Mr. SCHATZ, Ms. SMITH, Mr. BENNET, Mr. KING, and Ms. HARRIS) submitted the following resolution; which was referred to the Committee on the Judiciary:

S. RES. 134

Whereas, on February 26, 2018, 18 State attorneys general and 2 Governors filed a lawsuit in the United States District Court for the Northern District of Texas, Texas v. United States, No. 4:18-cv-00167-O (N.D. Tex.) (in this preamble referred to as "Texas v. United States"), arguing that the requirement of the Patient Protection and Affordable Care Act (Public Law 111-148; 124 Stat. 119) (in this preamble referred to as the "ACA") to maintain minimum essential coverage is unconstitutional and, as a result, the court should invalidate the entire law;

Whereas, in a June 7, 2018, letter to Congress, then Attorney General Jefferson Sessions announced that the Department of Justice—

(1) would not defend the constitutionality of the minimum essential coverage provision; and

(2) would argue that provisions protecting individuals with pre-existing medical conditions (specifically the provisions commonly known as "community rating" and "guaranteed issue") are inseparable from the minimum essential coverage provision and should be invalidated;

Whereas, in the June 7, 2018, letter to Congress, Attorney General Sessions also advised Congress that "the Department will continue to argue that Section 5000A(a) is severable from the remaining provisions of the ACA", indicating a difference from the plaintiffs' position in Texas v. United States;

Whereas, on December 14, 2018, the United States District Court for the Northern District of Texas issued an order that declared the requirement to maintain minimum essential coverage unconstitutional and struck down the ACA in its entirety, including protections for individuals with pre-existing medical conditions;

Whereas the decision of the United States District Court for the Northern District of Texas was stayed and is pending appeal before the United States Court of Appeals for the Fifth Circuit;

Whereas, on March 25, 2019, the Department of Justice, in a letter to the United States Court of Appeals for the Fifth Circuit, changed its position and announced that the entire ruling of the United States District Court for the Northern District of Texas should be upheld and the entire ACA should be declared unconstitutional;

Whereas, prior to 2014, individuals with pre-existing medical conditions were routinely denied health insurance coverage, subject to coverage exclusions, charged unaffordable premium rates, exposed to unaffordable out-of-pocket costs, and subject to lifetime and annual limits on health insurance coverage;

Whereas as many as 133,000,000 nonelderly people in the United States—

(1) have a pre-existing condition and could have been denied coverage or only offered coverage at an exorbitant price had they needed individual market health insurance prior to 2014; and