

State crime labs with resources they need to end the backlog of unsolved crimes. So far, more than \$1 billion has been provided to forensic labs because of this law and has led to some pretty incredible results.

One reason it is important that the Federal Government assumes part of this responsibility is because many jurisdictions—small police departments, rural counties—simply don't have the tax base, don't have the money, and don't have the expertise to be able to solve this problem of untested rape kits. Since 2005, thanks to Debbie Smith, more than 860,000 DNA cases have been processed because of the Debbie Smith Act, accounting for 43 percent of all forensic profiles in the FBI's DNA database.

Though the primary goal is to reduce the rape kit backlog and identify their assailants, processing this DNA evidence can assist investigations for non-violent crimes as well. Similar to criminal fingerprint databases, this DNA evidence can help convict people who commit other crimes.

The Debbie Smith Act of 2019 will reauthorize this important funding that supports testing of these rape kits so we can eliminate the backlog and ensure it will not grow again in the future. This law also authorizes important training for law enforcement, correctional personnel, forensic nurses, and other professionals who assist victims of sexual assault.

So I am grateful to Debbie for her courage and the courage of countless other survivors who have shared their stories publicly—it can't be easy—and who continue to advocate for reforms to eliminate the backlog. Two other inspiring survivors from Texas, Lavinia Masters and Carol Bart, have also been strong advocates in my State and at the Federal level. It has been my privilege to know them and work with them on this issue.

This legislation is undoubtedly stronger because of the input of these and other brave survivors who are champions for victims all across the country. I admire these women who have given their voice to the voiceless and continue to fight for these reforms.

I thank Chairman GRAHAM and Ranking Member FEINSTEIN of the Senate Judiciary Committee for quickly moving this important legislation through the committee, and I hope we will soon be able to vote for it on the Senate floor.

I yield the floor.

I suggest the absence of a quorum.

The PRESIDENT pro tempore. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

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

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

MEDICARE

Mr. BARRASSO. Mr. President, during the last week I was home in Wyo-

ming, traveling the State, visiting with people, talking to constituents, listening to what they had to say. I had the chance to attend a couple of health fairs in Rawlins, WY, and Mountain View, WY. The health fair is a gathering of the community. It is based on prevention and early detection of problems as ways to help lower the cost of care. For many years, I was the medical director of the Wyoming Health Fairs bringing low-cost health screening to people of Wyoming. At the fair, people come out. There are booths from the heart association, diabetes association, the American Cancer Society. People learn information about diseases, how they work, and how they affect their bodies. It can aid in early detection of problems. People can get their blood drawn and visit with healthcare providers from the community to go over blood results. All of this is aimed at prevention, early detection, and early treatment.

It is interesting that during the same time Democrats running for President have been traveling the country talking about healthcare as well, and specifically Senator BERNIE SANDERS has talked about "BernieCare"—Medicare for All.

To me, Medicare for All is going to drive up costs for Americans in terms of taxes, and it is also going to take away the kind of choice people look for when I talk with them at Wyoming health fairs.

I come to you today to talk on the floor about the real problems I see with this so-called Medicare for All, and I come to it as a doctor who has practiced medicine in Wyoming for 25 years, taking care of patients for decades. When I go to health fairs, more people refer to me as Dr. BARRASSO rather than Senator BARRASSO.

I also want to talk as the husband of a breast cancer survivor. My wife, Bobbi, has had three operations, chemotherapy twice, and is now disease-free for 15 years, but I know how critically important it is as a doctor as well as a husband to make sure that people with preexisting conditions are protected.

I also speak as the son of a 96-year-old mother, and she is a motivating force in our lives. She is a constant reminder to me that we must do everything we can to care for our seniors. So as I have been listening to the Presidential candidates talk about this Medicare for All proposal, whether it is Senators HARRIS, WARREN, GILLIBRAND, or BOOKER, all of them back what Senator SANDERS has been proposing. I am just not sure most Americans understand what Medicare for All means and what it would mean for them personally. Maybe some of the Presidential candidates don't even want people to know what it means.

Senator SANDERS has claimed that Medicare for All is, as he said, "a struggle for the soul of who we are as a nation." Let's be clear. Americans are facing a critical choice. It is a choice between a big, government-run

healthcare system and a system that gives Americans access to quality, affordable care that they can choose that is right for them and their families. That, to me, is the choice we are facing.

Medicare for All essentially means a complete government takeover of all healthcare in this country. Central planners in Washington, DC, would then be in control of the healthcare for all of us.

Medicare for All would enroll every American in a government-run healthcare system. It will take away America's healthcare choices. Senator HARRIS talks about, perhaps, a supplemental plan, but the legislation I have read that has been introduced is crystal clear—Medicare for All outlaws private health insurance plans. The only exception, Senator SANDERS says, is some limited insurance for cosmetic surgery—he says procedures like nose jobs.

With about 180 million Americans getting insurance through work, currently covered through their employers, people who get insurance through work like the insurance they have. All of them will lose their coverage under what is proposed under the Medicare for All legislation. All of them will be forced onto this new government program—every one of them. Never mind that 71 percent of Americans covered through their employer actually say they like their current plan. A single-payer Medicare for All proposal says, basically, if you like your current healthcare plan, you cannot keep it. The government will take it away and make it illegal.

Seniors are going to suffer, too, and, actually, I think seniors may end up suffering the most. I am talking about people who are already on Medicare because this legislation threatens the 60 million Americans who currently get their healthcare as part of Medicare. They get their healthcare today through Medicare. Medicare is already expected to run out of money by 2026. It was confirmed by last month's trustee report, but the Democrats' proposal will even outlaw Medicare Advantage, a program that 22 million Americans currently use for their healthcare. It is called Medicare Advantage because there are advantages to being on this program in terms of preventive care and coordinated care. There is a reason people sign up for Medicare Advantage. All 22 million would lose that as well under the Democrats' Medicare for All plan.

Healthcare programs benefiting military families and children will also be eliminated. Democrats plan to abolish servicemembers' TRICARE and the Children's Health Insurance Plan. All of that goes away under what the Democrats' radical proposal is talking about.

Perhaps the greatest deception of Medicare for All is the suggestion that government-run care would be free. Let me say to the American people: Do not

be deceived. Do not be deceived. Americans will pay a very high price. Medicare for All has been estimated at a 10-year pricetag of \$32 trillion. There is only one way to even try to pay for this massive plan and that is to dramatically raise everyone's income taxes to the point where they may need to pay double. That is what is being proposed.

So the result will be less freedom, lower quality of care, and longer lines as people have to wait to get to a doctor, because Washington will be controlling the doctor-patient medical decisions—and, mark my words, Washington will ration care. Rationing means delays and delay means denial of care. Government-run healthcare is notorious for producing long lines, long waiting periods, delay in care—even urgently needed care.

The government-run system has failed where they tried to put it in place in Vermont, in Senator SANDERS' home State. They started it and ended up having to eliminate it. They couldn't afford it. It wasn't working. It was too complicated. That is in one State.

We also have the situation of what is going on both in England and Canada right now in terms of costs and limits of care, the denial of treatment, the delay in treatment.

I think people watching may have seen the stories as a result of what is happening in England, where elderly patients are going blind in Britain right now. Why would they be going blind? Because the government is rationing cataract surgery. People can Google "going blind in Britain." It is the British healthcare system that is causing it because of the rationing of care. So Democrats are promoting this Medicare for All. Basically they are saying that ObamaCare needs to be repealed and replaced because it has failed the American people. The solution they are offering is not one that I think would make things better, but it is one that I think would make things worse.

Republicans, at the same time, are working for meaningful, workable solutions that lower the costs of prescription drugs, solutions that increase healthcare choice and transparency, and solutions that expand all Americans' access to affordable care. We want to make sure patients can get the care they need from the doctor they choose at a lower cost.

So instead of proposing higher taxes, which is what the Democrats are proposing, instead of proposing healthcare rationing, which will come with Medicare for All, Democrats need to begin working with Republicans to improve healthcare for all Americans, and they should start by rejecting BernieCare.

Thank you.

I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from Ohio.

TRIBUTE TO MARK POWDEN

Mr. BROWN. Mr. President, I rise today to honor the career of my long-

time chief of staff, staff director of the Democratic staff on the Senate Banking Committee, former staff director for Republicans on the HELP Committee, and my good friend Mark Powden.

Mark is the model of a public servant and of a Senate staffer. He spent decades serving in these Halls, first for Senator Jeffords, and then, in 2007, he joined my office, becoming my chief of staff less than 2 years later.

I was a brandnew Senator. I still had a lot to learn. There were few better teachers in this institution and this city than Mark Powden. He helped steer our office in its early days, setting up a well-oiled machine. I would like to think, that would serve Ohioans at home and advocate for them in Washington. Under Mark's leadership, we delivered results for the 12 million people in Ohio.

When the country wanted to write off the American auto industry, we said no. We weren't going to abandon this industry and millions of American workers—literally hundreds of thousands in Ohio. Mark was passionate about making sure we got the best deal possible for Ohio workers. It wasn't just auto workers.

Mark took over the job as chief of staff in my office during the depths of the recession around the time President Obama took office, after the economy was tanking with a loss of 800,000 jobs a month at the end of the Bush administration. Ohio had lost 423,000 jobs over a 2-year period—nearly 8 percent of the jobs in the State. Under Mark's leadership, we worked to create the Hardest Hit Fund, which targeted resources to communities in places like Ohio that had been devastated by the financial crisis. Mark and so many others have heard me say that the ZIP Code where my wife Connie and I live in Cleveland, OH—ZIP Code 44105—at that point, in the first half of 2007, there were more foreclosures in that ZIP Code than in any other ZIP Code in the United States of America.

Mark always made sure that investing in Ohio was a priority. We helped secure \$100 million to expand cancer research and treatment at the Ohio State University Wexner Medical Center and James Cancer Hospital.

Through all of these accomplishments, Mark remained true to his Vermont roots. It is where he grew up. His first major job in Washington was with a Republican in those days, a Senator from Vermont. He tried his hardest always to bring Vermont's bucolic vales to the Nation's Capital, and he maintained the utmost respect for the institution of the Senate.

He had an incredible wealth of knowledge on the history of this place and on legislative procedure and tradition, and he passed it on to other staffers—from my new chief of staff, when Mark moved over to lead the Senate Banking Committee, to the LCs new to the Senate, hoping to learn. We will miss all that about Mark Powden.

I will miss Mark's counsel. I will miss his hard work. I will miss his sense of humor. I will miss his modesty. I will particularly miss his farmer jokes that he tells so well after growing up in rural Vermont. It is not surprising that Mark would not want to be here today as I honor him because he just doesn't want to show up to be honored. But after decades in public service, he has earned a long retirement with his wife Wendy; his two sons, Joseph and Russell; and his entire family.

Mark, thank you for what you did for me, thank you for what you did for our State, and thank you for what you do for our country.

I would add to this that one of the people Mark helped to teach is with me on the floor today. She is about to join a Presidential campaign. Her name is Hannah Fine. I want to recognize her service. This is the first time, I believe, she has been on the Senate floor for a moment like this. So, Hannah, thank you.

NOMINATION OF STEPHEN MOORE

Mr. President, this weekend, the President's pick for the Federal Reserve, Stephen Moore, said that we should focus a little less on all of his offensive and outlandish articles, the comments he made about women in print and on the air, the comments he made about places like Cincinnati and Cleveland, the attacks he has made on middle America, on working families. He said: Forget about all that. Let's talk about my economic record.

Well, Mr. Moore should be careful what he wishes for. His economic record is dangerous. It is out of touch. It is a big part of the reason we have suffered so many of the economic problems we have had in the last decade. Even conservative economists have criticized him.

He has claimed over and over again that the country is experiencing deflation. In other words, he thinks prices are falling. I don't know where he gets these ideas. I don't have any constituents who complain to me about prices falling—about deflation—but Mr. Moore seems to see things that aren't really there.

Tell someone who is paying college tuition, whether it is at Sinclair Community College or whether it is at Ohio State or Kent State University, that the prices are going down. Tell it to someone with diabetes trying to afford insulin. Tell somebody in Columbus, OH, who is trying to pay the rent that prices are falling. It is absurd. He makes economic statements like that with so little basis in fact.

He has been a conspiracy theorist. He thinks government statistics on the economy can't be trusted. Maybe that is where he got the idea that the cost of living is going down. He wants to return to the gold standard. He said on CNBC this morning that instead of talking about equal pay for women, the problem actually has been the steady decline in male earnings. I don't disagree the problem has been stagnant