

S. 2085, a bill to authorize the Secretary of Education to award grants to eligible entities to carry out educational programs about the Holocaust, and for other purposes.

At the request of Ms. ROSEN, the name of the Senator from South Carolina (Mr. SCOTT) was added as a cosponsor of S. 2085, *supra*.

S. 2539

At the request of Mr. RUBIO, the name of the Senator from Illinois (Mr. DURBIN) was added as a cosponsor of S. 2539, a bill to modify and reauthorize the Tibetan Policy Act of 2002, and for other purposes.

S. 2599

At the request of Mr. TESTER, the name of the Senator from Georgia (Mrs. LOEFFLER) was added as a cosponsor of S. 2599, a bill to amend the Department of Agriculture Reorganization Act of 1994 to provide assistance to manage farmer and rancher stress and for the mental health of individuals in rural areas, and for other purposes.

S. 2815

At the request of Mr. SCHUMER, the names of the Senator from Nevada (Ms. CORTEZ MASTO), the Senator from Maryland (Mr. VAN HOLLEN), the Senator from Michigan (Mr. PETERS), the Senator from New Jersey (Mr. MENENDEZ), the Senator from Nevada (Ms. ROSEN), the Senator from Rhode Island (Mr. WHITEHOUSE), the Senator from Delaware (Mr. CARPER) and the Senator from Illinois (Mr. DURBIN) were added as cosponsors of S. 2815, a bill to require the Secretary of the Treasury to mint coins in commemoration of the National Purple Heart Honor Mission.

S. 3485

At the request of Mr. DURBIN, the names of the Senator from New Jersey (Mr. BOOKER), the Senator from Virginia (Mr. KAINE) and the Senator from Delaware (Mr. COONS) were added as cosponsors of S. 3485, a bill to expand the Outer Continental Shelf Lands Act to expand revenue sharing for offshore wind, to reauthorize the National Oceans and Coastal Security Act, and for other purposes.

S. 3565

At the request of Mr. MENENDEZ, his name was added as a cosponsor of S. 3565, a bill to amend the Fair Debt Collection Practices Act to provide additional protections for consumers and small business owners from debt collection during a major disaster or emergency.

S. 3612

At the request of Mr. CORNYN, the names of the Senator from Nevada (Ms. CORTEZ MASTO) and the Senator from Montana (Mr. DAINES) were added as cosponsors of S. 3612, a bill to clarify for purposes of the Internal Revenue Code of 1986 that receipt of coronavirus assistance does not affect the tax treatment of ordinary business expenses.

S. RES. 303

At the request of Mr. HAWLEY, the name of the Senator from Texas (Mr.

CRUZ) was added as a cosponsor of S. Res. 303, a resolution calling upon the leadership of the Government of the Democratic People's Republic of Korea to dismantle its kwan-li-so political prison labor camp system, and for other purposes.

S. RES. 511

At the request of Mr. RUBIO, the name of the Senator from California (Mrs. FEINSTEIN) was added as a cosponsor of S. Res. 511, a resolution supporting the role of the United States in helping save the lives of children and protecting the health of people in developing countries with vaccines and immunization through GAVI, the Vaccine Alliance.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTION

By Mr. REED:

S. 3619. A bill to amend title II of division A of the CARES Act to modify certain provisions related to unemployment compensation, and for other purposes; to the Committee on Finance.

Mr. REED. Mr. President, today, I am introducing the Strengthening UI for Coronavirus Impacted Workers and Students Act. For the 30 million American unemployed workers, the enhanced jobless benefits created in the CARES Act are a lifeline. However, the Federal Pandemic Unemployment Compensation, which provides a \$600-per-week benefit on top of an individual's regular unemployment insurance (UI) benefits are set to expire on July 31, 2020. Arbitrarily cutting these benefits off in the midst of an ongoing pandemic could make a desperate situation worse for individuals and harm the economy. Moreover, if these workers are prematurely pushed back into unsafe work environments, it will ultimately harm families, businesses, and communities.

That is why my new legislation seeks to expand and enhance the unemployment insurance of the CARES Act. Specifically, this bill would continue to offer out-of-work Americans the \$600-per-week additional benefit through the end of the year and make it retroactive to the date of the coronavirus pandemic disaster declaration date. This legislation would also exempt these pandemic-specific benefits from being factored into eligibility for means-tested programs, such as Section 8 housing, SNAP, TANF, and WIC. Furthermore, it would create a \$300 Federal benefit for recent college graduates, students, and others who are willing and able to work absent COVID-19 but who do not have recent work history. Finally, this legislation would codify guidance by the Department of Labor requiring employees who are participating in "work sharing" programs to be able to receive the \$600-per-work boost. I added provisions to the CARES Act to Federally finance these cost-effective and job saving "work sharing" programs, which give struggling companies the flexibility to

reduce hours instead of laying off their workforce, while allowing the employees to collect unemployment insurance on the days they are not working.

The bill is supported by numerous organizations including the American Federation of Labor and Congress of Industrial Organizations (AFL-CIO), International Brotherhood of Teamsters, the National Association for the Advancement of Colored People (NAACP), National Education Association (NEA), National Employment Law Project (NELP), National Low Income Housing Coalition (NLIHC), The Arc, United Auto Workers (UAW), National Alliance on Mental Illness, National Association of Councils on Developmental Disabilities, National Disability Rights Network, and National Women's Law Center.

We have to be smart and this targeted, temporary measure will help ensure Americans who are out of work through no fault of their own can afford food, housing, and medicine until it is safe to go back to work. I am pleased to join my colleague in the other body, Representative KILDEE, in sponsoring this legislation, and I look forward to working with my colleagues here and across the Capitol to secure passage of this important legislation.

By Mr. REED (for himself, Mr. BROWN, Mr. TESTER, Mr. SCHATZ, Mr. JONES, Ms. SMITH, Ms. WARREN, Ms. SINEMA, Mr. WARNER, Mr. MENENDEZ, Mr. VAN HOLLEN, Ms. CORTEZ MASTO, Mr. KAINE, Mr. UDALL, Mr. BOOKER, Mrs. FEINSTEIN, Mr. DURBIN, Mr. MERKLEY, and Mr. WYDEN):

S. 3620. A bill to establish a Housing Assistance Fund at the Department of the Treasury; to the Committee on Banking, Housing, and Urban Affairs.

Mr. REED. Mr. President, along with Senators BROWN, TESTER, SCHATZ, JONES, SMITH, WARREN, SINEMA, WARNER, MENENDEZ, VAN HOLLEN, CORTEZ MASTO, KAINE, UDALL, BOOKER, FEINSTEIN, DURBIN, MERKLEY, and WYDEN, I am introducing legislation that would create a \$75 billion Housing Assistance Fund that builds on the success of the Hardest Hit Fund at the Treasury Department that I championed in 2010.

The Hardest Hit Fund provided funds to 18 State-level Housing Finance Agencies, directing targeted foreclosure prevention assistance to households and neighborhoods in States like Rhode Island hit hard by the economic and housing market downturn.

The Housing Assistance Fund expands this model to provide a flexible source Federal aid to all State-level Housing Finance Agencies. This Federal funding could then be used to help struggling households remain in their homes while they search for new employment or wait to get back to work. Financial assistance could go towards preventing eviction, mortgage delinquency, default, foreclosures, or loss of utility services, such as water, gas, and

electricity. Funds could also be used to keep the Internet connected and remain current with property taxes.

In the midst of responding to the coronavirus, we clearly need to do everything we can to help our constituents. According to CNBC, 8.7 million jobs were lost in the Great Recession, and as of April 23, 2020, more than 26 million Americans filed unemployment insurance claims in just five weeks. Just for comparative purposes, CNBC also reported that 22.4 million jobs were created since the Great Recession.

This means we're facing job losses at an unprecedented scale and pace.

What this also means is that we could be facing a potential wave of evictions and foreclosures, so there is no time to waste. We should respond accordingly so that more families can make it to the other side of this public health emergency while staying safe in their homes. This is precisely the goal of this Housing Assistance Fund legislation we are introducing today.

I thank the National Council of State Housing Agencies; Habitat for Humanity; National Housing Conference; National Community Reinvestment Coalition; National Association of Affordable Housing Lenders; National Leased Housing Association; Americans for Financial Reform; National Consumer Law Center, on behalf of its low-income clients; Center for Responsible Lending; Rhode Island Housing; and the Rhode Island Association of Realtors for their support.

I urge all of my colleagues to join in pressing for inclusion of the Housing Assistance Fund in our continued response to the coronavirus pandemic.

By Mr. DURBIN (for himself, Ms. DUCKWORTH, Mr. BLUMENTHAL, Ms. STABENOW, Mr. MERKLEY, Mr. JONES, Ms. KLOBUCHAR, Ms. HIRONO, Mrs. GILLIBRAND, Ms. SMITH, Mr. SANDERS, Ms. HARRIS, and Ms. BALDWIN):

S. 3634. A bill to address health workforce shortages and disparities highlighted by the COVID-19 pandemic through additional funding for the National Health Service Corps and Nurse Corps; to the Committee on Health, Education, Labor, and Pensions.

Mr. DURBIN. Mr. President, I ask unanimous consent that the text of the bill be printed in the RECORD.

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

S. 3634

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Health Heroes 2020 Act".

SEC. 2. ADDITIONAL FUNDING FOR THE SCHOLARSHIP PROGRAM OF THE NATIONAL HEALTH SERVICE CORPS.

(a) ADDITIONAL FUNDING.—Section 10503(b) of the Patient Protection and Affordable Care Act (42 U.S.C. 254b-2(b)) is amended—

(1) in paragraph (1)(F), by striking "and" at the end;

(2) in paragraph (2)(H), by striking the period and inserting "; and"; and

(3) by adding at the end the following:

"(3) to be transferred to the Secretary of Health and Human Services—

"(A) \$25,000,000,000 for fiscal year 2020, to provide additional funding to carry out subsection (i) of section 338A of the Public Health Service Act and the National Health Service Corps Loan Program under section 338B of such Act, of which—

"(i) \$15,000,000,000 shall be allocated to the program under section 338A; and

"(ii) \$10,000,000,000 shall be allocated to the program under such section 338B; and

"(B) \$690,000,000 for each of fiscal years 2021 through 2026, to provide additional amounts to carry out the National Health Service Corps Scholarship Program under section 338A of the Public Health Service Act, the National Health Service Corps Loan Repayment Program under section 338B of such Act, and the reserve service program under section 338O of such Act."

(b) CRITERIA FOR USE OF ADDITIONAL FUNDING FOR IN-DEMAND PROFESSIONALS.—Section 338A of the Public Health Service Act (42 U.S.C. 2541) is amended by adding at the end the following:

"(i) Not less than 40 percent of the amounts made available to carry out this section under 10503(b)(3)(A)(i) of the Patient Protection and Affordable Care Act shall be allocated to scholarships under this section for eligible applicants who are members of groups that are historically underrepresented in health care professions, including racial and ethnic minorities and individuals from low-income urban and rural communities. To carry out the requirements of this subsection, the Secretary may coordinate with entities receiving funding under section 739 to identify, recruit, and select individuals to receive such scholarships."

(c) NATIONAL HEALTH SERVICE CORPS RESERVE DEMONSTRATION PROJECT.—

(1) IN GENERAL.—Subpart III of part D of title III of the Public Health Service Act (42 U.S.C. 2541 et seq.) is amended by adding at the end the following:

"SEC. 3380. NATIONAL HEALTH SERVICE CORPS RESERVE SERVICE DEMONSTRATION PROJECT.

"(a) IN GENERAL.—From the amounts made available under section 10503(b)(3)(B) of the Patient Protection and Affordable Care Act for each of fiscal years 2021 through 2024, the Secretary shall, to the extent permitted by, and consistent with, the requirements of applicable State law, use such sums as the Secretary determines necessary to establish, as a demonstration project, a National Health Service Corps Reserve Service (referred to in this section as the 'reserve service') under which a qualified individual agrees to engage in service for a period specified in a contract under this section in such reserve service under this section.

"(b) RESERVE SERVICE REQUIREMENTS.—An individual whose obligated service under a contract under section 338A is provided, pursuant to a contract under subsection (a), as reserve service, and any other participating individual described in subparagraph (B) of subsection (c)(2) may practice a health profession in any private capacity, subject to the following requirements:

"(1) In the event of a public health emergency declared under section 319, a major disaster declared by the President under section 401 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, or an emergency declared by the President under section 501 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act or a national emergency declared by the President under the National Emergencies Act, for the duration of such emergency or dis-

aster, such individual shall be subject to serve in such capacity as the Secretary shall determine appropriate to carry out the purposes of this section, and in accordance with the Secretary's plan to increase surge capacity in response to public health emergencies or disasters. Such service may be furnished in coordination with the Corps described in section 204, a State, territorial, or local public health department, or through the process described in section 319(e).

"(2) Not less frequently than 2 days each month, and for a total of not fewer than 30 days each year, as directed by the Secretary, such individual shall—

"(A) conduct trainings on public health preparedness and response activities, which may be in coordination with the State, territorial, or local health department; or

"(B) furnish health care services to low-income individuals in a health professional shortage area (as defined under section 332(a)), a medically underserved population (as defined under section 330(b)(3)), or a medically underserved area or area at high risk of a public health emergency as designated by the Secretary.

"(c) QUALIFIED INDIVIDUALS.—An individual may be eligible to participate in the reserve service under this section if such individual meets one of the following criteria:

"(1) An individual participating in the Scholarship Program under section 338A may satisfy the obligated service requirement under such program if the individual's contract provides for such service.

"(2) An individual who participated in the Loan Repayment Program under section 338B and who satisfied the obligated service requirements under such program, in accordance with the individual's contract.

"(3) An individual who—

"(A) did not participate in the Scholarship Program under section 338A or the Loan Repayment Program under section 338B;

"(B) has a graduate degree in medicine, osteopathic medicine, dentistry, or another health profession, or an appropriate graduate degree from a program of behavioral or mental health, or is certified as a nurse midwife, nurse practitioner, or physician assistant;

"(C) holds a license issued by a State, the District of Columbia, or a territory to practice the applicable profession;

"(D) is otherwise qualified to practice, and has experience practicing, in a profession—

"(i) described in section 338B(a)(1); or

"(ii) another high-demand health care field or specialty that the Secretary identifies, through a process conducted every 3 years, as a field or specialty of national priority, based on relative workforce shortages, expected workforce changes, or projected changes in patient needs; and

"(E) satisfies any other eligibility or application requirements specified by the Secretary in order to demonstrate the individual's qualifications.

"(d) RESERVE SERVICE PLAN.—In carrying out this section, the Secretary shall establish, in coordination with the Surgeon General and State, tribal, and local health departments, an action plan for the service commitments, priority areas, coordination efforts, training requirements, and such other considerations as the Secretary determines appropriate, to ensure the complementary, additive capacity of such individuals providing reserve service.

"(e) CONTRACTS FOR CERTAIN PARTICIPATING INDIVIDUALS.—An individual described in subparagraph (B) of subsection (c)(2) who is participating in the reserve service program under this section shall receive loan repayments in an amount equal to 50 percent of the amount of payments that would be required with respect to a participant of the

same clinical profession in the Loan Repayment Program pursuant to a contract entered into at the same time under section 338B(g), in a manner similar to the manner in which payments are made under such section, pursuant to the terms of a contract between the Secretary and such individual. The Secretary shall establish a system of contracting for purposes of this subsection which shall be similar to the contract requirements and terms under subsections (c), (d), and (f) of section 338E.

“(f) REPORT.—Not later than 5 years after the date of enactment of this section, the Secretary shall submit to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Energy and Commerce of the House of Representatives a report that evaluates the demonstration project established under this section, including—

“(1) the effects of such program on health care access, public health emergency response capacity, and the provider workforce pipeline; and

“(2) any other considerations as the Secretary determines appropriate.”.

(2) CONFORMING AMENDMENTS.—

(A) SCHOLARSHIP PROGRAM.—Section 338A of the Public Health Service Act (42 U.S.C. 254i) is amended—

(i) in subsection (b)(2), by inserting “, or be eligible for, or hold, an appointment in the reserve service under section 338O” before the semicolon;

(ii) in subsection (c)(2)(B), by inserting “or through reserve service under an agreement under section 338O” after “section 338D”; and

(iii) in the flush text of subsection (f)(1)(B)(v), by inserting “, including service under the reserve service in accordance with section 338O, as applicable” before the semicolon at the end.

(B) OBLIGATED SERVICE.—Section 338C of the Public Health Service Act (42 U.S.C. 254m) is amended—

(i) in subsection (a), by inserting “or 338O” after “section 338D”; and

(ii) in subsection (c)—

(I) in paragraph (1), by striking “, or” and inserting a semicolon;

(II) in paragraph (2), by striking “agreement,” and inserting “agreement; or”; and

(III) by inserting after paragraph (2) the following:

“(3) in the case of an individual who enters into an agreement with the Secretary under section 338O, on the date specified in such agreement.”.

SEC. 3. FUNDING FOR THE NURSE CORPS SCHOLARSHIP AND LOAN REPAYMENT PROGRAM.

(a) FUNDING.—There are hereby appropriated, out of amounts in the Treasury not otherwise appropriated, \$5,000,000,000 for fiscal year 2020, for purposes of carrying out section 846 of the Public Health Service Act (42 U.S.C. 297n), to remain available until expended, except that—

(1) of the amount appropriated under this heading and made available for scholarships, not less than 40 percent shall be allocated to scholarships for eligible applicants who are members of groups that are historically underrepresented in health care professions, including racial and ethnic minorities and individuals from low-income urban and rural communities; and

(2) to carry out the requirements of paragraph (1), the Secretary may coordinate with entities receiving funding under section 821 to identify, recruit, and select individuals to receive such scholarships.

(b) EMERGENCY DESIGNATION.—

(1) IN GENERAL.—The amounts provided by this section are designated as an emergency requirement pursuant to section 4(g) of the Statutory Pay-As-You-Go Act of 2010 (2 U.S.C. 933(g)).

(2) DESIGNATION IN SENATE.—In the Senate, this section is designated as an emergency requirement pursuant to section 4112(a) of H. Con. Res. 71 (115th Congress), the concurrent resolution on the budget for fiscal year 2018.

SEC. 4. FLEXIBILITY FOR MEMBERS OF NATIONAL HEALTH SERVICE CORPS DURING EMERGENCY PERIODS.

Section 333 of the Public Health Service Act (42 U.S.C. 254f) is amended by adding at the end the following:

“(f) During any public health emergency declared by the Secretary under section 319, the Secretary may, notwithstanding any other provision of this section, assign Corps members, with the voluntary agreement of such Corps members, to provide such health services at such places, and for such number of hours, as the Secretary determines necessary to respond to such emergency, provided that the total number of hours required are the same as were required of such members prior to the change of assignment.”.

SUBMITTED RESOLUTIONS

SENATE RESOLUTION 560—RECOGNIZING AND SUPPORTING THE GOALS AND IDEALS OF NATIONAL SEXUAL ASSAULT AWARENESS AND PREVENTION MONTH

Mrs. FEINSTEIN (for herself, Mr. CORNYN, Mr. LEAHY, Ms. ERNST, Mrs. MURRAY, and Mr. GRASSLEY) submitted the following resolution; which was referred to the Committee on the Judiciary:

S. RES. 560

Whereas the Senate is committed to the awareness, prevention, and deterrence of sexual violence affecting individuals in the United States;

Whereas, according to the National Crime Victimization Survey, between 2008 and 2018, approximately—

(1) 3,434,326 women were victims of rape and sexual assault; and

(2) 523,895 men were victims of rape and sexual assault;

Whereas, due to the unprecedented challenges presented by the COVID-19 pandemic, including mandatory stay-at-home orders, the needs of sexual assault victims have become even more complex and challenging;

Whereas, according to a March 2020 survey by the National Alliance to End Sexual Violence of more than 600 rape crisis programs, 89 percent of those programs need emergency stimulus funding to respond to requests from survivors for support and emergency assistance;

Whereas, according to the March 2020 survey, since the onset of the COVID-19 pandemic, 40 percent of the programs surveyed have experienced an increased demand for services both in terms of new requests and more dire and complicated requests from existing clients, including requests relating to technology needs for virtual services and emergency needs of vulnerable survivors;

Whereas, during the pandemic, many rape crisis centers have had to cancel signature fundraisers and have experienced overall decreases in private donations;

Whereas, according to the 2018 Child Maltreatment Report of the Department of Health and Human Services, in 2018, child protective services agencies substantiated or found strong evidence to indicate that 47,124 children under 18 years of age were victims of sexual abuse;

Whereas, according to the National Crime Victimization Survey, between 2014 and 2018, an average of only 29 percent of rapes or sexual assaults in the United States were reported to law enforcement agencies;

Whereas studies have suggested that the rate at which American Indians and Alaska Natives experience sexual violence is significantly higher than for other populations in the United States;

Whereas, according to the Centers for Disease Control and Prevention, more than ½ of all female rape victims reported being raped by an intimate partner;

Whereas sexual violence is a burden for many individuals who serve in the Armed Forces, and the Department of Defense estimates that approximately 20,500 members of the Armed Forces, including approximately 13,000 women and 7,500 men, experienced some form of contact or penetrative sexual assault during 2018;

Whereas sexual assault does not discriminate on any basis and can affect any individual in the United States;

Whereas sexual violence may take many forms, including acquaintance, stranger, spousal, and gang rape, incest, child sexual abuse, elder sexual abuse, sexual abuse and exploitation of disabled persons, commercial sex trafficking, sexual harassment, and stalking;

Whereas, according to the National Alliance to End Sexual Violence, in addition to immediate physical and emotional costs, sexual assault can have numerous adverse consequences for the victim, which may include post-traumatic stress disorder, substance abuse, major depression, homelessness, eating disorders, and suicide;

Whereas, according to a 2019 survey of rape crisis centers by the National Alliance to End Sexual Violence, ½ of such centers have a waiting list, in some cases months long, for counseling services, 44 percent lack a therapist on staff, and 84 percent have experienced an increased demand for services;

Whereas many sexual assaults are not reported to law enforcement agencies, and many States have restrictive criminal statutes of limitations, which enable many perpetrators to evade punishment for their crimes;

Whereas advances in deoxyribonucleic acid (commonly known as “DNA”) technology have enabled law enforcement agencies to identify and prosecute the perpetrators in tens of thousands of previously unsolved sexual assault cases;

Whereas incarceration of sexual assault perpetrators can prevent perpetrators from committing additional crimes;

Whereas national, State, territorial, and Tribal coalitions, community-based rape crisis centers, and other organizations across the United States are committed to—

(1) increasing public awareness of sexual violence and the prevalence of sexual violence; and

(2) eliminating sexual violence through prevention and education;

Whereas important partnerships have been formed among criminal and juvenile justice agencies, health professionals, public health workers, educators, first responders, and victim service providers;

Whereas thousands of volunteers and staff at rape crisis centers, State coalitions against sexual assault, and nonprofit organizations across the United States play an important role in making crisis hotlines and other services available to survivors of sexual assault;

Whereas free, confidential help is available to all victims and survivors of sexual assault through—

(1) the National Sexual Assault Hotline—
(A) by telephone at 800-656-HOPE; and