The Senate met at 10 a.m. and was called to order by the Honorable Ben Sasse, a Senator from the State of Nebraska.

PRAYER
The Chaplain, Dr. Barry C. Black, offered the following prayer:
Let us pray.
Almighty God, by whose providence our steps are ordered, You are our source of hope, joy, and peace.
Guide our lawmakers on the path of integrity so that they will honor You.
Lord, inspire them to recommit to the noble principles upon which our Nation was founded. Give them wisdom to trust You with all their hearts and to passionately and humbly pursue Your will, knowing that You have promised to direct their paths. Today, may our Senators experience the constancy of Your presence. Lead them to Your higher wisdom, and bring them to the end of this day with their hearts at peace with You.
And, Lord, sustain those who are dealing with the ravages of Hurricane Maria.
We pray in Your great Name. Amen.

PLEDGE OF ALLEGIANCE
The Presiding Officer led the Pledge of Allegiance, as follows:
I pledge allegiance to the Flag of the United States of America, and to the Republic for which it stands, one nation under God, indivisible, with liberty and justice for all.

APPOINTMENT OF ACTING PRESIDENT PRO TEMPORE
The PRESIDING OFFICER. The clerk will please read a communication to the Senate from the President pro tempore (Mr. Hatch).
The senior assistant legislative clerk read the following letter:
U.S. SENATE,
PRESIDENT PRO TEMPORE,
To the Senate:
Under the provisions of rule I, paragraph 3, of the Standing Rules of the Senate, I hereby appoint the Honorable Ben Sasse, a Senator from the State of Nebraska, to perform the duties of the Chair.
Orrin G. Hatch,
President pro tempore.
Mr. Sasse thereupon assumed the Chair as Acting President pro tempore.

RESERVATION OF LEADER TIME
The ACTING PRESIDENT pro tempore. Under the previous order, the leadership time is reserved.

CONCLUSION OF MORNING BUSINESS
The ACTING PRESIDENT pro tempore. Morning business is closed.

EXECUTIVE SESSION

EXECUTIVE CALENDAR
The ACTING PRESIDENT pro tempore. Under the previous order, the Senate will proceed to executive session to resume consideration of the Francisco nomination, which the clerk will report.
The senior assistant legislative clerk read the nomination of Noel J. Francisco, of the District of Columbia, to be Solicitor General of the United States.
The ACTING PRESIDENT pro tempore. Under the previous order, the time until 11 a.m. will be equally divided between the two leaders or their designees.
If no one yields time, time will be charged equally to both sides.

RECOGNITION OF THE MAJORITY LEADER
The majority leader is recognized.
Mr. McConnell. Mr. President, later today, the Senate will vote on the nomination of Noel Francisco to become our Nation’s next Solicitor General.
The Office of Solicitor General is responsible for representing the United States in litigation before the Supreme Court. It is a very important office, and Mr. Francisco is very well qualified to lead it. His private sector resume is impressive, and his public sector service is remarkable.
He clerked for a towering figure on the Supreme Court, the late Justice Antonin Scalia. During the administration of President George W. Bush, he worked in the White House Counsel’s office. He is currently serving as a senior advisor in the Justice Department, after having served as Acting and Principal Deputy Solicitor General earlier this year.
Mr. Francisco has successfully argued a number of complex cases before a number of courts, including, notably, the case of the National Labor Relations Board v. Noel Canning before the
Supreme Court. In that matter, he represented the plaintiff, Noel Canning, in its successful challenge to President Obama’s unlawful so-called recess appointments.

That case is especially important for this body because the Supreme Court’s unanimous 2014 decision in favor of Noel Canning reaffirmed that the Senate, not the President, possesses the clear constitutional authority to prescribe the rules of its own proceedings.

Noel Francisco is a great choice for this tough job, and I encourage colleagues to join me in supporting him.

TAX REFORM

Mr. President, this morning the Senate Finance Committee is hosting another of a series of hearings on comprehensive tax reform. The President, his team, and many of us here in Congress are in agreement that passing tax reform is the single most important action we can take today to energize the economy and help families get ahead.

Our Tax Code is overly complex and has rates that are too high. Chairman Hatch and members of the committee are working to improve American competitiveness under a simplified Tax Code that works better for all of us.

Last week, the committee’s hearing examined how to make the Tax Code work better for American individuals and families. Today, the Finance Committee is discussing the consequences of our outdated Tax Code for American businesses and workers.

In an increasingly competitive global economy, our Tax Code stands as a barrier between American enterprise and economic prosperity. It actually incentivizes companies to shift good American jobs overseas. That doesn’t make any sense at all. What we should be doing is working to bring them home. Comprehensive tax reform offers the chance to do so.

This is our once-in-a-lifetime opportunity to fundamentally rethink our Tax Code. We want to provide American businesses, small and large, with the conditions they need to form, invest, grow, and hire. We want to stop American jobs from being shipped overseas. We want to bring jobs and investments home so we can spur economic growth and restore opportunity for our families.

After 8 years of a heavy-handed Obama economy, in which it often seemed that only the ultrawealthy could get ahead, it is time to help working class families and small businesses get ahead. It is time for comprehensive tax reform.

Many of my Democratic colleagues have expressed support for an overhaul of the Tax Code. I hope they will choose to work with us in a serious way to modernize our increasingly outdated tax system.

I want to thank the President and his team, as well, for their strong involvement.

Comprehensive tax reform is clearly a top priority for this White House, just as it is for this Congress. So let’s work to deliver more opportunity in the middle class. Let’s continue the hard work of tax reform to help American families and small businesses get ahead.

HEALTHCARE

Mr. President, the men and women we represent have suffered a lot under the failed approach of the ObamaCare. It envisions what is basically a fully government-run, single-payer system. The kind of system that would strip so many Americans of their health plans and leave so many decisions over their own healthcare, that would require almost unimaginably high tax increases, and that is just not going to happen. Enough, in the Senator’s home State of Vermont when they tried to do it.

This is a massive expansion of a failed idea, not a serious solution, but Democrats are coalescing around it anyway. They apparently think this massive expansion of a failed idea is what America’s healthcare future should look like. You can be sure that they will do everything in their power to impose it. But we don’t have to accept it as our future. That is certainly what Senators Graham and Cassidy believe. They rolled out a healthcare proposal of their own last week. It would repeal the pillars of ObamaCare and replace that failed law’s failed approach with a new one, allowing States and Governors to actually implement better healthcare ideas by taking more decision-making power out of Washington. Governors and State legislators of both parties would have both the opportunity and the responsibility to help make quality and affordable healthcare available to their citizens in a way that works for their own particular States.

It is an intriguing idea and one that has a great deal of support.

As we continue to discuss that legislation, I want to thank Senator Graham and Senator Cassidy for all of their hard work. They know how important it is to move beyond the failures of ObamaCare. They know that our opportunity to do so may well pass us by if we don’t act soon.
Section 702 also does not allow for bulk collection or the unlimited dissemination of intelligence that is obtained. Rather, the government’s capabilities are specifically circumscribed. Finally, section 702 does not ignore the need for intelligence personnel will inadvertently obtain information about U.S. persons, but that statute requires intricate procedures to minimize this type of incidental collection to make sure that American citizens are not swept up in foreign intelligence surveillance targets.

Because of these safeguards, section 702 achieves a careful balance, preserving privacy and civil liberties while giving our intelligence personnel the flashes they need to find terrorists and other adversaries operating in the dark.

This careful balance is why scholars at the U.S. Naval Academy, commenting on section 702, summarized that “there is simply no good case for not reauthorizing when it comes up for renewal.”

I say to my colleagues that the time for renewal is fast approaching. That is why today I join the Attorney General and the Director of National Intelligence in calling for the speedy enactment of legislation reauthorizing title VII before it sunsets later this year.

Section 702 is only one piece of our dense security puzzle. It complements many other pieces of legislation that were designed to handle our incredibly diverse array of threats, and I just want to mention one other.

We need to strengthen the Committee on Foreign Investment in the United States, also known as CFIUS. Yesterday we passed the National Defense Authorization Act which contains an important CFIUS provision. I would like to thank the senior Senator from Arizona, the chairman of the Armed Services Committee, as well as the ranking member, the senior Senator from Rhode Island, for including it in the National Defense Authorization Act, which we approved yesterday.

This provision is critically important, as it could help strengthen the process by which we screen investment by foreign companies to ensure that our military superiority and our technological edge is not whittled away by foreign governments that might use our technology against us or to undermine our industrial base here in the United States.

As my colleagues know, many national security threats don’t make the headlines. Some of them emerge gradually. They develop quietly when countries like China begin acquiring American technology in every way possible, knowledgeable of our laws, and with a conscious strategy to try to evade and circumvent those protections in order to grab our technological edge and undermine our industrial base.

It has been reported that the Chinese Government has already made investments in robotics and artificial intelligence, pouring some $30 billion into early-stage U.S. technologies over a 6-year period.

When the Chinese are able to get their hands on our cutting-edge technology, just imagine the boost for their long-term military capabilities. But here is the problem. CFIUS needs to be modernized and brought up to date in order to plug these holes that currently exist in the protective regime. Secretary Mattis, the Secretary of Defense, said that CFIUS “needs to be updated to deal with today’s situation.” I agree.

My provision included in the NDAA would begin that process. It requires the Secretary to find and propose ways to make the current CFIUS process work more effectively. The NDAA also sets the stage for more comprehensive reform that I will be discussing in the coming days and weeks.

I want to thank the senior Senator from Idaho, the chairman of the Banking Committee, for taking this important issue up in the Senate Banking Committee just this last Thursday. As chairman, his leadership on the committee has been indispensable, and CFIUS reform is just the latest example.

The bipartisan legislation I am spearheading is called the Foreign Investment Risk Review Modernization Act. It will modernize the CFIUS process to prepare our country to meet the 21st century threats, and I plan to introduce it soon.

This bill would ensure, first, that the government scrutinizes closely those nations that are the biggest threats to our national security; second, that CFIUS obtains more authority to look at investment deals that, as of today, don’t fall under its purview, just as certain joint ventures based overseas and minority-position investments in companies do that fall within its purview; and, third, it would give CFIUS the means to assess rapidly developing technologies our export control regime has not yet figured out how to handle.

Colleagues, I hope you will join me in supporting this important reform package, and I look forward to further debate on this topic.

I yield the floor.

RECOGNITION OF THE MINORITY LEADER

The ACTING PRESIDENT pro tempore. The Democratic leader is recognized.

HEALTHCARE

Mr. SCHUMER. Mr. President, there is a possibility that by the end of next week, the Senate will have a vote again on a Republican healthcare bill assembled in the dark of night by one party, without a full account of what the bill would do. It will be a shameful return to the same process the majority used to try to ram a bill through in July, unsuccessfully.

To call a bill like this without a full CBO score is worse than negligent; it is grossly irresponsible. We were told yesterday that CBO may be able to provide a baseline estimate of the cost of the bill but not the coverage numbers or a detailed analysis of how the bill would affect Americans’ healthcare choices.

We are talking about one-sixth of the economy; we are talking about the healthcare of the Nation; we are talking about the lives, day in and day out, of millions of Americans who need healthcare; and we are not going to really know what the legislation does. Senators will be voting blind. They say justice is blind, but the Senators on the other side of the aisle should be walking around here with a blindfold over their eyes because they don’t know what they are voting on. Maybe they don’t care. I don’t know how any Senator could go home to his or her constituents and explain why they voted for a major bill with major consequences to so many of their people without having specific answers about how it would impact their lives.

What we do know is that this new TrumpCare bill, the Graham-Cassidy legislation, is worse in many ways than the previous versions of TrumpCare. This time, TrumpCare would devastate our healthcare system in five specific ways.

First, it would cause millions to lose coverage.

Second, it would radically restructure and deeply cut Medicaid, ending the program as we know it. It has been the dream of the hard right to get rid of Medicaid, which could happen, even though it is a program that affects the poor and so many lives—nursing homes, opioid treatment, people who have kids with serious illnesses.

Third, it brings us back to the days when insurance companies could discriminate against people with pre-existing conditions. The ban on discriminating against people with pre-existing conditions would be gone. We have had a lot of promises from the other side that they would never vote for a bill that didn’t protect people with preexisting conditions. That seems to be going by the wayside in a headlong rush to pass a bill so that they can claim a political victory. What about that mom or dad who finds out his or her son or daughter has cancer, and the insurance company says: Yes, we will cover you; it will cost you $50,000. And they don’t have it, so they have to watch their child suffer. This was an advance that Americans supported. It was an advance most people on the other side of the aisle believe in—gone.

Fourth, the bill gets rid of the consumer protections that guarantee people’s access to affordable maternity care, substance abuse treatment, and prescription drugs. All of those could be out of any plan. You can pay a lot for a plan and not get much for it in this bill.

Fifth, it would throw the individual market into chaos immediately, increasing out-of-pocket costs for individual market consumers and resulting...
in 15 million people losing coverage next year—15 million people.

On the first point, the new TrumpCare would cause millions to lose health insurance in two ways: first by undoing the Affordable Care Act’s major expansion under Medicaid and premium and cost-sharing assistance, instead putting that into an inadequate and temporary block grant, and, second, by radically restructuring and cutting the traditional Medicaid Program through a per capita cap.

We have CBO scores for both, and we may not get one in time. But previous CBO scores of similar schemes have shown that 30 million Americans could lose coverage under this bill—30 million Americans—10 percent, approximately, of our population.

On the second point, the new TrumpCare would end Medicaid as we know it by converting Medicaid’s current Federal-State financial partnership to a per capita cap, which cuts current spending levels over an annual basis. This is a direct blow to nursing home patients and folks in opioid treatment, and CBO has said that 15 million fewer people would receive Medicaid under similar proposals.

On the third point, the new TrumpCare actually brings back the ability of insurers to discriminate against folks with preexisting conditions, as I mentioned.

Fourth, the new TrumpCare would no longer guarantee consumers affordable access to maternity care, substance abuse, and prescription drugs.

Fifth, like previous repeal and replace, it would immediately eliminate the individual mandate, which would raise the number of uninsured by 15 million, relative to current law, in 2018 and increase market premiums by 20 percent.

So vote for this bill, and right away 15 million will lose coverage, and premiums will go up 20 percent. People who vote for this bill are not going to be happy with its results. Each one of these five things represents a major step backward for our healthcare system, bringing back discrimination against folks with preexisting conditions and ending Medicaid as we know it. These are overwhelmingly popular with Democrats, Independents, and Republicans. The hard right doesn’t like it. The big financiers of the other party don’t like it either, but they all do. We are going to go backward—backward. We are going to go backward and not even know the effects.

Why is the other side rushing this through? They are ashamed of it. They need to have that political scalp: See, we abolished ObamaCare. But what they are putting in its place, even for those who don’t like ObamaCare, is worse. They don’t want to know that.

The joy they will have—misplaced joy, in my opinion—of abolishing ObamaCare will evaporate quite soon when their constituents feel the effects of this bill and they hear about it from average folks who are so hurt.

The Washington Post summed up Graham-Cassidy yesterday. They said the bill “would slash health-care spending more deeply and would probably cover fewer people than the July bill—which failed because of concerns over those details.”

Republicans wouldn’t garner the 50 votes for their various healthcare plans earlier this year because of how much damage those plans did to Medicaid, how they rolled back protections for preexisting conditions, and some opposed it because the process was such a sham. Well, all three conditions are here again with this bill: cuts to Medicaid, no guarantee for preexisting conditions, a sham of a bill.

There is a better approach. Right now, Chairman Alexander and Ranking Member Murray are working in a bipartisan way—holding hearings, working through committee, coming back and forth between the parties with discussions. Each side is going to go out and have their work cut out here—should work—in trying to get a proposal that will improve things. That is the kind of legislating many Members of the Senate have said they want to get back to. That is the kind of process that we need to have so we can be worthy of the world’s greatest deliberative body.

After a rancorous and divisive healthcare debate, which took up the better part of this year, Democrats and Republicans have been working in good faith to come up with a bipartisan agreement on healthcare in the HELP Committee. The Republican majority would toss all of that away if they pursue Graham-Cassidy next week the way they are pursuing it—returning to reconciliation, not working in the committees, no CBO report, making a mockery of regular order.

I hope, for their sake and the country’s sake, my Republican friends will turn back from this new TrumpCare and join us again on the road to bipartisan health care—away—a sprouts bloom in the last month. Graham-Cassidy would snuff them out. Nobody wants that—nobody.

I yield the floor.

The ACTING PRESIDENT pro tempore. The assistant Democratic leader: Mr. DURBIN. Mr. President, what is the business of the Senate this morning?

The ACTING PRESIDENT pro tempore. The Senate is considering the Franciscan nomination.

Mr. DURBIN. I ask unanimous consent to speak as in morning business.

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

Mr. DURBIN. Mr. President, I wish to say that the comments made by the Democratic leader, the Senator from New York, really touched me because they go to the heart of this institution.

It was only a few weeks ago, in a dramatic moment, when Senator John McCain returned from Arizona to come to the floor of the Senate and cast a historic vote to move forward on the debate on healthcare. He asked for 15 minutes after that vote to say a few words about his experience as a person and his observations as a Senator, and I stayed in my chair because I wanted to hear him.

John McCain came to the House of Representatives the same year I was elected. Our careers have at least been close or parallel in some respects, though I couldn’t hold a candle to him in terms of his performance and his experience in the military, as well as being a candidate for even higher office.

I listened carefully as he reminded us of what it takes for the Senate to work. What it takes, of course, is the determination of both political parties to solve a problem. He reminded us that means sitting down in committee, with experts, working through some of these complex issues—the give-and-take of the legislative process.

He pointed specifically to the effort to repeal ObamaCare as a failure by those standards. He used as an example the fact that ObamaCare was actually gaining popularity in this country—exactly the opposite of what the other party might have expected. It was an indication to him that we needed to do things better in Senate. Just a few days later, he cast a critical vote to stop what was a flawed process on the Republican side—to repeal ObamaCare without a good alternative, without a good substitute.

I remember that vote early in the morning, right here in the well of the Chamber, and I remember what followed when I saw Senator Lamar Alexander and Senator Murray be—here in front of the cloakroom in a bit of a huddle after that historic vote. I later learned that they had decided it was their turn to step up on a bipartisan basis and find a way to strengthen our healthcare system, not what we have just seen but that ObamaCare, in a way that kind of relied on experts at State levels to give us advice and experts in Washington to really cull through the ideas to find the very best. They invited other Members of the Senate to join them, even those of us not on the committee.

Senator Alexander and Senator Murray have had several meetings, which I have attended and which were very productive meetings—bipartisan gatherings over coffee with insurance commissioners from States all across the Nation, commissioners from both political parties, bipartisan meetings of Governors from States all across the United States. They were basically sitting there saying: What can we do now? What can we all agree to do, regardless of party, that will reduce the increasing costs of health insurance premiums, provide coverage for more people, and provide better insurance? I believe that was a good-faith effort, and it was encouraging, after 7 wasted months of political debate on the floor of the Senate.
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I went to those meetings and came away feeling very positive. It was clear that some very basic ideas were emerging from all over the United States. One of the ideas was cost-sharing reduction so that health insurance companies would not seek higher rates on sicker, older patients and had worse loss experiences would be able to be compensated so they could reduce premium costs, bring the cost of health insurance down, and make sure more people had it available.

Another proposal was reinsurance. That is the same basic idea. Let’s find a way to make the increase in health insurance premiums slow down. I remember the commissioner from the State of South Carolina, a Republican, who said that his experience was that in the next year, health insurance premiums in the individual marketplace were going up 30 percent.

He said that, if you bring in the cost-sharing reductions, which the Federal Government can do, it would only be 10 percent. Ten percent is bad enough. Thirty percent is painful.

Here is something we can do on a bipartisan basis to reduce the cost of health insurance premiums. It struck me as obvious that this is what we should be doing as the Senate.

I applauded Senator Alexander personally and publicly, and Senator Murray, as well, for doing what the Senate was supposed to do. Little did I know that at the same time they were making this bipartisan effort, there was another Republican effort under way to derail them, to stop them, to end the bipartisan conversation that was under way in the HELP Committee.

The Cassidy-Graham proposal, which may come to the floor as early as next week, is an effort to repeal ObamaCare, but it is a flawed effort.

Earlier this morning, the Republican leader came to the floor and spoke of the debate that we have had over and over about what we are going to do in the future, and he talked about the failed ideas of the past. I can tell you that the Cassidy-Graham proposal is a return to failed ideas—ideas rejected once by the Senate but certainly by the American people.

In this morning’s Chicago Tribune, one of the business writers, Michael Hiltzik, wrote an article entitled “The GOP’s last-ditch ObamaCare repeal bill may be the worst one yet.”

Mr. President, I ask unanimous consent to have printed in the RECORD this article in its entirety.

The material was ordered to be printed in the RECORD, as follows:

From the Chicago Tribune, Sept. 16, 2017

THE GOP’S LAST-DITCH OBAMACARE REPEAL BILL MAY BE THE WORST ONE YET

(By Michael Hiltzik)

The Republicans’ plan to repeal the Affordable Care Act is back, a zombie again on the march weeks after it was declared dead. The latest incarnation is Cassidy-Graham, named after its chief sponsors Bill Cassidy of Louisiana and Lindsey Graham of South Carolina.

Compared with its predecessors, the bill would increase the ranks of America’s medically uninsured more—by millions of people—cost state governments billions more in the long run and pave the way for the elimination of all protection for those with preexisting medical conditions.

Among the biggest winners of federal funding would be the states that had the foresight to expand Medicaid under the Affordable Care Act and the resolve to reach out to lower-income residents to get them coverage; they’d last year alone, for instance, in pursuit of the nearly 600,000 more residents now enrolled in healthcare funding. Among the big winners would be states that have done nothing of the kind for their residents—refusing the Medicaid expansion matching with outreach efforts. They’d be rewarded for their stupidity and inhumanity with an increase in federal funding.

Over the last week or so, reviews of the measure have been pouring in from healthcare experts, and they’re almost unanimously negative. Major health providers and consumer organizations have turned thumbs down, as have analysts looking at its economic effects.

Pitch Ratings, which keeps an eagle eye on the fiscal condition of states issuing bonds, judges Cassidy-Graham “more disruptive for most states than prior Republican efforts,” with $2.7 trillion in reduced Medicaid access to the newly eligible population under the Affordable Care Act (ACA) are particularly at risk under this latest bill.

The bill’s fate, like the political tide seemed to be shifting away from the GOP campaign to roll back the gains in health coverage achieved by Americans over the last seven years under the Affordable Care Act. Democrats are coalescing around universal health coverage—"single-payer," as it’s typically called—or the issue for the 2018 election. It’s notable that the rise in public support for this approach, at least in the abstract, has coincided with the GOP’s so-far unsuccessful repeal effort. The emergence of the new bill also comes as other Republicans are scheduling hearings and reaching across the partisan aisle to craft a sensible plan to shore up the Affordable Care Act marketplace.

Despite those drawbacks, Cassidy, Graham and their co-sponsors are trying to push the bill through the Senate. In fact, it could be passed with only 50 votes (plus a tiebreaker cast by Vice President Mike Pence) under Senate reconciliation rules. After the vote, it’s projected that 60 votes, meaning it could—and presumably would—be blocked by Democrats. The deadline places more pressure on the Congressional Budget Office, which must analyze the bill before it can come to a vote, to move fast.

In recent days, the sponsors have claimed that the bill’s count is edging toward 50. But Sen. Rand Paul (R-Ky.) has stated that he’s a "no," since the bill isn’t conservative enough for his taste. Sen. Susan Collins (R-Maine), who scuttled her position on the last repeal effort in July, isn’t expected to change her mind on this one. Sen. Lisa Murkowski (R-Alaska), who also voted it down, hasn’t left her position, but there don’t seem to be compelling reasons for her to shift to the "yea" column now. The position of Sen. John McCain (R-Ariz.), who abortions, isn’t clear, but he’s a close friend and frequent ally of Graham’s. In any event, the backers still seem to be a vote or two short.

Those are the procedural issues. Now let’s turn to the text, and the issue of why anyone would think Cassidy-Graham would improve America’s healthcare system.

In broad terms, the measure would terminate the Affordable Care Act’s Medicaid expansion, premium and cost-sharing reduction subsidies, tax credits for small businesses, and a host of other pro-consumer provisions by 2020. It would eliminate the act’s individual mandate employer mandates retroactive to Dec. 31, 2015.

The bill provides for no replacement of these provisions, beyond capped block grants to states. In effect, it’s a pro-consumer no-replace bill. The Congressional Budget Office, as it happens, analyzed that approach in July in connection with a different bill. It found that by 2026, the number of uninsured Americans would increase by 32 million, compared with under current law. That’s almost 12 million more people, it estimated for other Republican repeal-and-replace measures, which the budget office said would cut enrollments by 20 million to 22 million.

The block grant to states, which Cassidy and Graham portray as one of their bill’s chief virtues, is in fact a poisoned chalice any governor would be a fool to accept. The proposal, Cassidy said in unveiling the bill, “gives states significant latitude over how the dollars are used to best take care of the people in each state.” That papers over its significant drawbacks.

By their nature, block grants are proposed to replace existing programs, and they’re almost always back-door mechanisms to reduce federal spending. That’s the case here. The Cassidy-Graham block grants would replace the entire Medicaid expansion and the premium and cost-sharing subsidies, and a couple of other spending provisions. But the existing spending in these programs and the new block grants automatically adjustable automatically to enrollment and the medical needs of the enrollees, and the subsidies pegged to enrollee incomes and the premiums charged by insurers for benchmark Obamacare plans.

Block grants would be fixed, changing only according to a complex formula. And that formula would be “insufficient to maintain coverage levels equivalent to the ACA,” the Center on Budget and Policy Priorities calculated last week. Between 2020 and 2026, the center reckoned, the grant would provide $239 billion less than projected federal spending for the existing Medicaid expansion and subsidies.

In 2026 alone, the shortfall in Medicaid and subsidy funds together would total $80 billion.

What’s worse is that the grant would be unable to respond to real-world conditions. Consider how healthcare costs are likely to rise in Texas and Florida in response to this summer’s floods, which drove thousands of residents out of their homes and increased the threat of water-borne disease. They’d get no help from the block-grant formula.

To provide needed care to their residents under any other state program, they’d have no choice other than to limit enrollments, cut benefits, charge higher premiums or co-pays, or drain funds from other federally funded programs.

As set forth in the bill, the formula would “over time move money away from states, predominantly Republican, that have not expanded Medicaid.”

That Medicaid expansion states would lose as much as 60% of what they would be due under current law. According to the numbers crunched by the Center on Budget and Policy Priorities, among the states that全面落实 on Obamacare, including expanding Medicaid and mounting aggressive enrollment support
for the marketplaces, California would get $27.8 billion less in federal funding in 2026, New York $18.9 billion less, and Massachusetts $5.1 billion less.

States that opted for the Affordable Care Act would make out like bandits: Texas, which showed absolutely no regard for its ACA-eligible population, would get $8.2 billion more in Federal disbursements, and a black hole for healthcare reform, would get $1.4 billion more. This is how carrot-and-stick approaches to healthcare reform work—the Bizarro world. (Apologies to Jerry Seinfeld.) In any case, all the federal funding would disappear after 2026, According to Fitch, “over time even non-expansion states may challenge the proposed changes to Medicaid, which will likely accelerate for all states over time.”

Another provision of Cassidy-Graham that is significantly worse than its predecessors is the latitude it gives states to evasively avoid consumer-protection rules in the Affordable Care Act. The bill would allow states to request waivers from the federal government allowing them to nullify the act’s requirement that all policies include 10 essential health benefits, including maternity care, hospitalization, mental health and substance abuse treatment, and prescription coverage. This is an invitation to states to allow insurers to market junk insurance to their residents.

The states could also request waivers of the act’s all-important protections for people with preexisting medical conditions. The law forbids insurers to charge anyone more based on their medical condition or history, except for a modest increase in premiums based on age, and a surcharge for smokers. Previous GOP repeal bills have substituted a “continuous coverage” provision, which protects applicants who haven’t let their coverage lapse for a month or two from being surcharged when they renew.

Cassidy-Graham throws out that protection. It would allow states to request a waiver allowing insurers to charge more “as a condition of enrollment or continued enrollment . . . on the basis of any health status-related factor.” Translation: Under such a waiver, insurers could check applicants’ health or medical histories before setting premiums—even for renewals.

Finally, the bill, crucial Republican litmus test—abortion. The bill bars any insurance policy receiving federal funds—that is subject to payments under the Affordable Care Act. The bill would allow states to request waivers from the federal government allowing them to nullify the act’s requirement that states that have Medicaid expansion under the Affordable Care Act and the resolve to reach out to lower-income residents [and provide health insurance coverage].

He goes on to say that, under this Cassidy-Graham bill, “they’d be punished with draconian cuts in healthcare funding.”

He goes on to write: “Among the big winners would be the states that have done nothing of the kind for their residents—refusing the Medicaid expansion and interfering with outreach efforts [to bring more people into health insurance coverage].

They would be rewarded, perversely, for doing the wrong thing.

He writes: Over the last week or so, reviews of the measure have been pouring in from healthcare experts, and they’re almost unanimously negative. Major health providers and consumer organizations have turned thumbs down, as have analysts looking at its economic effects.

He talks about the impact of this bill beyond increasing Federal funding for States that did not help their residents and cutting Federal funding for States that did. The bill provides no replacements for the tax credits available for small businesses and the subsidies for health insurance premiums currently in the law beyond a capped block grant to States.

He writes: In effect, it’s a repeal-and-no-replace bill. The Congressional Budget Office, as it happens, analyzed that approach in July in connection with a different bill. It found that by 2026 the number of uninsured Americans would increase by 32 million, compared with under current law. That’s about 50% more people uninsured than it estimated for other repeal-and-replace measures, which the budget office said could cut enrollments by 20 million.

Honestly, can my colleagues on the other side of the aisle in good conscience go home to their States and say: I voted to repeal Obamacare and you are going to lose your health insurance as a result of it.

I can tell you what it means in my State. A million people would lose their health insurance because of this Republican repeal effort. I don’t know how Members of Congress—House or Senate—from Illinois could in good conscience vote to take health insurance away from massive numbers of Americans.

We are blessed here. Those of us who serve in Congress have access to good health insurance. It is not cheap. It shouldn’t be. But it is there. It is always there, and we don’t have to worry about it. Some Members are wealthy enough that they take care of it in other ways. For most Members of Congress, we use the insurance marketplace for our preexisting conditions. The government pays a share of it, just as it does for Federal employees.

We have access to health insurance. How then could we turn and say to the people we represent: I just voted for a bill to take away your access to health insurance?

That is what this Cassidy-Graham bill does. That to me is hard to imagine—that a Member can believe they were elected to the Senate for that purpose.

What does it do to the States with the capped block grant in terms of their loss of Federal funds? It is amazing. Some States would lose as much as 60 percent of what they currently receive under the current law.

According to the numbers crunched by the Center on Budget Policy Priorities, among the states that went all-in on Obamacare, including expanding Medicaid and mounting aggressive enrollment support for the marketplaces, California would get $27.8 billion less in federal funding in 2026, New York $18.9 billion less, and Massachusetts $5.1 billion less.

I looked at the list for my State of Illinois. It would lose $1.4 billion in Federal funding by 2026. Just to show the contrast, as for the State of Texas, which did not expand Medicaid and which did not cover low-income individuals, and which does have a hospital that showed absolutely no regard for its patients—how much would the Cassidy-Graham bill do for the State of Texas? They wouldn’t lose a penny. They would add in Federal funding $8.294 million.

They would be big winners because they turned their back on low-income individuals and didn’t expand Medicaid or increase the number of enrollees. What a perverse incentive for Governors and governments on a State basis to turn down coverage knowing that at some point they will be rewarded for that approach.

Another provision of Cassidy-Graham that is significantly worse than its predecessors is the latitude it gives states to evasively avoid consumer-protection rules in the Affordable Care Act.

One of the most important parts of the Affordable Care Act was a reform that is supposed to give everyone going to buy health insurance, it is going to be there when you need it. First, you will be able to buy it, even if you have someone in your family with a preexisting condition. That is one of the first casualties of Cassidy-Graham—going back to a failed idea in the past, which said if you have a sick baby or if you have a spouse who survived cancer, you either can’t buy health insurance or you can’t afford it. We got rid of that once and for all. At least we did.

Cassidy-Graham brings it back to life. It says: Let the insurers decide if they want to cover you or not.

Another thing we said is that the disparity in premium costs between the more expensive and the least will be 3 to 1. Cassidy-Graham tosses it out and says it is 5 to 1. What it means—and AARP knows this better than any other organization—is that senior citizens are going to end up paying five times more for their health insurance under Cassidy-Graham than they currently do under the Affordable Care Act.
When you look at the other protections that we built in to provide that your policy, when you bought it, would cover mental illness and substance abuse treatment, that is considered revolutionary but important. Finally, after all of these years in America, we are left with illness rather than a cure. We are looking at it as something that can be successfully treated. Yet here comes Cas-sidy-Graham tossing out that requirement as well.

The insurers decide what they want to offer. I was talking to one of the Republican Senators the other day, and he said: Well, you know, some people just may not want to buy certain coverage. I can understand that, but I can also understand the reality of life. Who can predict that next year or next month you would learn that perhaps your high school daughter has been taking opioids and now is addicted to heroin? You didn’t know it before, not when you bought your health insurance policy. Now that you know it, who is going to cover the substance abuse treatment?

Under the Affordable Care Act, it is built into your health insurance policy. Under the Cassidy-Graham approach, it is an option. Try it if you like it. It doesn’t work in a lot of circumstances. We buy insurance for things we pray will never happen, but we want to be covered if they do. Cassidy-Graham walks away from that. They are referring to what they call “flexibility.” It is flexibility to buy insurance that isn’t there when you really need it.

When you look at the litany of all of the States that are winners and losers under Cassidy-Graham, you have to shake your head. Why would we be richly rewarding States that have not done their part to expand Medicaid coverage? Why would we devastate the Medicaid Program, which is so important for so many people?

Medicaid is a program that many people didn’t understand until we got into this debate, but it is a program that is essential if you have a disabled child.

A woman in Champaign, IL, with a young son in his twenties suffering from autism told me that without Medicaid coverage she would have to institutionalize, and there is no way her family could afford it. We know that Medicaid is there for that family and for many low-income families when it comes to pregnancies, to make sure that mom has a successful pregnancy and that the baby is born healthy and ready to thrive.

Is that an important asset? Of course it is, and it is an important element of Medicaid. The one thing that costs the most in Medicaid is something the Republicans don’t want to acknowledge, and that is the fact that two out of three people at nursing homes—solitary who are under medical care—rely on Medicaid. Without that Medicaid assistance, who is going to pay that bill?

The family reaching into their savings? Some can, but most will not be able to afford it.

How will the Republicans explain that away as just one of the benefits of flexibility—that Medicaid is not there when your parent or grandparent desperately needs it?—

So now we have this debate before us, which will come up by the end of next week, and it is one that really will affect a lot of people across America. 1, for one, will do everything I can to stop this. Any program that is going to take health insurance away from a million people in Illinois and up to 30 million nationwide is a bad start, a bad idea, a failed idea.

I yield the floor.

I suggest the absence of a quorum.

The ACTING PRESIDENT pro tem-pore. The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

Mr. DURBIN. Mr. President, I ask unanimous consent that the order for the question be dispensed with.

The ACTING PRESIDENT pro tem-pore. Without objection, it is so or-dered.

CLOTURE MOTION Pursuant to rule XXII, the Chair lays before the Senate the pending cloture motion, which the clerk will state.

The senior assistant legislative clerk read as follows:

CLOTURE MOTION We, the undersigned Senators, in accordance with the provisions of rule XXII of the Standing Rules of the Senate, do hereby move to bring to a close debate on the nomination of Noel J. Francisco, of the District of Columbia, to be Solicitor General of the United States.


The ACTING PRESIDENT pro tem-pore. By unanimous consent, the mandatory quorum call has been waived.

The question is, Is it the sense of the Senate that debate on the nomination of Noel J. Francisco, of the District of Columbia, to be Solicitor General of the United States, shall be brought to a close?

The yeas and nays are mandatory under the rule.

The clerk will call the roll.

The legislative clerk called the roll.

Mr. CORNYN. The following Senators are necessarily absent: the Senator from Mississippi (Mr. COCHRAN), the Senator from South Carolina (Mr. GRAHAM), and the Senator from Kansas (Mr. MORAN).

Mr. DURBIN. I announce that the Senator from New Jersey (Mr. MENENDEZ) is necessarily absent.

The PRESIDENT pro tempore. On this vote, the yeas are 49, the nays are 47.

The motion is agreed to.

The Senator from Arkansas.

RECOGNIZING THE 70TH ANNIVERSARY OF THE UNITED STATES AIR FORCE Mr. BOOZMAN. Mr. President, I rise to speak in honor of the 70th anniversary of the United States Air Force.

In the seven decades since its inception on September 18, 1947, the U.S. Air Force has bravely fought to protect freedom, liberty, and peace on every continent around the globe. From active participation in major international conflicts to providing humanitarian support throughout the world, the U.S. Air Force has continued to be the Nation’s leading edge across every domain and throughout every location by meeting the challenges of an ever-changing world with limitless strength, resolve, and patriotism. Today, more than 100,000 airmen are standing watch at 175 global locations, committed to continuously defending the people and interests of the greatest Nation in the world.

As co-chair of the Senate Air Force Caucus and the son of a retired Air Force master sergeant, I have been personally touched by the proud history of this distinguished service. From the earliest days of aviation when the Department of War accepted its first military airplane to the present-day delivery of global airpower, the U.S. Air Force has made tremendous strides in the technological innovation and operationalization of air, space, and cyberspace warfighting capabilities.

The earliest aviation pioneers believed in the notion of airpower and fought for its development into a force so formidable that its responsibilities
Mr. Francisco has impressive experience arguing before the Supreme Court. His client won in each of the three cases he argued there. He has been named one of Washington, DC’s “Super Lawyers,” as well as one of the “100 Most Influential Lawyers in America.”

It is vital for the Office of the Solicitor General to have its leader in place, so I am pleased that, after waiting for over 3 months on the Senate floor, we are finally voting on this nominee today.

Mr. DURBIN. Mr. President, I rise in opposition to the nomination of Noel Francisco to be the Solicitor General of the United States.

The Solicitor General—often called the “tenth Justice”—argues on behalf of the United States in the Supreme Court. It is a critical position in our government, and it is critical that we have a Solicitor General with the independence to tell the President when the people of the United States take before the Court is indefensible.

Mr. Francisco already had a troubling tenure as Acting Solicitor General earlier this year. He led the effort to defend the President’s controversial travel ban. That Executive order was blocked repeatedly in Federal courts and was then withdrawn. In defending this unconscionable order, Mr. Francisco argued that there should be no judicial review when a President makes decisions on immigration policy on the basis of his national security assessment. The Ninth Circuit stated that “there is no precedent to support this claimed unreviewability, which runs contrary to the fundamental structure of our constitutional democracy.” If he is confirmed, Mr. Francisco would likely be called upon again to defend President Trump’s latest iteration of the travel ban when it is considered by the Supreme Court in October.

When he was under consideration by the Judiciary Committee, I asked Mr. Francisco many questions to give him the opportunity to show his independence from President Trump. For example, I asked him if he agreed with President Trump’s absolute claim that 3 to 5 million people voted illegally in the 2016 election. He refused to answer the question.

I asked him if he believed it was appropriate for a President to ask an FBI Director to pledge loyalty to him. He declined to comment.

I also asked him about the Constitution’s Emoluments Clause, which prohibits government officials from accepting gifts or benefits from foreign states without Congress’s consent and which many legal scholars believe President Trump has violated. Mr. Francisco actually had written an opinion on the Emoluments Clause in the Department of Justice’s Office of Legal Counsel. I asked him what he believed the Founding Fathers intended this clause to mean. His response? “I do not have any well-formed views on the scope of the Emoluments Clause.” It is puzzling that an originalist like Mr. Francisco would not comment on the original meaning of a constitutional provision, but he claimed up when it came to the particular clause which is directly relevant to President Trump’s behavior.

While Mr. Francisco has been reluctant to demonstrate independence from President Trump, the Treasury Department’s general counsel repeatedly in his capacity as counsel to the President at the White House and in leadership roles at the Department of Justice.
busy. It has never been more important to choose a Solicitor General who displays independent judgment and who is willing to say no if the views the President wants to execute are improper or unlawful. In my questions to him, I repeatedly gave Mr. Francisco the opportunity to express independent judgment, but he did not do so, and what I have seen in his speeches and his advocacy concerns me.

In short, I do not believe Mr. Francisco has demonstrated that he can be the Solicitor General that our Nation needs. I will oppose his nomination.

Mr. BOOZMAN. Mr. President, I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

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

The PRESIDING OFFICER. Without objection, it is so ordered.

HEALTHCARE

Mr. MARKEY. Mr. President, in July, millions of Americans awoke from a months-long nightmare, as the Senate did the right thing and voted down multiple repeal proposals to repeal the Affordable Care Act. The American people breathed a sigh of relief when the future of their healthcare and of their children’s healthcare was safe for the time being.

Unfortunately, Republicans want us to go back to that nightmarish time by reigniting their proposal to threaten healthcare coverage for millions of Americans. While the bill the Republicans are supporting today may have a new name, it contains the same mean, devastating policies. It is a zombie bill that despite best efforts and against the will of the American people, will not die.

Like its TrumpCare predecessors, the Graham-Cassidy bill will result in less coverage and increased costs. It eliminates the built-in protections for Americans with preexisting conditions, causing many of them to see their premiums skyrocket just because of a diagnosis. Some experts estimated that an individual with diabetes could face a premium surcharge of $6,600 under Graham-Cassidy.

Graham-Cassidy will also allow States to decide what insurers have to cover. They don’t; meaning, once again, your ability to have comprehensive healthcare coverage would depend upon where you live.

This is not the type of healthcare reform people in this country want or need, and it is certainly not the type of reform to help us overcome our Nation’s opioid use disorder epidemic.

With 91 Americans dying every day from an opioid overdose, we are clearly in the midst of our Nation’s preeminent public health crisis. Over these last few months, we have heard time and time again that access to substance use disorder care is the linchpin to stemming the continually rising tide of opioid overdoses. Unfortunately, it appears our Republican colleagues have not been listening.

To be fair, access to treatment today is still a challenge. Only 1 in 10 people with substance use disorders receive treatment. Right now, an estimated 2 million people with an opioid addiction are not receiving any treatment for their disorder.

Yet the solution is not to block-grant funds which would otherwise be used to help people get care for their substance use disorders. The answer is also not kicking people off their insurance, but that is what my Republican colleagues are yet again proposing to do.

As with the previous versions of TrumpCare, Graham-Cassidy would threaten insurance coverage for 2.8 million Americans with a substance use disorder. It would end Medicaid expansion and cap the program, slashing its funding and decapitating access to lifesaving care. This bill would simply take a machete to the leading payer of behavioral healthcare services, including substance abuse treatment.

Also, in the same vein as earlier proposals, Graham-Cassidy would allow States to waive the essential health benefits the Patients’ Bill of Rights put in place under the Affordable Care Act that ensures that every plan provides comprehensive coverage. Because covering mental health and substance use disorder treatment is expensive, this would likely be one of the first benefits to be cut. As a result, someone struggling with opioid use disorder would have to pay thousands of dollars in out-of-pocket costs, likely forcing many to forgo lifesaving substance use disorder care.

This epidemic of opioid abuse and overdose deaths will only get worse as long as we have a system that makes it easier to abuse drugs than to get help for substance use disorder. For some, Graham-Cassidy would only exacerbate this already dire problem in our country.

Just last week, a leading sponsor of the bill said: “We recognize there are circumstances where states that expanded Medicaid will have to really ratchet down their coverage.” “Rachet down,” that is not improving healthcare. That is ripping insurance coverage away from the one in three Americans struggling with opioid use disorder who relies on Medicaid. That is getting billions of dollars in addiction care and treatment.

Graham-Cassidy isn’t a new block grant program, it is a chopping block program—for Medicaid, for coverage, for access to critical substance use disorder services. I believe past is prologue here. Just as Americans rejected the inhumane and immoral TrumpCare of months past, they are already seeing this new attempt is more of the same and, in some cases, worse. Many patient providers, and other healthcare groups have already come out against Graham-Cassidy, citing the bill’s inability to maintain the healthcare coverage and consumer protections currently provided in the Affordable Care Act. It is deja vu.

Enough is enough. Republicans newest shortsighted stunt is distracting attention away from the real issue at hand. They want to change the individual insurance market and to help decrease costs. Let’s end this partisan gambit to repeal and replace the Affordable Care Act and start focusing on ways to make the healthcare system in our country better, not worse.

We need all of you, in every corner of the country, to once again stand up and fight against these mean attempts to harm the health of our families, members, our friends, and our neighbors. We need your energy, your commitment, and your passion to do what you did a few months back to help make sure our better angels once again will prevail. You have done it before, and I know you can do it again.

My Democratic colleagues and I will be fighting right here with you to finally put this zombie healthcare bill to rest.

This is the time. This Chamber will be the place where we have this debate within the next week on whether there is going to be a destruction of the Affordable Care Act, a destruction of the promise of access to healthcare for every American. The Republicans are coming back, once again, to try to destroy that promise.

The Republicans harbor an ancient animosity toward the goal of ensuring that there is, in fact, universal coverage for every single American; that it is a right and not a privilege. What they want to do is to leave these programs as debt-soaked relics of the promises that have been made to ensure that there is, in fact, coverage for every American.

So this is going to be the debate. Daniel Patrick Moynihan, the great Senator from New York, used to say that when you do not want to help a person, or to hurt a person, to engage in benign neglect—benign neglect. What the Republicans are doing is engaging in a program of designed neglect—of ensuring, after this designed program is put in place, that there is a reduction in coverage, that there are fewer people who get the help they need, that older people have to pay more, that fewer people get access, and that Planned Parenthood is defunded. It is all part of a program of designed neglect of the healthcare of all Americans.

This is a historic battle. It was not completed in July. Now, in the next 10 days, we must complete this fight and make sure they are not successful.

Mr. President, I yield the floor. I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The bill clerk proceeded to call the roll.

Ms. KLOBUCHAR. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.
The PRESIDING OFFICER. Without objection, it is so ordered.

Ms. KLOBUCHAR. Mr. President, I rise to join my colleagues on the floor to share concerns I have been hearing from people in my State about the latest health care bills.

Minnesotans and patient groups, such as AARP, oppose this bill because eliminating the Medicaid expansion and the Affordable Care Act’s help for millions of people means they would lose coverage and it would increase their out-of-pocket costs.

People in my State are concerned about this bill’s impact on rural hospitals, especially—as are the rural hospitals—because it makes deep cuts to Medicaid, and the new block grant in the bill would end completely by 2027.

I am very concerned that this bill would reverse the progress we are making in addressing the opioid epidemic by putting a cap on Medicaid, a program that has been critical for substance abuse treatment for people struggling with this addiction.

A few months ago, I pointed out that we were on plan F in the Senate. Plans A and B were the two House versions of a repeal. Plan C and D were the two Senate versions of the repeal; plan E was the repeal bill without a replacement plan; and then we were presented with plan F. That, of course, went down. However, the Senate Democrats were joined by Senator McCaskill, Senator Klobuchar, and I voted it down. I actually thought we couldn’t get lower than F, but apparently we can because now we are here.

Many of the Minnesotans I have talked to don’t like A, B, C, D, E, F, or the plan we are discussing that has been proposed. I have heard from people all over my State. At the Minnesota State Fair, I heard from the old and the young, from men and women, cancer survivors, people with disabilities, and many more. None of them wanted us to keep going down a partisan path when it comes to healthcare.

That is why I was so happy to tell them over the recess that new work—bipartisan work was being done was done by Senator Alexander and Senator Murray, two Senators who proved that they could work across the aisle on the education bill, which they did last year. They are the leaders on the Health, Education, Labor, and Pension Committee, and they have been moving forward together with truly bipartisan hearings and discussions. I have attended a number of them with Governors and with experts on this issue to figure out the best ways to strengthen individual markets and reduce costs. That is something we have done successfully in our State with an all-Republican legislature and a Democratic Governor. We worked on it in our State, so I figured we could maybe bring this out on the national level. But it isn’t enough that the work that is going on with Senator Alexander and Senator Murray on a bipartisan basis could be imploded in favor of another version of a repeal bill that hasn’t even gone to a hearing before the HELP Committee in regular order, as we would expect—the regular order Senator McCain spoke up for in the introduction of this bill. We came to the Senate and said, why would we rush to take a vote before we have that critical information?

I have repeatedly heard my colleagues criticize moving forward with bills when we don’t know their impact. This is the entire healthcare system of America. Why would we be taking a vote on a bill when we don’t even know the full impact—when we do not have a full score of the legislation or, most honestly, the impact it would have on people’s healthcare? Our constituents are owed this. It is their healthcare and their money we are messing around with.

When I talk to my constituents, none of them ask me to do what we already know this bill does. It cuts Medicaid, eliminates the Medicaid expansion, threatens protections for people with preexisting conditions, and kicks people off their coverage. Instead, they want us to work together on bipartisan solutions to fix what we have when it comes to healthcare: to strengthen the exchanges, support small businesses, reform delivery systems, lower the cost of prescription drugs. I don’t see anything in this bill that would lower the cost of prescription drugs—nothing.

I have heard the same message from senior groups—like the Children’s Hospital Association, which is strongly opposed to this bill. I have heard the same message from the American Heart Association, the American Diabetes Association, the American Cancer Society, and several other patient groups that have said this “proposal just repackages the problematic provisions” of the bills that were voted down earlier this summer.

This bill, the Graham-Cassidy bill, is not the only one. Instead of making these kinds of cuts and moving backward, Senator Alexander and Senator Murray have invited all Senators, as I noted, to participate in their process. They have had dozens of Senators show up at every single one of them, as Senator Alexander calls them, coffees, with 30, 40 Senators showing up. I know because I was there. Why do they show up? Because they know we must make changes to the Affordable Care Act. Then, the Senate, with the leadership and based on the work we have seen in Minnesota and other places, these changes can be made across the aisle.

In these hearings and discussions on bipartisan solutions, we have talked about the State-based reinsurance program passed in Minnesota. While we are still waiting for the Federal waiver—I will make a pitch for this at this hearing—and after the administration, even passing it alone helped us to bring promised rates down. I know Alaska has a State-based reinsurance program and recently got approval from the administration, and New Hampshire and other States are pursuing similar plans. That is why I support Senator Kaine and Senator Carper’s legislation, the Individual Health Insurance Marketplace Improvement Act, to reestablish a Federal reinsurance program.

Another topic we have discussed frequently as part of the HELP Committee process over the past few weeks is the cost-sharing reduction payments. These are critical in stabilizing the individual market and reducing uncertainty. That is why I support Senator Shaheen’s Marketplace Certainty Act.

It is clear that this type of legislation could get support from both sides of the aisle to improve the system, but beyond these immediate fixes, it is long past time that we come together to pass legislation to address the skyrocketing costs of prescription drugs. I have a bill that would harness the negotiating power of 41 million seniors on Medicare to bring drug prices down. Right now, Medicare is actually banned by law from using their market power to negotiate for better prices. I would bet on 41 million seniors for getting better prices, but we are not giving them that chance.

Senator McCain and I have a bill to allow Americans to bring in safe, less expensive drugs from Canada.

Senator Lee and I have a bill that would allow temporary importation of safe drugs that have been on the market in another country for at least 10 years. When there is competition for that drug in this country, this would let patients access safe, less expensive drugs.

Senator Grassley and I have a bill which would stop something called pay-for-delay, where big pharmaceutical companies actually pay off generic companies to keep less expensive drugs off the market. That bill would save taxpayers $2.9 billion and a similar amount for individual consumers.

Are these bills in the latest proposal from our Republican colleagues? No, they are not. Instead, what does this bill do? While it devastates the Medicaid Program, it repeals big parts of the Affordable Care Act that help people afford insurance and, instead, puts in place an inadequate block grant which completely goes away in 10 years. This bill does the opposite of what the people came up to me and talked to me about in my State over the August break.

So before we rush through a vote on it, before we even know the impact of
it, before it has even gone through the committee process as it is supposed to do, before we even give an opportunity for Senator LAMAR ALEXANDER and Senator PATTY MURRAY—the two leaders on the committee that matters for healthcare in rural communities, and without their plan, no, the proposal would be to rush the vote on this, and that is just wrong.

What is this in real terms? It is a woman from Pine Island, MN. Her husband was diagnosed with mental illness for years, but she told me she felt so fortunate that he was able to get mental health treatment through their insurance coverage. She is worried that if these types of repeal efforts succeed, people like her husband will go back to being desperate for help.

This debate is about people with pre-existing conditions who would see their costs skyrocket under this bill. Teri from my State has ovarian cancer. Unfortunately, it is not the first time she has had it. She said that when she was diagnosed back in 2010, she ended up declaring bankruptcy due to the cost of her treatment. Teri said bankruptcy was “just a reality for a lot of people with cancer.”

Likely, under the Affordable Care Act, Teri can afford insurance and is currently responding well to treatment. That word “score” sounds technical, but it is about what the bill would mean to people like those kids who came up to me in the parades with their parents and to people, like Teri, with ovarian cancer.

This debate is also about our seniors and our rural communities. Our hospitals often operate at margins of less than one. That is one reason Senator GRASSLEY and I introduced the Rural Emergency Acute Care Hospital Act a few months ago to help rural hospitals stay open. But cutting Medicaid by billions of dollars and repealing the Children’s Health Insurance Program before States like mine run out of money due to the cost of healthcare would move us in the opposite direction.

In my State, Medicaid covers one out of five people living in rural areas. I know my colleagues, Senators COLLINS, CAPITO, and MURKOWSKI, have previously expressed concerns about the impact of Medicaid cuts in their States, which also have big rural populations. Cutting Medicaid and eliminating the Medicaid expansion doesn’t just threaten healthcare coverage for these populations; it threatens the local communities where these hospitals are located.

These rural hospitals are on the frontlines of one important fight; that is, the fight against the opioid epidemic. We just found out that in our State last year, over 600 people died from opioid and other drug overdoses—over 600 people. That is about two per day. It is more people than we see die from car crashes in our State. It is more people than we see die from homicide. Deaths from prescription drugs now claim more lives than either of those two issues. This epidemic affects our seniors too. One in three Medicare part D beneficiaries received a prescription opioid last year.

While there is much more work to do to combat the epidemic, I want to recognize the progress we have made with the CARA Act and the Cures Act, with all the work that has been done, but making cuts to Medicaid will move us in the opposite direction. We have all heard the voices, not just of those on the frontlines of the opioid crisis but from doctors and hospitals, patients, seniors, nursing homes, and schools saying that this bill is not the way forward. Instead, let’s do what we all heard people wanted to do in August; that is, to work across the aisle on actual solutions that help people afford healthcare. I yield the floor.

The PRESIDING OFFICER. Under the previous rule, all postcloture time has expired.

The question is, Will the Senate advise and consent to the Francisco nomination?

Mr. DURBIN. Mr. President, I ask for the yeas and nays.

The PRESIDING OFFICER. Is there a sufficient second?

There appears to be a sufficient second.

The clerk will call the roll.

Mr. CORNYN. The following Senators are necessarily absent: the Senator from Mississippi (Mr. COCHRAN) and the Senator from Kansas (Mr. MORAN).

Mr. DURBIN. I announce that the Senator from New Jersey (Mr. MENENDEZ) is necessarily absent.

The PRESIDING OFFICER (Mr. CRUZ). Are there any other Senators in the Chamber desiring to vote?

The result was announced—yeas 50, nays 47, as follows:

[Nominees announced]

NOT VOTING—3

Cochran Menendez Moran
Thereupon, the Senate, at 12:58 p.m., recessed until 2:15 p.m. and reassembled when called to order by the Presiding Officer (Mr. PORTMAN).

EXECUTIVE CALENDAR—Continued

The PRESIDING OFFICER. The Senator from Massachusetts.

Ms. WARREN. Mr. President, I ask recognition to speak.

The PRESIDING OFFICER. The Senator is recognized.

FREE ACT

Ms. WARREN. Mr. President, 12 days ago, Equifax, one of the Nation’s largest credit reporting agencies, disclosed that hackers had breached its system and stolen highly personal information on nearly half of America. Social Security numbers, birth dates, home addresses, phone numbers, even credit card numbers—all in the hands of criminals.

Since then, I have heard from working families in Massachusetts and all across the country. The Equifax hack is a nightmare. At best, it is a giant hassle—time on hold with the credit reporting agencies, fees for this service and that service, confusion about what has been stolen and what to do about it. At worst, it could be ruinous—a lifetime of responsible spending and borrowing wiped out by identity theft and fraud. People are outraged, and rightly so.

Bad enough that Equifax is so sloppy that they let hackers into their system, but the company’s response to the hack has been even worse. First, Equifax hid the information about the breach for 40 days—40 days. Equifax gave criminals a 40-day headstart to use the information they had stolen, while the rest of us were left in the dark.

Then, when Equifax finally decided to disclose the breach, they didn’t call or send letters to the millions of Americans who were victims of the hack. No, they announced the breach and then made everyone go to an Equifax website and turn over more personal information to see if they were one of the people who had been affected. Once Equifax had the new information, they provided confusing and misleading information about whether the person had actually been a victim of the breach.

Worse still, while Equifax was unclear about whether someone’s information had been stolen, they were very clear about one thing: Everyone, whether or not their information was stolen, should sign up for a supposedly free Equifax credit monitoring service called TrustedID Premier. The terms of use for this program initially required anyone who signed up to have a credit card. Why? Because after the first year, Equifax could start automatically charging the credit card for the service if the person hadn’t already canceled. That is right. Equifax was trying to impose secret fees and profit off the hack of their own system.

But wait, it got even worse. To sign up for this credit monitoring service, Equifax at first forced consumers to give up their right to go to court and sue Equifax if they had any disputes about the product. Equifax changed some of the terms after there was a lot of public pressure.

Let me see if I can recap all this. After allowing hackers to steal personal information on as many as 143 million Americans, Equifax hid the breach for more than a month, failed to clearly inform people whether the information had been stolen, then tried to profit off the breach by tricking people into signing up for a costly credit monitoring product that also required them to give up their legal rights. Wow.

In the last decade, there has been so much corporate misconduct, so much bald-faced contempt for consumers, that at times it seems as though we have all just grown numb to it. But even against all expectations, Equifax’s conduct is just jaw-dropping.

It is time for us to fight back. It is time for all of us to fight back—Democrats, Republicans, Independents, Libertarians, vegetarians—it doesn’t matter. We have to rise up to the challenge of Equifax’s hack, or we know someone who has, and we all deserve better. That is why I partnered with Senator SCHATZ and 10 of our colleagues to introduce the Freedom from Equifax Exploitation Act, or FREE Act, last Thursday. Our bill empowers consumers to take back control of their personal credit data.

The Equifax hack has highlighted the strange role of credit reporting agencies like Equifax and how they interface with our financial system. Banks and other big companies feed agencies like Equifax information about every financial transaction you make, from purchasing a car, to taking out a mortgage, to getting a student loan. They get information on every monthly payment you make, and they know where you live and how long you have lived there and what your phone number is. Every day, the credit reporting agencies package up that information about you into files that they then sell to other people. Sometimes it is people you know about, like when you apply for a mortgage or a car loan, but a lot of times, Equifax is selling data to people who want to sell you something—credit cards or student loan refinances or even a cruise.

The bottom line is that companies like Equifax are making billions of dollars a year collecting, sharing, and selling highly personal information about you, all without your explicit permission or without paying you a penny. The FREE Act tries to level the playing field. First, it allows every consumer to freeze and unfreeze their credit file for free. If you freeze your credit file, no one can access it, and the credit reporting agency can’t use it either. A freeze is like a “do not call” list for your credit information. It is about security. It means that even after the Equifax hack, thieves can’t open credit cards or take out loans in your name even if they have your personal information. But it is also an easy way to give you the power to decide who gets your information for any other reason.

This basic idea—that Equifax doesn’t pay you when they sell your data, and you shouldn’t have to pay Equifax to keep them from selling it.

Our bill says that the same rules apply to all three credit reporting companies, and all three companies must refund your money if they charged you for a credit freeze in the aftermath of the Equifax breach. No one in this industry should profit from this hack.

This is a test for Congress. Will we act quickly to protect all the problems in the credit reporting industry. It is only a first step.

Congresswoman MAXINE WATERS, the top Democrat on the House Financial Services Committee, has been looking into the credit reporting industry for years, and she has introduced comprehensive legislation to reform the industry and empower consumers. The Senate ought to take a very close look at her bill.

I have also launched an investigation into the Equifax breach and the whole credit reporting industry. In the upcoming weeks, I will be gathering more information from Equifax, other credit reporting agencies, Federal regulators, and legal experts. I want to keep fighting to make sure that credit reporting agencies can’t exploit consumers and put their personal information at risk.

This a test for Congress. Will we act quickly to protect all the consumers, or are we going to cave in to firms like Equifax that have spent millions of dollars in lobbying Congress for weaker rules? Which is it?

The FREE Act is a simple but important response to the Equifax hack. I hope my colleagues will join me and help pass this bill.

Thank you, Mr. President.

I yield the floor.

I suggest the absence of a quorum.

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

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. CARDIN. Mr. President, there are reports that we may be having a vote next week, under reconciliation, dealing with the healthcare system of this country. We know that colleagues have filed a new bill, but it is basically the same bill we’ve seen in the past but this time even more consequential to our healthcare system and the people of this country.

I mention first the process because this bill has not gone through any regular order. It has not been referred to a committee for consideration. It has not been marked up or debated in our committees. It is going to supposedly be
up its own rules for how they wish to serve on the Finance Committee, which has jurisdiction over healthcare. We are not going to get the opportunity to get the expertise and help from our staff to look at the consequences of the Cassidy bill and have a chance to work on it to make it work. Instead, what is going to happen if the game plan goes forward is that this bill is likely to be on the floor next week during budget reconciliation, where a simple majority will be able to pass it. There will be no chance for debate on the floor because we don't know as a vote—arama, and it will affect one-sixth of our economy. That is not the way we should be operating.

I am also told that it will be done without a Congressional Budget Office score. I have been conscious of how, if we knew from previous Congressional Budget Office scores on the other proposals that have been brought out that tens of millions of Americans would lose their health insurance coverage. Premiums would increase by, in some cases, 20 to 25 percent. It was certainly information from our objective staff that caused many of us to say: What are we doing? But at least we had that information before we voted.

We are now being told that we may get a one-liner from the Congressional Budget Office giving us the bottom-line impact on the deficit but not the specific information as to how many millions of Americans are going to lose their health insurance. That is what is going to happen, for those of us who currently have insurance, with our premium increases.

This is not the way we should be proceeding. It retreats from the progress we have made against the abusive practices of the insurance industry.

Under the Cassidy bill, as I understand it, each State could basically set up its own rules for how they wish to have coverage. The entire Medicaid system would increase by 9 percent, but there is nothing to be covered so, for those of us who currently have insurance, with our premium increases.

We all pride ourselves that we eliminated preexisting conditions. But, in reality, if the State determines what benefits are going to be covered and under what conditions, preexisting conditions come back. That is something we should not ever allow to happen.

Yet, under the Cassidy bill, we are going to be telling people that we may not be covering their mental health needs. We may not be covering the opioid addiction problems. We may not be covering maternity benefits. We may not be covering pediatric dental coverage.

We don’t know what plans will be offered. Today we know that under the Affordable Care Act we have the national protections so that everyone is on a level playing field. So a State could design a plan that would be too unaffordable for individuals who need the coverage because they isolate the group into such a small number. That is not what we should be doing. That strategy would provide inadequate coverage.

Let me explain what I mean. I have a young family that came to me and told me about the circumstance of their child being born prematurely with significant challenges. They said that, if that child had been born before the Affordable Care Act, they would have reached their lifetime cap within the first year. Then, the family would have had to make some horrendous decisions on how to take care of their child. That is why we passed the Affordable Care Act.

Of course, the Cassidy bill would allow the family to be in bankruptcy. That could return again under the bill that could be brought to the floor next week.

I know circumstances where families have been able to get preventive healthcare and discover cancer at an early stage. That coverage wasn’t there before the Affordable Care Act. There is no guarantee that coverage will be there afterwards.

We could return again to bankruptcies. Healthcare costs were the leading cause of bankruptcy before we passed the Affordable Care Act. Now we are going to say that because of inadequate coverage and lack of coverage, American families are going to be faced with taking care of their family, running up bills, and ultimately facing bankruptcy.

We are going to be affecting people’s lives. Make no mistake about it.

But the real tragedy of this proposal, and why it is so different from some others, is that it is an abandonment by the Federal Government of the Medicaid system. It would institute draconian cuts to the Medicaid system, to the extent that it would cripple it and make it worthless. The States would be unable to respond.

It is interesting that we just got a letter from 10 Governors in our country—five Democrats and five Republicans. All of these Governors said: No, don’t do this. We can’t do what you are asking us to do. We would have to make horrible decisions on whether we are going to continue to provide long-term care to our seniors, whether we are going to expand coverage, whether we are going to narrow benefits, whether we are going to prescription drugs, or whether we are going to cut providers who may not be able to treat Medicaid patients. These are decisions the States are going to have to make if this bill ever becomes law.

It affects so many. Some of the things that may be misunderstood about the Medicaid system is that 1.75 million veterans are in the Medicaid system. Quite frankly, the coverage has never been enough, and the Medicaid system has helped fill the gap. That is going to cause a problem for our veterans.

I will just give one example. We pride ourselves on federalism and federalism, to me, is very important. I served for several years in the State legislature. I am the former speaker of the Maryland General Assembly. I take pride in the fact that Maryland has been an innovator in healthcare. They have been able to do that because of the partnership between the Federal Government and the States. That is federalism. It has worked.

If this bill were to become law—the Cassidy bill—it would prevent the States from innovating, giving us more flexibility if you don’t give them the resources and tools to deal with this because you can’t.

For example, in Maryland we have what is known as an all-payer rate structure. All payers, regardless of who covers your insurance. Whether you are Medicare, Medicaid, or private insurance, or you pay on your own, you pay the same rate in my State for hospital care at the same hospital. It is an all-payer structure. We have cost-shifting, and we don’t have charity hospitals. Therefore, we have hospitals that are located in all of our communities. It saves the Federal Government money, it saves the State government money, and it has proven to be more cost-effective. The State experimented and it worked, and the Federal Government has partnered with us.

Can we continue that program if we got these draconian cuts in Medicaid? The answer is no. Can we continue this program if we see the uninsured rates go up in Maryland because of people losing their health coverage under this bill? The answer is no. You can’t do this if the uninsured rates go from 6 percent to 12 percent to 15 percent of uncompensated care in our hospitals. That is what is at risk with the Cassidy bill.

To me, it really is also an affront to federalism in that you are creating States versus States. I am in a State that did Medicaid expansion. As the Cassidy bill has been scored, it will cost my State $2.1 billion. I know that our legislature doesn’t have that money. I know the Governor doesn’t have it. He just recently sent a letter to the Maryland Board of Public Works and reduced the State budget because they were running a deficit and they are not allowed to run a deficit. They can’t possibly cover the $2.1 billion.

Here is another tragedy of this bill. The tragedy is that some States do much worse than other States. Why? Because Maryland expanded Medicaid,
as did many other States and, therefore, we got more Federal funds because we had more people in the program. That seems fair. We are covering more people. But the Cassidy bill takes away from those States that expanded coverage. It hurt the people in Maryland because we did the right thing on Medicaid.

Is that what this country is all about? Is that the United States? Is this body going to condone that type of discrimination against States? I hope that is not the case.

So I hope, for many reasons, on substance and on process, that this bill is not brought up. Let’s return to regular order. I heard Senator McCain say that so eloquently on the floor of the Senate.

For the last two weeks I have been working with my Republican and Democratic colleagues to come up with bipartisan ways to improve our healthcare system. We have made progress. We have some good ideas that stabilize the individual marketplace and bring down the cost of healthcare, working together. Guess what. If we succeed in regular order and bipartisanship, we will only do one thing so people have stronger protections, but we will also have policy that will stand the test of time and give predictability to the healthcare system of this country. That is what we should be doing, in the best tradition of the Senate.

So I urge my colleagues: Let’s work together, and let’s reject this proposal. Let’s not bring it up. Let’s continue our work on a bipartisan basis. Certainly, don’t use reconciliation. Let’s work together for the people of this country.

With that, I suggest the absence of a quorum.

The PRESIDING OFFICER (Mr. Hoeven). The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

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

The PRESIDING OFFICER. Without objection, it is so ordered.

Ms. CANTWELL. Mr. President, my colleagues have been here on the floor over the last few minutes, last night, this morning, and this afternoon to talk about our distress about people trying again to push the repeal of the Affordable Care Act without a successful strategy to move our Nation forward with more affordability.

We just received a letter from 10 Governors basically telling us the same thing, to slow down and work on a bipartisan basis. They are basically telling us the proposal people are trying to push through without regular order is not the kind of thing which will help us in making the necessary reforms.

I think these bipartisan Governors—from the Governor of Colorado to the Governor of Ohio, to the Governor of Alaska, the spectrum of Democrats, Republican, and Independents is something people in the United States of America should listen to because it is important we get this right because the affordability of healthcare is so important.

What I don’t like about the proposal now being pushed by my colleagues—even though they want the States to have some flexibility and play a larger role—is that it basically ends the 52-year State-Federal partnership we know as Medicaid today; that is, it changes the dynamic in saying that the States and the Federal Government are in business together to take care of a population that is the most vulnerable to make sure our compatriots are getting them affordable access to healthcare is a priority because it actually reduces everybody’s healthcare costs.

When people think about the expense in healthcare, ask any provider, and they will tell you that 1 in 5 dollars spent on the Federal system drives the cost of everybody’s insurance. If you leave people uninsured, they go to the hospital, they raise the cost to everybody. It is not a good strategy.

We have seen States that have covered people on Medicaid actually raise people out of poverty, help their economies, and reduce the costs at individual hospitals driving down the cost of private insurance.

Why would we want to destroy that by authorizing in legislation the end of this 52-year relationship between the Federal Government and States, trying to make sure our populations are covered; that if a State spends a dollar, they can count on the Federal Government to spend that dollar as well and to continue the partnership that works cost-effectively?

What I also don’t like is it sunsets Medicaid for 15 million people. If you are going to sunset Medicaid for these 15 million people, when are you going to sunset Medicaid for the rest of the Medicaid population? When are you going to try, by legislative action, to curtail the opportunities for millions of Americans who use Medicaid as a stabilizing force for health insurance in America? In our State, 600,000 people—most of whom were previously uninsured—would be in that sunset of Medicaid.

The legislation my colleagues are pushing would basically end the funding for this block grant program in 2027, and give an unfunded bill for those individuals of about $300 billion. I doubt States have the money. I doubt the individual market is going to take care of those individuals cost-effectively as we are taking care of them through Medicaid. States will then cost shift these resources back to the public, raising everybody’s rates again.

Our job has to be about affordability. It has to be about driving down costs. It has to be about driving down costs in the individual market and driving down costs of the delivery system overall. There is nothing innovative about taking those individuals who use Medicaid and sunsetting it in this bill.

I also object to the notion, in this bill, of literally advocating the privatization of Medicaid. They are advocating that what you do with this population is take them out of the current program and shift them onto the private individual market.

Some people who are following this might say: Well, wait. Then they can go to the private market—and, yes, there is support to make sure we have affordable health insurance. No, because the legislation also says you stop that support by 2027. So this is just one more sneak attack by our colleagues at saving people off Medicaid. To start the process and agree to privatize Medicaid, where is it going to end?

I am the first to say we can improve our delivery system, that we can save money. I have advocated I think one of the most cost-effective programs is the Affordable Care Act; that is, to move the population of our citizens who need care in the later years of their life off nursing home care and into community-based care. It is one-third the cost. Our State, the State of Washington, saved more than $2 billion doing this over a 15-year period of time. If other States would do this, we could save $100 billion or more by having States give people the opportunity to age at home and have a long-term care delivery system which works in our communities. It is one-third the cost.

That is innovation. Those are cost savings. That is improvement on our current delivery system, hopefully covering an aging baby boomer population that will reach retirement and a population of Americans who are going to live longer.

There is nothing innovative about just privatizing Social Security, privatizing Medicaid, and kicking people off by shifting them over to an exchange and then cutting the resources for the exchange. I hope our colleagues will stop the notion that somehow this is innovation. It is not innovation. It is sunsetting, it is privatization, and it is cutting people off care. That is why I have heard from these Governors and others about why it is so important not to take this bait.

We need to make sure we are continuing our bipartisan discussions, continuing to work together about what will drive affordability into the marketplace, continuing to work together to give them clout to negotiate on rates and giving a State the ability to negotiate on rates—or on drug costs or on insurance—you can save dollars. It is being done right now in New York and Minnesota, and it can be done in other places.

Cost-shifting to the States this $300 billion to age at home and making States make...
the draconian decision of, “Wait. I already shifted that population onto the exchange. Oh, my gosh. The Federal Government just cut the funds we are going to get,” and the next thing you know, this population is left without care.

Privatizing Medicaid is not the way to go. I hope our colleagues will continue to discuss, on a bipartisan basis, the aspects of the Affordable Care Act that could be expanded to drive down costs and increase affordability. I hope they will continue to make sure things like basic health—the essential elements of what should be covered in a basic plan—are there for our consumers; that we are not going to take the bait in thinking that by cutting essential services to people, somehow that is the way to get a private insurance plan.

We have the ability to work together. My colleagues and I have been working and discussing these ideas. My colleagues Senator MURRAY and Senator ALEXANDER are working on various ideas in their HELP Committee, as we are working in the Finance Committee, in making sure we expand and fund the affordability of insurance for children and fund the Children’s Health Insurance or CHIP program.

Let’s not make this worse. Let us not end this 52-year relationship that has successfully covered a population of America, and let’s not fall for the bait and think that somehow this is going to suit taxpayer—It is not. It is going to cost shift right back to the private individual, raise individual rates, and we can’t afford it. Let’s not privatize Medicaid. Let’s fight to make it a more cost-effective program for the future.

Mr. President, I yield the floor.

The PRESIDING OFFICER. The Senator from Maine.

The remarks of Ms. COLLINS pertaining to the motion of S. 1835 are printed in today’s RECORD under “Statements on Introduced Bills and Joint Resolutions.”

Ms. COLLINS. Mr. President, I yield the floor.

The PRESIDING OFFICER. The Senator from Wyoming.

Mr. BARRASSO. Mr. President, last week, the junior Senator from Vermont and a group of other Democrats unveiled a proposal to have Washington take over Medicare for those seniors—one in four doctors doesn’t take Medicare. They intend to do this on the backs of American seniors, which is of grave concern to me as a doctor who has taken care of many senior citizens—many people on Medicaid—as part of my practice as an orthopedic surgeon. Their idea is to put everyone in this country on a new program that operates like Medicare. That is about 250 million Americans who would be added on to the Medicare Program, which is already being strained.

One-third of the Democrats in the Senate have signed on to this plan. It seems to be the litmus test for the liberal left. Several of them came to the floor last night to criticize efforts by the Republican Party to save America’s failing healthcare system. Problems with the American healthcare system, as a result of ObamaCare, continue to increase the impacts, such as those that I hear every weekend in Wyoming, including this past weekend.

From what I heard from the Democrats, they want to let the system collapse in a way that we can then impose a complete Washington takeover of healthcare in America. To me, this plan they are proposing is going to be devastating to people currently on Medicare. These are the seniors who rely on Medicare today. What the Democrats are proposing is going to, in my opinion, undermine the stability, the integrity, and the certainty of the Medicare Program on which our seniors rely, and if we get it, it is truly their lives that depend upon it.

Remember when President Obama promised that if people liked their insurance, they could keep their insurance, and that if they liked their plan, they could keep it? Well, people realize that is not exactly what happened. Many people lost their plan. They lost their insurance. It got more expensive, harder to afford, and millions ended up paying a fine, a fee, or a tax—whatever you want to call it—because they weren’t able to afford the premiums for the plan that President Obama said they had to buy, and they lost their own plans. Well, now it seems that if Democrats have their way, millions of seniors will find out that they are not going to be able to keep the insurance that they have right now that they depend upon and that they use on a daily basis.

The Sanders plan will get rid of Medicare Advantage plans. We have 17 million seniors in this country who are on Medicare Advantage plans. The reason they sign up for Medicare Advantage is that for them personally, when they study the advantages to Medicare Advantage for them in terms of preventive care and coordinated care. That would all go away under BernieCare.

It is interesting to watch this whole process unfold because one in three people who are currently on Medicare have chosen to go outside the system the Democrats want to put them into. They want to put everyone into it, but a third of the people on Medicare have chosen a different path.

What happens to these 17 million Americans who are currently on Medicare Advantage with the scheme that Senator SANDERS and other Democrats want to happen to them? They are going to lose what they have today.

A lot of seniors are probably going to lose access to their doctors as well because when their plans change, their doctors change. That is because there are going to be doctors who won’t be able to take care of these new Medicare patients whom ObamaCare has caused to have problems, but it is made worse by what is being proposed by Senator SANDERS.

Right now, it can be tough for a senior to find a doctor. These are seniors on Medicare. That is because today about one in four doctors doesn’t take new Medicare patients or take any Medicare patients as more and more people—and 10,000 baby boomers a day are turning 65 and going on Medicare. There are more and more people on Medicare without an expansion of the number of doctors to take care of them.

Since the reimbursement is lower, what doctors and hospitals are paid to take care of Medicare patients is lower than what those doctors or hospitals get paid for patients with private insurance. Their primary concern is that they are already crowded and loaded in their office and very busy taking care of patients, with waiting rooms full—their choice, of course, is to choose patients who pay them more than what they get from the government.

You say: Why is that? Is that right? Well, having practiced medicine for 24 years and having run an office, there are issues related to paying nurses, healthcare personnel, rent, electricity—all the costs of running an office, let alone the high cost of medical malpractice insurance. We know the huge cost of that. A physician who wants to be able to pay his or her bills needs to take all those things into consideration. And with Medicare paying less than the current going rate for care at hospitals and with doctors, the concern is, Will Medicare patients be able to find a doctor in the first place?

The Democrats’ solution is to cram more people onto Medicare when we already have 10,000 people a day joining the ranks of Medicare and Social Security. If a doctor has a lot of Medicare patients, he or she has to make sure they have enough other patients who have insurance to make up for the lower rates Washington pays. Well, under the Democratic plan, doctors won’t have the backup of private insurance companies because that is all going to go away. Those things will be lost to people who want to buy private insurance. Under the plan the Democrats are now—and it is not just Democrats in the Senate; a majority of the Democrats in the House of Representatives have cosponsored legislation by Representative CONyers that does exactly the same thing: puts everyone on a Medicare Program—a government takeover of healthcare.

When the Democrats came to the floor last night, I didn’t hear them say anything about that. How are they going to guarantee that seniors will keep their doctors? Seniors are not going to be able to keep their doctors
under the Sanders liberal-left plan that is being proposed and cosponsored by over half of the Democrats who are in the House of Representatives.

We are already facing a shortage of doctors in this country. The Association for American Medical Colleges, which helps oversee the training of doctors, says that the shortfall could be as many as 100,000 doctors across the country within the next decade. If we have fewer doctors and more people trying to get appointments, that means less access for seniors.

It is not even clear if Washington can afford to add every man, woman, and child on to a government program like Medicare because Washington has done a terrible job in running Medicare as it is. The Medicare trust fund is supposed to be exhausted at the end of the 2020s. That is what the Medicare trustees are telling us. In 12 years, they say, there will only be enough money coming in to fund about 8 or 9 cents on the dollar of what it costs to maintain Medicare, and that is supposed to be paying out. The program is going to have to start doing something—either raising taxes or cutting benefits. From what I have seen proposed by Senator SANDERS, it would be something else. The Medicare trustees say the program needs significant reform. They say it is already unsustainable. The Democrats’ plan does nothing to change any of that. It does nothing to reform the program. All it does is crowd more people into a system that is already struggling financially.

My concern is that the Democrats’ plan is going to undermine the stability of the Medicare Program that our seniors desperately need. We should be taking steps now to shore up, to strengthen Medicare so that it is able to keep the promises that we made to our seniors. My goal is to save, to strengthen, and to simplify Medicare. That is not what we are seeing here.

A few years ago, we knew the Medicaid Program needed help. Democrats just threw more people into the system with ObamaCare. That is what they did. With the expansion of ObamaCare, the majority of people who have new coverage under ObamaCare didn’t get it through private insurance; they were put into the Medicaid Program, which has significantly strained Medicaid and made it much harder for people on Medicaid. It is the people for whom it was originally designed—low-income, women, children, people with disabilities. It was designed to help them. It made it harder for them to get care because all these individuals who were working-age adults were put on in addition.

Now it looks as though the Democrats want to do the same thing they did to hurt Medicaid—make it harder for our patients on Medicare. It won’t work. An insurance card does not equal work. An insurance card does not equal work. An insurance card does not equal work. An insurance card does not equal work. An insurance card does not equal work. An insurance card does not equal work.

Instead of protecting seniors today, however, Democrats are trying to give Medicare to everyone else. No 17 million seniors are going to lose access to the plans that they have chosen, that work for them, and that they want to keep.

Seniors are going to lose access to the doctors and the hospitals that they choose because there is no money coming into the system as they continue to put more people on Medicare. Democrats should not be building their takeover of the American healthcare system on the backs of our seniors.

Thank you.

I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The assistant bill clerk proceeded to call the roll.

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

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. MCCONNELL. Mr. President, I ask unanimous consent that notwithstanding rule XXII, at 4 p.m. today, there be 2 minutes of debate, equally divided between the managers or their designees, and that following the use or yielding back of the time, the Senate shall vote on the motion to invoke cloture on the Emanuel nomination.

The PRESIDING OFFICER. Is there objection?

Without objection, it is so ordered.

The Senator from New Hampshire.

HEALTHCARE

Mrs. SHAHEEN. Mr. President, it feels like Groundhog Day again because, once more, we are seeing Republican leadership in the Senate advancing another bill to repeal the Affordable Care Act and to make radical cuts to the Medicaid Program.

As with previous efforts, this new bill—they call it Graham-Cassidy, but it really is TrumpCare 3.0, the third version, and it is strictly partisan legislation, crafted in secret outside of regular order, without hearings or consultation with most Senators or stakeholders. But here is what is different: This bill is even more reckless and more destructive than previous bills to repeal the Affordable Care Act.

It would take away healthcare coverage from an estimated 30 million Americans. It would effectively end protections for people with preexisting conditions by allowing insurers to charge exorbitant rates. That would make profound cuts to the Medicaid Program, which is a lifeline for 33 million children, 10 million people with disabilities, and 6 million seniors in nursing homes. It would be a tragic setback in the fight against the opioid epidemic, because it would take away life-saving treatment for an estimated 1.3 million people with substance use disorders. In New Hampshire, where we are at the epicenter of the heroin and opioid epidemic, it would have a huge and tragic impact.

President Trump said that the previous Republican bill to repeal the Affordable Care Act was “mean,” and he said he did not want a “mean” bill, so I’ll let him take it from there.

As I have said repeatedly, the only constructive way forward is for Democrats and Republicans to come together in a good-faith, bipartisan effort to repair and strengthen the current law.

As Senator MCCAIN said so this Chamber in July: “Let’s return to regular order. We’ve been spinning our wheels on too many important issues because we keep trying to find a way to win without help from the other side.”

When Senator MCCAIN said that, we gave him a standing ovation on the floor of this Chamber. In the weeks since the vote on the last attempt to repeal the Affordable Care Act, the Senate has actually been acting on his advice. We have been working under the leadership of Senators ALEXANDER and MURRAY, the chair and ranking member of the Health, Education, Labor, and Pensions Committee, on bipartisan legislation to restore certainty to the health insurance market, fix problems with the Affordable Care Act that we all acknowledge. This effort includes a version of legislation that I have been working on to make regular appropriations for cost-sharing reduction payments. Those are payments that we promised to our seniors when we put in the Affordable Care Act that are absolutely necessary to keep the system working and deductibles affordable for low- and middle-income Americans.

I have participated, as have so many Senators, in the bipartisan meetings they have held with Governors, providers, stakeholders, insurers, and State insurance commissioners to craft a positive way forward. It is very disappointing that we are here today with another attempt to blow up all of these bipartisan efforts by bringing to the floor another different and divisive bill.

To understand why people are upset and fearful about this latest attempt to repeal the Affordable Care Act, I would call our attention to the many positive impacts the Affordable Care Act has had across the country—and in my home State of New Hampshire—and the consequences of repealing that law.

Thanks to the Affordable Care Act, more than 49,000 Granite Staters have been able to get health insurance coverage through the marketplace. Thanks to the Medicaid expansion, more than 11,000 people in New Hampshire have gotten lifesaving treatments. The Medicaid expansion, which has been a bipartisan effort between the then-Democratic Governor MAGGIE HASSAN and a Republican legislature, has been a critical tool in our fight against the opioid epidemic, and hundreds of thousands of Granite Staters with preexisting conditions at one time or another no longer face discrimination in the insurance marketplace. In one fell swoop, this Graham-Cassidy TrumpCare legislation would put all of these gains in jeopardy.
I would appeal to my colleagues in the Senate to stop and reconsider what is going on. Listen to the stories. Look at the faces of everyday Americans whose lives would be devastated by this legislation—from children, to seniors, to veterans.

Several months ago on Facebook and other social media platforms, I asked people across New Hampshire to tell me their stories—stories about how the Affordable Care Act has made a life-saving difference or has improved their lives and the lives of their families. I was overwhelmed by the response.

Here in Washington, some seem to think that repealing the Affordable Care Act, no matter how destructive the consequences, is just about politics; it is about notching a win for their team. But for the people in New Hampshire and across the country, repealing the Affordable Care Act and slashing Medicaid isn’t about politics. It is about life and death. It is about people being cut off from vital, life-saving treatment for substance use disorders. It is about families losing affordable health coverage, about seniors being unable to pay for nursing home care, and about millions of vulnerable people with preexisting conditions who would effectively be denied health coverage. It is about returning to the pre-ACA days when simply being a woman was considered a preexisting condition, justifying much higher rates. I urge Republican leaders to stop this latest effort of destructive partisanship. There should be no retreat from the progress we have made in recent years, including the progress against the opioid epidemic. I encourage Senators who support this ill-conceived legislation to listen to the Governors, listen to the insurance commissioners, listen to patient and provider groups, and, most importantly, listen to their constituents.

Let’s fix what is not working about the Affordable Care Act, and let’s not pass legislation to take healthcare away from people. Let’s support bipartisan efforts now under way in the Senate to stabilize the marketplaces and to provide access to quality, affordable healthcare for every American.

Thank you.

I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The bill clerk proceeded to call the roll.

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

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. KING. Mr. President, over the past several weeks, there have been real discussions—bipartisan discussions about fixing the problems in the Affordable Care Act, about controlling the growth of premiums, about being sure that there is some certainty in the market to prevent the collapse of the individual market, which, by the way, will not only affect people who are participating in the Affordable Care Act exchanges but will affect all those in the individual market, and we could stop that.

The Senate HELP Committee had 4 days of hearings, roundtables, coffees with other Senators to talk about what the problems are, what we can do to solve them, and we were making some real progress. Then, all of a sudden, up comes TrumpCare 4.0 or 5.0—I have lost track another bill totally repeal and not replace the Affordable Care Act.

On July 21, 1861, there was an occurrence at the beginning of the American Civil War. It was the First Battle of Bull Run. The Union troops were routed that day, and there was a disorganized retreat back to Washington. That has been known historically as the Great Skedaddle, and that is exactly what is happening again today. This is the greatest skedaddle because what the Senate majority is doing is avoiding responsibility.

You don’t want to be discriminated against because of preexisting conditions? Well, that is not our decision. We are passing it on to the Governor. The Governor can make that decision; it is not we who are doing it.

You don’t want to have the bands for the differential between young people and old people changed so that elderly people pay twice, three times, four times, five times as much as young people for health insurance? You don’t want responsibility for that? Fine. Pass this bill and give it to the Governor. That is what we are talking about—a copout. It is the Senate majority once again trying to jam down the throats of the American people a change they don’t want. They don’t want it.

Everywhere I went in Maine in July and August after our vote back at the end of July, people said thank you. They said thank you, and they said to tell SUSAN COLLINS thank you for the vote to preserve our healthcare. Yet here we are, back at it again.

I think we need to understand what this bill does. Essentially, it does two things. It shifts all the responsibility for the healthcare provisions for the most vulnerable Americans entirely to the states. It provides little in the way of guardrails or protection, and it gives them less money in order to provide that kind of healthcare. That is called shift and shaft. Shift the responsibility, and shaft the people who have to try to make that responsibility.

I have been a Governor. What we are talking about here is cutting off the support and the dollars that are needed to meet those responsibilities. Everyone says: Well, this is all flexibility. We are providing flexibility—flexibility, on a bipartisan basis, and fix the problems with the American healthcare system which certainly need to be addressed.

Mr. DURBIN. I announce that the Senate from Hawai’i (Ms. HIRANO), the Senator from New Jersey (Mr. MENENDEZ), the Senator from Florida (Mr.
Joe and I began our Senate careers around the same time. He started sorting mail and performing other entry-level duties in the first year of my first term. He was 18 years old. I wasn’t quite that young, but it was a long time ago for me.

When he came to work with us, I don’t think Joe knew if I was a Republican or Democrat. He just knew he needed a part-time job to pay for books and beer. These were pre-internet and email days, and making certain the immeasurable amount of mail we received from constituents was opened, given to me or to appropriate staff, and answered as quickly as possible was very labor intensive and challenging, but he acquitted himself well, as he has with every responsibility he has accepted on my behalf.

His work ethic and reliability quickly made him indispensable. He worked his way up to legislative correspondent and then to legislative assistant, with the highest professional accolades for, among other things, helping me fight years of pitched battles with appropriations bills, targeting wasteful spending, and the practice of earmarking. Those were the days when the Senate actually debated appropriations bills. I have many fond memories of Joe drafting thousands of amendments at my direction to strike wasteful earmarks, although I doubted if any of them would lead to a successful vote. My nights were easier because of your help and friendship.

The Senate is in session, my nights are easier because of your help and friendship. Thank you, my friend, my dear friend. It has been quite a ride together. I don’t imagine serving here without you.

Mr. President, I yield the floor.

The PRESIDING OFFICER. The majority leader.

Mr. MCCONNELL. Mr. President, I listened carefully to Chairman MCCAIN talking about his long association with Joe. I thought maybe it was appropriate, I would say to my colleague from Arizona, to point out that he eliminated an awful lot of my earmarks over the years.

Mr. MCCAIN. Great job.

Mr. MCCONNELL. I will have fond reflections as well, in a sense. I want to join you, Senator MCCAIN, in congratulating Joe for a great job for you and for our country for a very long time.

Mr. MCCAIN. Thank you.

The PRESIDING OFFICER. The Senator from Virginia.

HEALTHCARE

Mr. KAINE. Mr. President, I rise to talk about a topic that is consuming much attention—our efforts to improve healthcare for Americans. Before the passage of the Affordable Care Act in 2010, Americans with preexisting conditions faced serious barriers. Since 2010, the rate of uninsured Americans has declined to a historic low, with 20 million more Americans—the combined population of 16 or 17 States—getting access to health insurance coverage.

Over 410,000 Virginians have received care through individual marketplaces just last year. An additional 400,000 would be eligible to receive Medicaid if Virginia ever chooses to expand it. Since being put on the HELP Committee or being notified I would be put on it in December, I visited community health centers, medical schools, behavioral health centers, and hospitals all across Virginia talking to people about their healthcare needs. I am committed to working together with my colleagues to improve the healthcare of Virginians and Americans. There is a right way and a wrong way to do it.

After there was the failure of an effort in late July or early August to pass a bipartisan repeal and replacement of ObamaCare using the budget reconciliation process, the success of which would have taken health insurance away from 20 million Americans, I am disappointed that we haven’t learned the lesson of the right way to do this and are apparently poised to explore yet again doing it the wrong way.
There is a proposal on the table that is designated the Graham-Cassidy proposal, and it is just as threatening as the ACA repeal we voted on just 2 months ago. It restructures traditional Medicaid funding using per capita caps and block grants. The core of this bill is any reform would dramatically go after the restructure, and shrink Medicaid, which is critical to so many people. It ends protections for people with preexisting conditions by allowing States to essentially rewrite essential health benefits. This would eliminate Medicaid expansion and the Affordable Care Act subsidies and replace them with a block grant that would be insufficient to cover the needs of Virginians. Even that block grant funding would end after 2026—as if the need to help low- and moderate-income people afford coverage would dramatically disappear overnight.

The proposal is new and is newly on the floor. There isn’t a full CBO analysis of it thus far by my analysis of it thus far by my colleagues, the AARP to come out against it. They are worried it will leave insurance out of the reach of millions of Americans. In Virginia alone, more than 300,000 marketplace enrollees would have their tax credits to help them afford insurance jeopardized.

What would it mean for the healthcare system? We are not completely sure. At least on the earlier versions we voted on, we had CBO scores telling us how many millions might lose insurance. There seems to be a desire to rush this through prior to a full CBO analysis. I can’t understand why. But we do know it would be devastating to those on Medicaid. Sixty percent of those on Medicaid in Virginia are children, but the majority of spending on Medicaid is for our parents and grandparents, the elderly, and folks with disabilities. I was just in Bristol, VA, on the Virginia-Tennessee border this weekend. I heard very palpable requests for the need for better healthcare, especially in rural Virginia.

Here is what we know about the Graham-Cassidy proposal, at least based on the analysis of it thus far by my State healthcare officials. We will see a $1.2 billion cut in Medicaid under this plan over the next number of years, and the cuts would impact families like those I visit as I travel around Virginia. I recently had a roundtable in Northern Virginia with parents of children with severe disabilities who, though they have disabilities, are doing some remarkable things because they receive support from Medicaid for assistive technologies and in school programs.

A mother, Corinne, told me about her son Dylan. Dylan has a very rare neuromuscular condition SMARD—spinal muscular atrophy and respiratory distress. He has a tracheostomy tube and relies on a ventilator to breathe. He also gets all of his nutrition through a G-tube. He requires in-home skilled nursing services, and he also requires a nurse to attend school with him. But he goes to public school, and he is a successful student because Medicaid funding enables him to go. Medicaid helps reimburse the school system for the services that provide him.

“For us, affordable and quality healthcare means that Dylan can lead a fairly normal life despite his medical issues.” That is what his mom said. He can lead a fairly normal life on a ventilator, seated in a wheelchair with a nurse. He can lead a fairly normal life, despite his medical issues. He can live at home, go to school, and participate in activities any kid his age enjoys. Without the assistance of Medicaid, he wouldn’t be able to do those things.

Reducing Medicaid spending would limit States’ abilities to provide waivers for medically complex kids. The mother adds that “the possible return of lifetime limits on pre-existing conditions would be devastating.”

I also met with a mother, Amy, from Richmond, who has a son, Declan. Medicaid covers her son’s care, therapy, and medications. Medicaid helps her son have the best quality of life possible and helps him with the prospect she prays deeply for—that one day, despite his medical condition, he can live independently as a productive adult. Medicaid funding cuts to Medicaid could take away this protection for countless Virginians, especially these children.

Here is what I ask for: Why don’t we have an open process to truly debate improvements to our healthcare system, instead of a rushed, closed, secretive process that threatens mothers like Amy and children like Declan?

After the efforts last summer, I hoped that the colleagues in the Senate would embrace the greatest deliberative body of the country, to stop and listen, to stop and listen, to stop and listen, to stop and listen to the voices of citizens and experts on this score. To stop and listen to the voices of citizens and experts on this score. To stop and listen to the voices of citizens and experts on this score. To stop and listen to the voices of citizens and experts on this score.

We gave a standing ovation on the floor of the Senate in late July when our colleague, Senator John McCain, returned from a very difficult diagnosis of brain cancer. We gave him a standing ovation when he spoke to us, and here is what he said. He talked about the fact that we had a challenge on healthcare. He talked about the skinny repeal bill that was on the floor of the Senate. He said:

“We’ve tried to do this by coming up with a proposal behind closed doors in consultation with the administration, then springing it on skeptical members, trying to convince them it’s better than what is before us to swallow our doubts and force it past a unified opposition. I don’t think that is going to work in the end. And it probably shouldn’t. Why don’t we start by legislating in the Senate, the way our rules and customs encourage us to act. If this process ends in failure, which seems likely, then let’s return to regular order.

Let the Health, Education, Labor, and Pensions Committee under Chairman Alexander and Senate Finance committee hearings, try to report a bill out of committee with contributions from both sides. Then bring it to the floor for amendment and debate, and we can pass a plan that is imperfect, full of compromises, and not very pleasing to implacable partisans on either side, but that might provide workable solutions to problems Americans are struggling with today.

To my great satisfaction, after the skinny repeal bill went down—and this body decided that it didn’t want to precipitously take healthcare away from 20 million people—that is the course that this body embraced. It is what our heroic colleague suggested that we embrace. The HELP Committee—which, as a member of this, I am very aware had refused to hold a hearing on any of the proposals in the House or in the Senate around this repeal of ObamaCare—decided finally to do what the HELP Committee should do. The “H” is for “Health.” To pass a bill re-orienting one-sixth of the American economy around the most important expenditure that affects every person in their life without letting the HELP Committee hear from it was foolish to start with.

So now we have embraced doing it the right way. Under the leadership of Senator Alexander and Senator Murray, we have had four robust bipartisan hearings. We invited Governors to come from around the country. They had to turn their schedules topsy-turvy to do it—insurance regulators, insurance executives, patients, doctors, hospitals. There were four hearings, each with multiple witnesses. We turned their schedules topsy-turvy. We had them here. We had coffees before each hearing and invited all Members of the Senate, not just those on the HELP Committee, to sit in and listen from these experts. We have gotten advice from them on what we need to do to stabilize the individual insurance market and what we can do in the long term to make healthcare better for everyone. We should take advantage of those recommendations.

When the fourth hearing was completed last week, the chairman of the Committee, Senator Alexander, and the ranking member, Senator Murray, who supported this very diverse committee—left, right and center, Democrats and Republicans—have embarked on a bipartisan process to find, after a full and transparent airing of the issues, a way to stabilize the individual insurance market. We are on the verge of doing that.

Yet what we are told is, instead of going through our committee process and hearing and airing it before the public, now there is a new bill that has just recently come out with no full CBO score. This is not even a skeleton that through, with no CBO score, with no full committee process that would enable us to hear from witnesses, with no
opportunity for members of any of the committees—Finance or HELP—to offer amendments, with no meaningful floor debate, and with no opportunity for amendments on the Senate floor.

Why did we give Senator McCaIN a standing ovation when he suggested that when it comes to something as important as healthcare, we should treat it with seriousness, so we can get it right and not rush and get it wrong?

I stood there—and I hope I am on my feet a good bit more between now and the end of the month—to ask this question: Why backslide? Why go backward when we had embraced a process of bipartisan discussion?

I am fully aware that as a Member of the minority party, I have no power except my ability to convince Republicans that I actually have a good idea. But a one-party process on the floor that tries to end run the relevant HELP Committee is guaranteed to fail. It might pass, but it is guaranteed to fail because it is guaranteed to hurt people. It is guaranteed to have some consequences that are harmful and known and other consequences that are harmful and unknown because it has been delayed, and it hasn’t been done in the view of the public with the ability to fully listen to them. Just think about it this way: What does it say about your commitment to your legislation if you are not willing to have it subject to review by committees that have jurisdiction over it?

The Graham-Cassidy bill has some provisions in it that are relevant to the Finance Committee’s jurisdiction, but Finance is apparently not going to do a markup of the bill, and they are not really going to hear from experts about the bill.

There are other provisions in Graham-Cassidy dealing with essential benefits that are squarely within the jurisdiction of the HELP Committee, but the HELP Committee isn’t going to have a hearing either. So in spite of the good recommendation we were given by our senior colleague who was just on the floor—who was characteristically here to talk in kind words about the public service of someone who has worked with his staff for 30 years—we gave him a standing ovation, and we are prepared to violate everything that he just suggested we do.

As I conclude, I will just say this. This isn’t about healthcare. Healthcare is important enough. No one ever spends a dollar on anything that is more important than their health. It is the most important thing that anyone ever spends a dollar on—health, my health, the health of my family. I think we can all share that. Nothing is more important. It also happens to be one of the largest sectors of the American economy. Because 15 to 20 percent of America’s GDP is healthcare.

This is a very important issue. If you are trying to reorient one-sixth or one-fifth of the economy, if you are touch-
costs for consumers, and ensure the de-

stabilization of the individual health insur-
ance market.

While I have worked closely with Sena-
sors CASSIDY and GRAHAM on other bills,
and I respect them, I have grave con-

cerns with this legislation.

First, the bill undermines protec-
tions for people with preexisting condi-
tions.

States could apply for waivers that
would allow them to charge people more
based on their health status, age, or any
other factor other than race or ethnicity.
This means premiums would
be higher just for being older or sicker
or having had an illness in the past. In
other words, there would be no protec-
tion for people with preexisting condi-
tions.

Additionally, States can also seek
waivers to remove the ACA’s essential
health benefit requirements, which
mandate that insurers that are offering
plans on the exchanges include cov-

erage for vital services, such as pre-
scription drugs, maternity care, men-
tal health, and substance use disorder
services.

While the bill technically requires States
to describe—just simply de-
scribe—how they will “maintain access
to adequate and affordable health cov-

erage for individuals with preexisting condi-
tions,” there is no definition of
what that means, and there are no en-
forcement mechanisms. Insurers would
still be able to charge people more for pre-
existing conditions more for their care
or exclude services altogether. Under
this plan, millions of people with pre-
existing conditions could face much
higher costs, if they can get coverage
at all. Again, this bill rips away protec-
tions for people with preexisting condi-
tions.

Second, the bill would undoubtedly
reverse the significant coverage gains
we have seen in recent years and drive up
the number of Americans without

health insurance.

The Graham-Cassidy proposal elimi-
nates the ACA’s premium subsidies,
eliminates the Medicaid expansion,
eliminates cost-sharing reduction pay-
ments, and more. Instead of funding
these critical aspects of the ACA, the
bill would return some but not all of
this funding to the States in the form of
block grants, which are authorized
in this bill from 2020 to 2026.

These proposals to dramati-
cally reduce funds for States that have
expanded Medicaid and have success-
fully enrolled more adults in ACA ex-
changes—States like Minnesota. In-
stead of incentivizing success, the bill
will reward failure, initially increasing
funds for States that refuse to expand
Medicaid and have done little to en-
courage enrollment. But even these
States lose out in the end. In fact, the
funding stops completely after 2026, re-
sulting in enormous losses for every
State and total loss for 2026, 2026, the
Center on Budget and Policy Priorities
estimates, most States will receive sig-
nificantly less funding from the Fed-

eral Government under this block
grant than they do under current law.

Minnesota could lose $2.7 billion. Other
Senators who have expressed various
levels of concern with this legislation
could see their States lose significant
sums. For example, Arizona, which
would lose $1.6 billion; Alaska, $255
million; Maine, $115 million; Colorado,$223
million; and the list goes on. Healthcare
isn’t free. These shortfalls will mean
that families don’t get the services,
premises, and more. Instead of funding
what that means, and there are no en-
forcement mechanisms. Insurers would
still be able to charge people more for pre-
existing conditions for their care
or exclude services altogether. Under
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damentals of healthcare, Henry can get therapy
and the things he needs to maintain his
health and work towards beating cancer. Henry
is still with us because of the ACA.

Let me say that again: Three-year-
old Henry is still with us because of the ACA.

Consider Maria’s story. Maria en-
rolled in Minnesota’s Medicaid Pro-
gram after finishing her graduate de-
gree and while looking for full-time
employment. Maria was grateful for
the coverage because she needed access
to treatment for a condition, achalasia,
which was diagnosed a few years prior
while she had insurance through her
employer.

Soon, Maria found her dream job, but
it came with a catch: no health insur-
ance. Days before she was set to move
and start work, she decided to go in for
one last big checkup. The results were
unnerving. At the age of 35, Maria was
diagnosed with bilateral breast cancer.
Maria had to give up her job offer and
aggressively pursue treatment for the
cancer.

Fortunately, because Minnesota had
expanded Medicaid, all of Maria’s
treatments were covered, and lucky for
her, they worked. Maria’s cancer is in
remission. Maria said: “The Medicaid
expansion of the ACA literally saved
my life.” She told me that anyone
could find themselves on Medicaid. She
said: “Without that comprehensive, af-
fordable, accessible health Insurance, I
wouldn’t be here.”

But now that all of these programs
are in jeopardy, my constituents are
generally scared. They have come to
realize that if the Af-
fordable Care Act is repealed or if dra-
conian changes and cuts to Medicaid go
through, they don’t know how they
will care for their elderly parents, keep
their rural hospital open, or afford
treatments they or their children need.

I believe it is legislative malpractice
to pass partisan legislation that would
undermine this progress, people’s eco-

nomic security, and their livelihood,
all to achieve a destructive, partisan,
last-ditch effort to repeal the Affordable
Care Act and end the Medicaid Program as we
know it.

I urge my Republican colleagues to
once again abandon their efforts to
ram through dangerous legislation that
would fundamentally restructure our
healthcare system. This legislation
fails the Jimmy Kimmel test. It is the result of a horrible
process that is not worthy of this body.

We have a better option. Over the
past few weeks, Chairman ALEXANDER
and Ranking Member MURRABhave
held four bipartisan hearings on indi-

giual health insurance market re-
forms and are working to forge a legis-
lative compromise to reduce premiums
for consumers. We have heard from
Governors, we have heard from insur-
ance commissioners, and we have heard
from experts—all of whom span the ide-
ological spectrum. This is what regular
order looks like, and this is the way the
Senate is supposed to work.

I have worked with all of my col-
leagues on this committee in good
faith, and I am proud of what we have
been able to accomplish so far, but all
of that work is in jeopardy because of
a destructive, partisan, last-ditch ef-
tort to repeal the Affordable Care Act
and end the Medicaid Program as we
know it.

Do not shortchange those important
legislative developments. Do not short-
change the American people. Think of
the millions of children and families
who need our help right now. Oppose
TrumpCare, and, instead, let’s work to
improve care, lower costs, and ensure
access to healthcare when people need it
most. It is within our reach.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The
clerk will call the roll.

The senior assistant legislative clerk
proceeded to call the roll.

Ms. HASSAN. Mr. President, I ask
unanimous consent that the order for
the quorum call be rescinded.
The PRESIDING OFFICER. Without objection, it is so ordered.

Ms. HASSAN. Mr. President, I rise today to oppose the latest disastrous iteration of TrumpCare, the Graham-Cassidy proposal.

It is essential that we are here once again. In July, Granite Staters breathed a sigh of relief when the Senate defeated a proposal that would have raised healthcare costs and stripped health insurance away from millions. This bill failed because those of us who are fighting for the people we are trying to serve. Over the course of this year, the people of New Hampshire have laid themselves bare and shared story after story of how they would be impacted by these dangerous attempts to roll back access to healthcare.

It is people like the Keene resident who has a preexisting condition and had health insurance through his job, but when he lost that job, he was able to start a new successful small business, and would be able to get quality health insurance under the Affordable Care Act. It is people such as the Granite Staters who experience disability but are able to live independently in their home and receive the specialized care services they receive through Medicaid and people like the mom from Rochester who is benefiting from substance use disorder services that are included in Medicaid expansion and would lose those benefits under this bill.

It really shouldn’t be necessary for people to have to come forward and share their most personal stories, all in an attempt to get their elected representatives to work together in a bipartisan manner and not take coverage away. We actually should be able to do that in the U.S. Senate on our own.

Now, just as we are starting to work on a bipartisan basis, as our constituents asked us to do, the American people have come to the frontlines of New Hampshire’s heroin, fentanyl, and opioid crisis, and recognize the one tool we have to combat this epidemic. Ending Medicaid expansion would pull the rug out from under people of New Hampshire and all Americans.

If you have a preexisting condition, including cancer, asthma, or diabetes, you could once again be discriminated against with higher costs that make health coverage unaffordable. This bill would end Medicaid expansion, a program that Democrats and Republicans in New Hampshire came together on to pass and reauthorize. Medicaid expansion has provided quality, affordable health insurance coverage to over 50,000 Granite Staters. Experts on the frontlines of New Hampshire’s heroin, fentanyl, and opioid crisis say it is the one tool we have to combat this epidemic. Ending Medicaid expansion would pull the rug out from under those who need it most.

In addition, Graham-Cassidy would cut and cap the Medicaid Program. Those words, “cut” and “cap,” are really just code for massive cuts to the funding that States receive, including New Hampshire, for providing hundreds of millions of dollars in Federal funding for Medicaid over the next decade. This would force States to choose between slashing benefits, reducing the number of people who can get care, or, in some cases, having to do both. It would impact some of our most vulnerable citizens—children, seniors who need in-home care or nursing home care, and people who experience disabilities.

Graham-Cassidy would allow States to get rid of important protections in current law—protections called essential health benefits, which make sure that all insurers cover things like maternity care, prescription drugs, and substance use disorder services.

Finally, this bill would continue Republican efforts to rollback women’s access to healthcare by defunding Planned Parenthood, which provides critical primary and preventive healthcare services to thousands of New Hampshire women.

As we continue to debate the future of our Nation’s healthcare system, we have to understand how things would be different for the tens of thousands of people we are trying to serve. Over the course of this year, the people of New Hampshire have laid themselves bare and shared story after story of how they would be impacted by these dangerous attempts to roll back access to healthcare.

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

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. BLUNT. Mr. President, I want to talk about healthcare and what it means to families and what it means to communities. It is the most personal thing that families deal with. Every family knows that at some point they are going to deal with not one but multiple healthcare issues as life progresses, as things happen in life—at times you don’t expect them to happen in life—and nothing is more riveting or focusing than healthcare.

Somebody told me one time—and I have said this on the floor of the Senate before because I think it is such a good observation about what happens in healthcare. Somebody told me that when everybody in your family is well, you have lots of problems. When somebody in your family is sick, you have one problem.

So it is not like tax policy or energy policy or the intricacies of this or that; it is something that every family and individual is attuned to in a unique way. It is one of the reasons the debate is so passionate, and I think it may be one of the reasons why sometimes we see exaggerated claims about how a plan may be for is going to go wrong, people have healthcare problems than if that plan didn’t pass. I certainly wouldn’t intend for that to be the case. What we are all looking for is the best plan that addresses this problem in the best way.

In the debate we had 6 weeks ago, I remember looking across the Senate floor at one of my colleagues who stood up and said: If the plan passes that many of my colleagues are going to vote for—he may have said the people everybody are going to vote for—health insurance rates are going to go up next year by 20 percent. Missourians have already seen a 145-percent increase, under the plan we have now, in 3 years. The rates that were just filed have ranged from a 35-percent increase to a 47-percent increase. So it is a pretty safe prediction by my friend on the other side who said that if the plan I was for passed, health insurance rates would go up 20 percent.

The plan he had for—for the plan they were defending—is out of control. There is no argument that what we have now is not working.

Families who have coverage don’t really have access. So many families with coverage have these high-deductible policies with insurance rates that, first of all, they can’t afford the premium. If they are somehow able to scrape the money together to afford the premium—I think the average deductible in the broad plan was $6,000 per individual, and for many of those plans, if you had more than one individual in your family, you had to hit the per individual rate twice if two
people get sick. So you were paying maybe $1,000 or more a month, and that was for insurance coverage. Then, if somebody got sick, you had another $12,000 that potentially would kick in before your insurance plan helped at all.

Not only was that not real coverage, but it clearly wasn’t access. It clearly didn’t provide the opportunity to go to the doctor and have the kind of healthcare you need so you don’t have a two-week wait in the hundreds of dollars for a healthcare crisis that arises needlessly. Some of us will have those problems no matter how well we take care of ourselves, but access to healthcare matters, and healthcare that works where you live matters. Frankly, that is the plan Senators CASSIDY and GRAHAM have come up with—a plan that would take the decision making for government-assisted healthcare out of Washington and put it back in the States.

When one of my Congressmen from South Carolina was a Congressman, decades ago in the House of Representatives, he was on the committee at the time that wrote the laws and regulations for Washington, DC. Somebody asked him why he thought he was smart enough to write the laws for Washington, DC. His hometown happened to be Sarcoxie, MO.

He said: In my hometown, almost everybody knows where Washington, DC, is, but here in Washington, almost nobody knows where Sarcoxie, MO, is, and that means the people in Sarcoxie are a lot smarter than the people in Washington, MO? Maybe not, but it meant they probably knew what was better for Sarcoxie than the people in Washington did.

So what Senators GRAHAM and CASSIDY are talking about is looking at taking all the money we are currently spending in this government-assisted healthcare world and divide it up among the States in a more equitable way. Right now, four of the States get about 37 percent of all the money. You don’t have to be a math genius to figure out that means the other 46 States must get about 63 percent of all the money. Now, if 37 percent of all people in the country lived in those four States, that might be a reasonable way to divide up the money or even if 37 percent of people with income and health needs that were so significant they needed more help than everybody else lived in those four States, that might be a reasonable way to divide up the money, but neither of those things are true. What this plan would do would be to look for a new way to more fairly allocate the money we spend on healthcare and then let States experiment with what to do about that.

Jefferson said, in our system, the States had the unique ability to be laboratories for change because they could try things and see if they worked and then share with the other States what worked, but there was no vision at the time that the Federal Government was the best place to do everything. This is really sort of a debate between are you for federalism or are you for government-run everything.

I guess 30 percent of the Democrats in the Senate, just a few days ago, said they were for government-run everything in healthcare. They were for single-payer healthcare. I am not for that. I don’t think that is the best way for our system to work or to find the healthcare innovations we need or the healthcare innovations we need to do the things we need to do if we see moments should always have, but I do think we could do a better job serving healthcare needs for people in the 50 States and the territories if, in fact, we gave them more authority to do that.

First of all, in all likelihood, you will get your healthcare in the place you live, and you are more likely going to be able to get access to the same healthcare your local State representative gets, where it is not just me arguing for Missouri, or my colleague in the Senate arguing for what is good for our State or the eight people we have in the House. It takes all 163 house members in our State, the 94 senators, and the Governor leading to how is where we are going to 200 legislative families get their healthcare and where 200 people who are making that decision—who see people at school and the grocery store— that is a lot different than just seeing people sending them to Washington, DC, and saying: Why don’t we adjust the one-size-fits-all system so it serves our State better.

If you have ever bought any one-size-fits-all clothes, you are a very unique person if they actually fit you. One-size-fits-all almost never fits anybody. Even in a State, it is hard enough to come up with a plan that fits everybody in the State in the best possible way, but we would be much more likely to design something where we would suggest what happens in Manhattan and what happens in Marshfield, MO, are the same thing because they are not. People in New York are going to come up with a more likely way to address those issues and figure out what healthcare is there, what they need to do to augment it, what they need to do to be sure it is available to the most people in the most cost-effective way, and in Jefferson City, MO, there are more likely to answer all of those questions for our State than, frankly, they are at the Department of Health and Human Services in Washington, DC.

Even if they want to do that—even if they are all Missourians who take over the Department of Health and Human Services, their goal would not be to figure out what is best for where I live. Their goal would be to come up with one plan that is best for the whole country, and it is just not working very well.

First of all, it is not working very well because it is clearly not divided in an equitable way. No matter what formula you put in place, four States having much of the money spent in their States is not the right kind of system to have. There are ways to adjust for need, there are ways to adjust for location, but those ways are not going to be found in waivers Governors would ask for but are more likely to be found in State capitols than they are here.

This is the classic example of why our government has worked as long as it has in so many areas, but every time we try to become responsible for everything at every level, we mess up. Every time we think different regulations have to be passed by city government, county government, State government, Federal Government, that never works very well.

This is an opportunity to say to States: We are going to let you be responsible for devising a system for people in your State that meets the needs of people in your State, and we are going to do that in a more effective way than has been done in the past. The growth of healthcare programs has never been allowed to be looked at in a way where you look at all the programs and put them together in a way that really works.

Let’s get out of the government-run every-thing, and let’s come up with a plan that uniquely can work—in Florida where you live, in Missouri where I live, in Louisiana where Senator KEN NEDY lives—that has a unique oppor- tunity to serve the families where the No. 1 thing they take most personally is the health and welfare of their family. Everybody has to deal with this. Let’s try to create an environment where everybody gets to deal with this where there is the greatest oppor- tunity, greatest sensitivity, greatest availability, and greatest understand- ing of how, if those things aren’t working, to uniquely come up with a solution to the problems in that State that are very likely not the problems that need to be solved in the entire country.

Mr. President, I yield the floor. The PRESIDING OFFICER. The Sen- ator from Louisiana.

TAX REFORM

Mr. KENNEDY. Mr. President, I wish to change the subject slightly. I will be back on the floor next week to defend my good friend and colleague Senator CASSIDY’s ideas on the reform of healthcare for America. I received a letter today from our Governor and the Secretary of our Department of Health and Hospitals, which, in my opinion, espouses points of view on healthcare
that are not in the best interests of the people of Louisiana.

Just for a moment, I want to talk about tax reform because that is the other big issue in front of us. Like many of us, I have been in government for a while. I have great respect for professional economists, but it has been my experience that for every economist, there is an equal and opposite economist, and they are usually wrong.

Economics today is more art than science. That is why I say it doesn’t take an expert economist to see that something is wrong with the American economy.

Mr. President, 2016 was the 11th straight year our economy failed to achieve 3 percent annual growth, which has been our average annual growth every year since 1960. I have heard numerous pundits act like returning to 3 percent economic growth is something extraordinary. No, sir, look at the numbers. It is just average, and I think the American people deserve better than just average growth, but even average growth is optimistic if we keep the men and women who create the jobs in this country.

Our 40 percent business tax rate—let me say that again. Our 40 percent business tax rate and our broken Tax Code are choking our ideas, our jobs, and our investors into the open, waiting arms of foreign countries. Our 40 percent business tax rate and our broken Tax Code are keeping wages and productivity low, they are crippling our small business owners and small business men, and they have to go.

When we are talking about tax reform, I think it is very important that we not forget the primary vehicle—not the only vehicle but the primary vehicle—tax reform in America is the middle class, which is what I want to talk about for a moment, tax relief for ordinary people.

My constituents tell me every day: kennedy, we look around in our economy today, and we see too many undeserving people at the top getting bailouts, we see too many undeserving people at the bottom getting handsouts, we see too many ordinary people some badly needed relief. Seventy percent of Americans opt to take the standard deduction when filing their taxes—70 percent. They do that because it is simple, it is fair, and it requires less documentation than itemizing. In 2014, this option—this standard deduction—saved taxpayers of America about $217 billion. Yet they are still having trouble getting ahead. If Congress were to make one simple change as we enter upon this endeavor that we call tax reform—I call it tax cuts—like doubling the standard deduction across the board for everybody, including but especially the middle class, that would potentially inject about $600 billion back into our economy over the next 10 years. That is according to a 2014 CRS report. That would be an immediate shot in the arm to the American economy.

The middle class—the ordinary people of America—has made virtually no progress, and they have every right to be angry about that. It has been 16 years since President Bush’s tax cuts, since the middle class has gotten a tax break. It is time we get relief to the floor today. Somebody has to speak up for the ordinary people of America and for our middle class. Middle-class families drive our economic engine. We are a consumer economy and our economy is based on consumers. They buy the goods and services our businesses are selling. They work hard to be able to spend and save and invest. Most middle-class Americans get up every day, go to work, obey the law, pay their taxes, try to do the right thing by their kids, and they are falling further and further and further behind. Now, as they are trying to balance a checkbook, nearly one-third of their income is automatically withheld and sent off to Washington. No one even see it. Come April, they may owe even more on their savings and investments. If you don’t believe me, look at the numbers. You think America is broke?

Between October 2016 and January 2017—just over a year—Our business tax rate has been in government for a while. I have great respect for professional economists, but it has been my experience that for every economist, there is an equal and opposite economist, and they are usually wrong.

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Mr. WHITEHOUSE. Mr. President, each week that you see me standing here means another week in which the Senate of the United States has sat out doing anything to address climate change. Each week of carbon pollution streaming into our atmosphere and oceans. Carbon dioxide from burning fossil fuels is changing our atmosphere and our oceans. We see it everywhere. We see it in storm-damaged homes and flooded cities. We see it in drought-stricken farms and raging wildfires. We see it in fish disappearing from warming, acidifying waters. We see it in shifting habitats and migrating contangions.

All these harms we see carry costs—real economic costs—to homeowners, business owners, and taxpayers. That cost to homeowners, business owners, and taxpayers is known as the social cost of carbon pollution. It is the damage that people and communities and States suffer from climate change. The Office of Management and Budget last calculated the climate change cost of carbon pollution, and the Office of Management and Budget last calculated the social cost of carbon emissions coming from energy production streaming into our atmosphere and oceans. Concerning the calculation and Budget last calculated the total measured U.S. emissions and Budget last calculated the social cost of carbon emissions coming from energy production and climate change. The Office of Management and Budget last calculated the social cost of carbon to be around $49 per ton of carbon dioxide emitted. If you just do some simple math, you can multiply the total measured U.S. emissions coming from energy production alone in 2016—that is emissions of over 5.7 billion tons of CO₂—by the $49 cost per ton. It is pretty simple math: $49 times 5.7 billion tons gives you about $290 billion. That is the annual cost, the annual cost is the annual cost of that stuff, the statement is actually true. There is a value to avoiding carbon pollution, and defending that public value from the polluters does justify the Clean Power Plan. This is the social cost of carbon. Let’s go back for a minute to 2006, when the Bush administration’s National Highway Transportation Safety Administration put out a rule for vehicle fuel economy standards. There was complete dissatisfaction with that rule. States and other stakeholders complained that this rule failed to take into account the social cost of carbon emissions from cars—something that should matter for a rule that is looking to reduce emissions. In 2011, courts upheld the social cost of carbon standard in 2010, with additional up-dates in 2013, 2015, and 2016. When Federal agencies didn’t apply any social cost of carbon, courts corrected them. In 2014, a Federal judge in Colorado faulted the Bureau of Land Management for failing to account for the social cost of carbon in its analysis of the Project. The court suspended the approval until the Bureau of Land Management either used the social cost of carbon or gave a valid explanation as to why not. When agencies did use the social cost of carbon, their decisions were upheld. In 2016 the U.S. Court of Appeals for the Seventh Circuit upheld the Department of Energy’s use of the social cost of carbon in the agency’s standards for offshore oil and gas drilling.

One way in which they play this game is to populate the climate denial machinery with carbon-equivalent accountants—accountants who can only see the polluters’ side of the ledger. Honestly, we hear their testimony. The only thing they see is the cost to polluters of reducing their pollution. They don’t see the public harm side of the ledger. They pretend it is a liberal conspiracy cooked up by the Obama administration. Or say you are the Republican chairman of the House Science Committee and you say: The social cost of carbon is a “flawed value . . . to justify the [EPA’s] alarmist reasoning for support of the Clean Power Plan and other climate regulations.” Actually, if you take away the bad words “flawed” and “alarmist” and all of that stuff, the statement is actually true. There is a value to avoiding carbon pollution, and defending that public value from the polluters does justify the Clean Power Plan. This is the social cost of carbon. Let’s go back for a minute to 2006, when the Bush administration’s National Highway Transportation Safety Administration put out a rule for vehicle fuel economy standards. There was complete dissatisfaction with that rule. States and other stakeholders complained that this rule failed to take into account the social cost of carbon emissions from cars—something that should matter for a rule that is looking to reduce emissions. In 2011, courts upheld the social cost of carbon standard in 2010, with additional updates in 2013, 2015, and 2016. When Federal agencies didn’t apply any social cost of carbon, courts corrected them. In 2014, a Federal judge in Colorado faulted the Bureau of Land Management for failing to account for the social cost of carbon in its analysis of the Project. The court suspended the approval until the Bureau of Land Management either used the social cost of carbon or gave a valid explanation as to why not. When agencies did use the social cost of carbon, their decisions were upheld. In 2016 the U.S. Court of Appeals for the Seventh Circuit upheld the Department of Energy’s use of the social cost of carbon in the agency’s standards for offshore oil and gas drilling.

The Colorado Public Utilities Commission recently ordered the local utility Xcel to use the social cost of carbon in its resource planning documents. Colorado told its utilities to use $43 per ton starting in 2022 and to ramp up to nearly $70 per ton by 2050.

It is not just Federal courts and State agencies that corporations in the United States and around the globe are incorporating the social cost of carbon into their own operations and accounting. Investors are beginning to demand that corporations perform this kind of analysis in order to qualify for investment. Big investors like Black Rock have taken on big companies like Exxon in order to break through the denial.
Congressional Record — Senate

September 19, 2017

Mr. RUBIO. Mr. President, 2 weeks ago this very evening, I had just finished my time as Presiding Officer over the Senate, and I made the decision that early the next morning I would be leaving the State of Florida where I have lived and been part of the Florida Congress for the past two decades, and I would be headed to South Carolina, where I was going to be staying the following day. The reason was that at that time and in that moment, the strongest storm ever recorded out of the Atlantic was bearing down first on the Caribbean and headed not just toward South Carolina, but toward the city in which I live. Then the Nation and State watched over the next few days as that storm took its track.

With that, I yield the floor.

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is hard to imagine that having a heart attack in the middle of the storm or in the aftermath wasn't somehow related to the stress such a storm brings.

Of course, we all heard the horrifying news last week that eight senior citizens had lost their lives because a nursing home had confused their meals with tranquilizers and locked them in the middle of the night. The heat became unbearable, and they passed.

You can only think, despite these horrific tragedies of losing 59 people, how many more would have died if they didn't heed the warnings to evacuate.

So I begin talking about the storm today by thanking the men and women who responded before and after the storm—and even during it—who kept so many people safe, and who did so even though their own families were being impacted by the storm. If you see a police officer or a firefighter from a community in Florida, they have homes and children they have families, and they, too, are concerned about the impact it could have on them. Even as they are out there getting the rest of us ready, they have to think about themselves and about their own families. We thank them and so many others. There are so many to mention that we would run out of time, but we thank them.

Let's first talk about some of the challenges. The first challenge, as I said earlier, is the scope of the storm. If you know anything about Florida, it is a peninsula, the third largest State in the country in terms of population. But it is a peninsula that sticks out into the Gulf of Mexico and into the Caribbean Basin in the Florida Straits.

It is a long journey for a moment that you are the owner of a small restaurant and you have to go 30 to 60 days without any revenue. I can tell you that most businesses don't have that kind of reserve, not to mention your employees who may not get paid when you can't serve, not to mention your employees who have families. You certainly don't have fuel. They certainly don't have tourists.

When you think about the Florida Keys, it is an expensive place to live because it is a valuable piece of land right on the water, which is an enormous challenge for the workforce. The workforce in the Keys don't want to drive 3½ hours a day from South Dade to get down to the Lower Keys, or anywhere, for that matter, depending on the day. That housing stock in many places is trailer parks, mobile homes, or small apartments. The trailers are gone. The apartments have suffered water damage, and they certainly are not livable now, in many cases because of water and wind damage.

Think about agriculture. I know Florida is not thought of as a agricultural State. I promise you, there is an extraordinary presence of agriculture in our State and a great variety of crops. Florida is one of the largest cattle producers in the country. You don't associate Florida with cattle, but it is an enormous part of our agriculture. Our signature crop is citrus, the sugar cane growers, fresh vegetables, and the nurseries. The nurseries produce tropical plants that you see in big developments or all of the indoor plants. Much of that is grown in Florida.

There are also dairies. Florida is a dairy provider to much of the Southwest. Every single one of them has suffered significant damage and, in the case of a couple of them, catastrophic damage.

The citrus industry was already being hurt by citrus greening, a disease that kills trees. Senator NELSON and I went to a grove two days after the storm, and more than half the fruit was already gone and more was dropping. That fruit is gone. Those farmers live off of that fruit. The whole fruit
goes to the whole fruit market, and the bulk of it goes to the juicing market. Much of it was green. So it wasn’t even ready to pick. But once it hits flood-water, it cannot be used or sold. The FDA says it can no longer be consumed safely. They will probably send it to pig food. The fact that their yields were already lower because of greening. They lost the fruit they had.

It gets worse. They lost trees. It is not simple. You don’t just go to Home Depot and buy orange trees. This year it produces oranges. These new trees take at least 4 years before they begin to produce the fruit to sell, if it survives greening. They lost trees, and they are still losing fruit, and they will still lose more trees because of all of those groves are under water. All that water is sitting on the roots, and those trees will not survive. This is a catastrophe.

I don’t mean to leave anything out. I can tell you the truth that there will be no Florida fresh vegetables. There will be no Florida vegetables in November. Those green beans that many of you eat on Thanksgiving Day will not come from Florida. We will have to make up the gap from foreign producers. We can fill what is gone entirely. I don’t mean to leave anything out. I am just stating that the hit to agriculture was extraordinary. Unfortunately, for agriculture, this has happened, but there has not been a lot of media coverage about it because not a lot of agriculture is near metropolitan centers. There is not a lot of media coverage.

Look, I am not here to beat up on the media. I thank the media, and I have done so because a lot of the work they did on the national and local news was what got people motivated to get up and go and get out of harm’s way. But there are not a lot of camera crews stationed live in a citrus grove. So the power went on and the storms re-open, and most people forget that these farmers—most of them—are not wealthy landowners. Some of these are fourth generation growers who have been on that land and are producing and are already stretched because of some of the challenges they have, whether it is with trade or citrus greening or whatever challenges might be. It has just gotten worse for them.

Do you know who else got hurt? The entire industry that serves them. Everyone in the towns built around them. This is big trouble. It is truly a catastrophic agricultural event in every part of the State. Virtually none of Florida’s agriculture went without being impacted by this.

I think about the migrant workers who work there. Some were afraid to come forward because of their immigration status. They thought that, if they showed up at a shelter, they would be deported, but more importantly, in terms of life, some of them have nowhere to live. Their housing, to begin with, is precarious. A lot of the mobile homes are damaged by water. There is no electricity. They are not near a metropolitan center, and they are afraid to come out. Thank God for so many groups that have come forward to try to help them.

We see some of the power outages. I don’t know how many people lived in Florida before the invention of air conditioning with the heat and humidity. It is an inconvenience for a lot of people, but it is life threatening in the case of senior citizens. So all of the refrigerated pharmaceuticals for their survival. It has had an extraordinary impact on them.

All of these circumstances have a true impact and are among many of the challenges that we now face. There is a special focus, for example, on Monroe County, in the Florida Keys. This storm threatens to fundamentally alter the character of Monroe County if we do not help the Florida Keys. I want you to think about those trailer homes on valuable land, and the owners of that land are going to be tempted to build on them, not mobile homes, again, but to build structures designed for visitors that have more money. They means that we will lose our stock, but ultimately it means that we will lose the character of the place—all of the small businesses that service the fishing boats and the diving industry.

We have some of the greatest collections of coral reefs in the world right off Marathon, by Sombrero Key in the Florida Keys. All of that will be out of business for a long time. Can they survive? I don’t know!

There are small business owners that might own an apartment building. They use it in the summer for their family and rent it in the winter. It is damaged. So they can’t rent it this year. So guess what. They may not be able to pay the mortgage, which will lead to foreclosures.

I mentioned agriculture. I don’t know how Florida agriculture—particularly citrus—can recover from the storm without help. This storm exposed a real vulnerability to a State with so many senior citizens. It is not just the nursing homes and the ALFs. We have apartment buildings, section 8 HUD housing and the like—entire apartment buildings with 13, 14 stories. There are towers of apartment buildings populated by senior citizens. What happens when the power goes out? The first thing is that all of the refrigerators rots. So within 48 hours, I don’t care how much they stored for the hurricane, they can no longer eat a lot of the food they need for their nutrition. You might say: Why don’t they get up and go see to a relative’s or go somewhere where they are handing out food?

They are on the 13th or 12th floor of a building where the elevator doesn’t work. They can’t walk down 13 flights of stairs. This exposed a real vulnerability that we will have to examine.

Then there is debris removal. Some of these counties are small counties. Some of these counties still owe money from storms last year. FEMA dispersed the funds to the State. The State hasn’t dispersed it to them yet. Now they have to go out and hire, and they need hundreds of millions of dollars to do the cleanup. They don’t have that in their budget. There is a huge strain in that regard.

Senator NELSON and I spent 2 days together traveling last week. We will continue to work together to help so many different people. On Friday we had an event in Immokalee, which is a migrant community in Southwest Florida, and 800 people applied for assistance.

We were in St. Augustine yesterday, and close to 1,000 people applied for assistance.

In Jacksonville today, there were 1,800 people applying for assistance. We will continue to work together to help so many different people. On Friday we had an event in Immokalee again on Friday, and we are about to start out in the Florida Keys helping people.

It is funny. They say: FEMA—go online and apply there. Here is the problem, when you have no internet and no power, how do you go online and apply? So we are trying to get out there to help as many people as we can.

Now, I don’t want to leave on a negative note. There is nothing positive about a storm, but there are some uplifting things to point out. I will be brief and to the point. I am uplifted by these crews sent down by the Church of Jesus Christ of Latter-Day Saints, or the LDS church, who are out there helping people who can’t afford it or who don’t know how to do it. Professionals are out there helping people cut down trees and remove debris from their roofs. They are volunteers who came on their own to do it. I was uplifted on Saturday by visiting the North Carolina Baptists’ men’s relief society, who were in South Florida, and 120 people were preparing hot meals to send down to the Florida Keys. They had fed thousands of people in a very impressive operation. I am uplifted by the Red Cross volunteers from New York and New Jersey who I have run into who flew down, rode out the storm, and were there working in the shelters. I am uplifted by stories of school principals who took over these shelters because people didn’t show up to run them who were supposed to show up. So the principals, cafeteria managers showed up and took care of all these people. I am uplifted by stories like the one today in Jacksonville, where a gentleman and his wife who were disabled came forward. They lost their home and they had to be saved from floodwaters. They were living in temporary housing. A donor had put them up for a week. It ran out, and they had nowhere to go tonight. They were able to match them with a donor, and they were very, very, extraordinarily fortunate, for another week of temporary housing while, hopefully, we can get them the housing they need.
One of my favorite stories—and I believe Senator Nelson shared this the other night—is this one that I wanted to close with. He and I ran into this at Ave Maria Catholic University, which is literally out in the Everglades, between Miami and West Palm Beach. We went out there to visit, and we were told extraordinary stories of some of their students.

On the night before the storm, there were about 300 migrants from nearby communities—many of whom are probably undocumented, in the country illegally. They didn’t want to evacuate. They were afraid of being deported. Ultimately, they saw that the storm was bad. They showed up at Ave Maria. Ave Maria opened its doors and welcomed them into the gym. There were students who stayed behind and played with the kids, entertained the kids throughout the storm, and took care of them.

What was really uplifting was the story of two nursing students. Right before the storm hit, right before you could get out, the sheriff’s office shows up at Ave Maria with eight seniors from a nearby ALF. The staff at the ALF quit. They literally left. They didn’t show up. They abandoned them. The sheriff’s office brings them, and these two nursing students bring the eight seniors into their dorms. They brought them into the women’s dorm and cared for them for two days, triaging the medicine they needed to take, understanding how to do this, that, and the other. These are amazing stories about these young people. If there is any doubt about the future of America, think about the extraordinary work these young people put in. Nobody told them to do it. They could have left. They could have gone back to wherever they were from, but they stayed and took care of them.

We have a long way to go, but we want to thank all the people for the great wishes we got from all of my colleagues and from people around the country. This is a storm that impacts Florida in ways we are going to feel for a long time.

Let me close by asking all of you to take a moment tonight, if you can and you wish, to pray for the island of Puerto Rico, a U.S. Territory, where millions of our fellow Americans are staring down the barrel of the most powerful storm that ever has perhaps hit that island, and this after already getting hit by Irma just a week ago. It has the potential to be an extraordinary catastrophe. We pray that is not the case. I hope we stand ready to assist our fellow Americans on the island of Puerto Rico. Let’s pray for them tonight because tomorrow morning is going to be a very difficult time for them as this extraordinary hurricane, Hurricane Maria, is about to slam right into them.

With that, I yield the floor. The PRESIDING OFFICER. The majority leader.

LEGISLATIVE SESSION

MORNING BUSINESS

Mr. MCCONNELL. Mr. President, this is with great reverence today to pay tribute to one of Utah’s great soldiers, SSG Aaron Butler, who was tragically killed on August 16, 2017, by an improvised explosive device in Nangarhar Province, Afghanistan. On that fateful day, Butler was searching for Islamic State loyalists in a booby-trapped building and was caught in an explosion that took his life and injured 11 of his comrades.

Staff Sergeant Butler was a member of the Bravo Company, 1st Battalion, 19th Special Forces Group of the Utah National Guard. Butler’s desire to serve in our Nation’s military started at a young age when, as a first-grader, he told his family he would grow up to be a soldier. His actual military service began in high school when he enlisted in the Utah National Guard. Staff Sergeant Butler continued to look for opportunities to make a difference, and a few years later, he began the very difficult Special Forces training. He graduated from this program with honors on January 14, 2016. He deemed it a tremendous honor to don the Green Beret.

Butler has been described as a natural leader, an accomplished athlete, and an adventurous soul. As a young man, he excelled in football and wrestling. In fact, through talent and sheer determination, he became a four-time State wrestling champion, only the 17th wrestler in Utah history to accomplish such a feat. He loved the outdoors and embraced the scouting program, earning Eagle Scout. Butler loved to serve his fellow men and women and did it in variety of ways including, as a full-time missionary for the Church of Jesus Christ of Latter-day Saints in the Ghana Cape Coast Mission in Africa. During this time, he spent months improving the infrastructure and daily lives of those living there. He also brought a message of peace and testified of the love our Savior, Jesus Christ, has for all his children.

I have been deeply touched by the many tributes and words of honor offered on behalf of this courageous soldier since this tragedy occurred. He was a truly remarkable young man and a seasoned soldier who possessed an unwavering commitment to what is right and good.

Butler also had a great love for our Nation’s military. His Special Forces teammates described him as a “warrior,” an “incredible man, teammater, and friend,” and someone who “fought with everything he had to the very end,” but perhaps the greatest tribute paid to this brave soldier was simply stated by his brother, Shane Butler, who said, “[Aaron] showed us how to live.”

Butler leaves behind his loving parents, Randy and Laura Butler of Monticello, UT; six brothers and one sister; his fiancee, Alexandra Seagrove, and many neighbors, fellow soldiers, and friends.

The men and women of our Nation’s military are my heroes. I honor them for their courage, their service, and their sacrifice. I am deeply humbled by this young man’s life and his willingness to pay the ultimate sacrifice. May God bless the friends and family of Staff Sergeant Butler with peace and comfort at this difficult time. I am certain Aaron’s life will have a lasting impact on his family, his community, and the country he loved.

REMEMBERING FRAN JARRELL

Mr. MCCONNELL. Mr. President, today I wish to remember the life of Fran Jarrell, of Paintsville, KY, who passed away on August 27, 2017, at the age of 72.

For many years, Fran was a driving force in her community. She served on numerous public committees and boards, supporting the efforts of organizations from the mentoring committee for Community of Hope to the Paintsville Garden Club. She also was a member of the Paintsville City Council for many years, dedicating herself to making the community a better place to live and work. Most recently, Fran was the executive director of the Paintsville/Johnson County Chamber of Commerce, where she was committed to bringing economic development and opportunity to the area. In her numerous roles, Fran worked to bring out the beauty and possibilities of her city.

The Paintsville community mourned Fran’s passing. Flowers decorated the entire downtown area as a tribute to her life, her passion, and her dedication to others. Elaine and I send our condolences to Fran’s children, sisters, grandparents, and great-grandchildren.

PROTECTING CIVIL SOCIETY ACTIVISTS

Mr. LEAHY. Mr. President, I want to speak briefly about a provision that was included for the first time by myself and Senator Lindsey Graham in the fiscal year 2018 Department of State and Foreign Operations Appropriations bill, which was reported unanimously by the Senate Appropriations Committee on September 7.

Specifically, the committee-reported bill includes $15 million to implement a U.S. interagency strategy, led by the Assistant Secretary of State for Democracy, Human Rights, and Labor, to
support and protect civil society activists, including human rights and environmental defenders and independent journalists, in countries where such activists have been threatened or killed for peacefully exercising their rights of free expression, association, and assembly.

Nearly 1,000 violations were reported against human rights defenders in 2016, including killings, detentions, judicial prosecutions, physical attacks, and other forms of harassment. Civil society activists are targeted by both state and nonstate actors, including private companies and investors, seeking to obstruct the rights of voters, minorities, landowners, environmentalists, indigenous peoples, and refugees, among other vulnerable groups. These attacks are not limited to a particular region or a handful of countries—they are common in Latin America, Africa, Asia, and the Middle East—nor are they limited to countries with authoritarian governments, such as Cambodia, Rwanda, Eritrea, Egypt, and Russia. Democratically elected governments are also culpable, such as Honduras, Philippines, Kenya, Ecuador, and Turkey. Democratically elected governments will not survive if the rights of civil society and the independent media are not protected.

Last year was the deadliest year on record for land and environmental defenders. There were more deaths reported in more countries than ever before. Competition for land and natural resources has intensified to an all-time high, with companies around the globe putting pressure on governments to open up even the most remote areas to industry profit margins than on environmental protection or land ownership rights. As these pressures increase, the risk to civil society activists will also increase.

Similarly, although the number of journalists on assignment dropped slightly in 2016, the number of journalists in prison reached its highest level yet. More than 250 journalists are imprisoned worldwide because of their work. This is an egregious violation of the universal right of free expression.

These statistics are almost certainly underestimates, given the suppressions of free speech and lack of transparent and effective judicial systems in many countries where civil society activists face the most severe threats to their work and lives.

It is important for all of us to be aware of the growing threats to civil society activists worldwide, as well as the relevant funding and language included in the committee-reported Department of State and Foreign Operations appropriations bill. This should be the first step in developing an international strategy to focus attention and resources on this critical problem.

I ask unanimous consent that the language in the committee report describing this provision be printed in the Record.

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

SEC. 7032. DEMOCRACY PROGRAMS.

Protection of Civil Society Activists.—For purposes of developing the strategy and allocating funds under subsection (f), the Assistance Secretary of State for Democracy, Human Rights, and Labor shall consult with the Committee and with representatives of civil society and independent media organizations. The uses of funds shall include strengthening the capacity of such organizations, protecting their members who have been threatened, supporting the enactment of laws to protect freedoms of expression, association, and assembly, and educating the public about the legitimate role of such activists and journalists in society.

INTERNATIONAL EFFORTS TO APPREHEND AND PROSECUTE WAR CRIMINALS

Mr. LEAHY. Mr. President, I want to speak very briefly about an amendment that was adopted unanimously by the Appropriations Committee 2 weeks ago, during markup of the fiscal year 2018 Department of State and Foreign Operations appropriations bill.

The amendment, which I offered, was identical to one that was adopted by the committee last year and the year before that.

It would permit the United States to provide technical assistance, training, assistance for victims, protection of witnesses, and law enforcement support related to investigations, apprehensions, and prosecutions of the world’s most notorious war criminals.

It is important to note what my amendment does not do. For example, while I support the International Criminal Court which has proven to be a nonpolitical, adjudicative body comprised of reputable, experienced jurists who have carried out their responsibilities impartially and professionally, my amendment does not authorize a regular cash contribution to the International Criminal Court.

Also, my amendment exempts American servicemembers, members of NATO, and major non-NATO allies, such as Israel.

As the committee report indicates, the amendment is focused on the worst of the worst: Joseph Kony, the head of the Lord’s Resistance Army, Sudan’s President Bashir; Syria’s President Assad; and other high-profile criminals.

The United States has some of the world’s most experienced criminal investigators and prosecutors. We have unique capabilities. Even though we do not contribute funds to the ICC—and my amendment does not change that—we have strongly supported the court’s efforts in the past. For example, when it prosecuted Serbian President Milosevic and when it tried and convicted Charles Taylor, the war criminal in Sierra Leone—and we will support the ICC if Joseph Kony and others like him are apprehended.

I think we will agree that we should do what we can to help bring the world’s worst war criminals to justice. My amendment would do that, and I hope other Senators will lend their voices in support of its inclusion in the final conference agreement.

I ask unanimous consent that a copy of my amendment be printed in the Record.

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

WAR CRIMES TRIBUNALS
Sec. 7047.

(b) None of the funds appropriated by this Act may be made available for a United States contribution to the International Criminal Court: Provided, That notwithstanding section 705(b) of the Admiral James W. Nance and Meg Donovan Foreign Relations Authorization Act, Fiscal years 2000 and 2001 (division A of Public Law 106–113) and consistent with section 7015 of the American Service-Members Protection Act, 2002, as amended, funds may be made available for technical assistance, training, assistance for victims, protection of witnesses, and law enforcement support related to international investigations, apprehensions, prosecutions, and adjudications of genocide, crimes against humanity, and war crimes. Provided further, That the previous proviso shall not apply to American servicemembers and other United States citizens or nationals, or to nationals of the North Atlantic Treaty Organization (NATO) or major non-NATO allies initially designated as toeing section 517(b) of the Foreign Assistance Act of 1961.

INTERNATIONAL HIV/AIDS PROGRAMS

Mr. LEAHY. Mr. President, I want to speak briefly about the funding to combat HIV/AIDS in the fiscal year 2018 Department of State and Foreign Operations appropriations bill, which was reported unanimously by the Senate Appropriations Committee on September 7.

In May, the Congress received the President’s fiscal year 2018 budget request, which included a $1 billion cut to international HIV/AIDS programs. The White House proposed to focus the President’s Emergency Plan for AIDS Relief—the PEPFAR program—in 12 priority countries, while only maintaining current treatment levels in the other 24 countries in which PEPFAR works. This would mean no lifesaving drugs for new patients in any of those 24 countries and the end of initiatives PEPFAR has undertaken to accelerate progress in those countries.

Fortunately, the State and Foreign Operations Subcommittee, chaired by Senator GRAHAM and of which I am ranking member, rejected the President’s proposed cut and restored HIV/AIDS funding to the current level. The committee-reported bill includes a total of $6 billion for HIV/AIDS programs, including $4.32 billion for PEPFAR, $1.35 billion for the Global Fund to Fight AIDS, TB, and malaria, and $330 million for HIV/AIDS programs administered by the U.S. Agency for International Development.

The committee accompanying the bill also reaffirms the key role PEPFAR plays in HIV/AIDS prevention, care, and treatment around the
globe. In 2016, PEPFAR supported more than 11 million people with lifesaving antiretroviral treatment and provided testing and counseling for more than 74 million people.

During the committee markup of the Department of State and Foreign Operations appropriations bill, I offered an amendment that would have increased PEPFAR by $500 million. Funding for PEPFAR has been stagnant for several years, and the additional funds in my amendment would have enabled millions of people with HIV/AIDS access to the AIDS virus to receive lifesaving treatment. Regrettably, my amendment failed on a party-line vote.

Nonetheless, the bill still succeeds in rejecting the administration’s nonsensical and unacceptable reduction to HIV/AIDS funding. I want to be sure that all Senators are aware of this critical funding, which has received widespread, bipartisan support for many years.

CHOLERA IN HAITI

Mr. LEAHY. Mr. President, in 2004 the United States voted to establish the United Nations Stabilization Mission in Haiti, MINUSTAH, to police the country following years of political turmoil.

While MINUSTAH was successful in bringing a semblance of order to the country, its mission was severely impacted by the 2010 earthquake which resulted in the deaths of tens of thousands of people and left hundreds of thousands more in need of assistance. Haiti has not fully recovered since then.

Unfortunately, that was not the only tragedy that befell Haiti in 2010. In October of that year, a cholera outbreak spread throughout the country, sickening hundreds of thousands and claiming the lives of more than 9,000. Even more tragically and unlike the earthquake, the outbreak could have been prevented, and the UN peacekeeping mission—tasked with protecting the people—was at fault.

The cholera outbreak was caused by an act of extreme negligence, when some UN peacekeepers exposed human waste in a manner that contaminated the local water system. Before it happened, cholera was not a problem in Haiti. Today it is. In 2016, after years of refusing to accept responsibility, the UN acknowledged its role in the cholera outbreak and established a trust fund to address the problem, but so far, very little has been contributed.

A provision I authored, which was adopted unanimously by the Senate Appropriations Committee and included in the fiscal year 2018 Department of State and Foreign Operations appropriations bill, would provide the Trump administration with the authority to enable the United States to do its part to help.

With MINUSTAH winding down in Haiti, $40 million in unused contributions are available to donor countries, and the UN has agreed that those credits may be used to help address the cholera problem caused by its own peacekeepers.

The United States share of those credits is $11.7 million, and the provision I offered is made clear that the committee believes contributing to the trust fund would be an appropriate use of those funds. While this amount still falls far short of what is needed, if we believe in accountability for the UN, we should join other nations in providing our share of these funds to address this tragedy.

This is not a tragedy that only harmed a few families. Nearly 10,000 innocent people lost their lives through no fault of their own. They need help, and this is a small way for us to contribute.

When the United States responds to natural or manmade disasters, whether the tsunami in Indonesia, earthquakes in Nepal, drought in Africa, or war in Syria, we don’t debate whose responsibility it should be to care for the victims. We respond because we are able to, and that is what global leaders do when tragedy strikes. We did not cause the cholera outbreak; we caused just as much as the UN peacekeepers. We don’t turn a blind eye to the suffering and lack of care around the world, but we can help. Even $11.7 million will make a difference in Haiti, including by leveraging contributions from other governments.

I hope other Senators will follow the lead of the Appropriations Committee and lend their voices in support of this effort.

25TH ANNIVERSARY OF THE NYUMBANI CHILDREN’S HOME

Mr. LEAHY. Mr. President, on the occasion of the 25th anniversary of its founding, I would like to share a few remarks about the Nyumbani Children’s Home.

Marcelle and I have always enjoyed learning about and celebrating the continued growth and successes of Nyumbani. Those successes are because of the people who choose to dedicate their time, valuable skills, and scarce resources to a noble cause—that of saving and improving the lives of others.

We have been particularly touched and moved by the stories of the children at Nyumbani. Donating time and resources to confront tremendous personal medical and social challenges, these young people have been nurtured, nourished, educated, and cared for in a safe and loving environment.

These children have also benefited from advances in medical and therapeutic care that were unimaginable when this refuge was founded on September 8, 1992. To know that many of the children raised there have now grown into magnificent young people is a testament to the mission of this center.

When the Nyumbani Children’s home was founded, there was certainly no assurance that these results would necessarily follow. The inspired efforts of our friend, Father Angelo D’Agostino, or Father D’Ag, have led to these successes. Father D’Ag was a man of faith who combined an incredible work ethic with vision and an insatiable, indomitable spirit.

Father D’Ag realized that the terror, stigma, and uncertainties associated with the transmission of the AIDS virus was responsible for a generation of orphans. Cruelly, AIDS also denied these children a home because Kenyan orphanages would turn them away out of fear and an inability to provide appropriate medical care, but Father D’Ag would not walk away.

It began when Father D’Ag took on the care of three children who had been abandoned and were destined to die alone. From that modest beginning, the Nyumbani Children’s Home became a forerunner in providing care to those affected by the scourge in Africa, including in Kenya.

In the decades since, Father D’Ag’s vision has grown to encompass not only the original Children’s Home, but also an advanced diagnostic laboratory, the unique Nyumbani Village, and an indispensable community outreach program that provides medical care to residents of distressed communities in Nairobi.

As a doctor and Jesuit priest, Father D’Ag innately understood the principle that every life has value and dignity. His character and ministry have compelled him to act when others stood paralyzed by fear and doubt.

Sharing his compassion and conviction from the outset was Sister Mary Owens, Nyumbani’s remarkable executive director since Father D’Ag’s passing in 2006. Each of us is enormously thankful for the work of extraordinary people like Father D’Ag and Sister Mary. We are grateful for the many lives that have been saved and all that has been accomplished by Nyumbani over the past 25 years and look forward to success stories in the next 25 years.

Nyumbani is a representation of what good can come when dedicated people cast aside fear and doubt, bring forward the true human spirit, and help those in need.

(At the request of Mr. SCHUMER, the following statement was ordered to be printed in the RECORD.)

VOTE EXPLANATION

Mr. NELSON. Mr. President, I was necessarily absent for today’s vote on the motion to invoke cloture on the nomination of William Emanuel to be a Member of the National Labor Relations Board. I would have voted nay.

(At the request of Mr. SCHUMER, the following statement was ordered to be printed in the RECORD.)

VOTE EXPLANATION

Mr. MENENDEZ. Mr. President, I was unavoidably absent for rollcall
vote No. 200, the motion to invoke cloture on the nomination of Noel J. Francisco, of the District of Columbia, to be Solicitor General of the United States. Had I been present, I would have voted nay.

Mr. President, I was unavoidably absent for roll call vote No. 202, the motion to invoke cloture on the nomination of Noel J. Francisco, of the District of Columbia, to be Solicitor General of the United States. Had I been present, I would have voted nay.

50TH ANNIVERSARY OF THE OFFICE OF THE CHIEF MASTER SERGEANT OF THE AIR FORCE

Mr. BOOZMAN. Mr. President, September 18, 2017, was the 70th anniversary of the U.S. Air Force. Since its inception, it has repeatedly proven that it is indeed the finest air force in the world.

Among the greatest strengths of the U.S. Air Force is its enlisted corps, which is recognized worldwide as being comprised of the best educated, best trained, best motivated, and most dedicated men and women of any air force anywhere.

The office of the Chief Master Sergeant of the Air Force was created in 1947 based in large measure on strong advocacy by the Air Force Association and has been filled by 18 brilliant leaders, including the present Chief Master Sergeant of the Air Force, Kaleth O. Wright.

The U.S. Air Force core values of “Integrity First, Service Before Self, and Excellence in All We Do” are embodied in the office of the Chief Master Sergeant of the Air Force, in the Air Force enlisted corps, and in all men and women serving in the U.S. Air Force.

The Senate Air Force Caucus joins the Air Force Association and airmen worldwide in celebrating the 50th anniversary of the creation of the Office of the Chief Master Sergeant of the Air Force.

TRIBUTE TO SABRINA LIANG

Mr. BARRASSO. Mr. President, I would like to take the opportunity to express my appreciation to Sabrina for her hard work as an intern in my Washington, DC, office. I recognize her efforts and contributions to my office, as well as to the State of Wyoming.

Sabrina is a native of California. She currently attends Wellesley College, where she is studying political science. She has demonstrated a strong work ethic, which has made her an invaluable asset to our office. The quality of her work is reflected in her great efforts over the last several months.

I want to thank Sabrina for the dedication she has shown while working for me and my staff. It was a pleasure to have her as part of our team. I know she will have continued success with all of her future endeavors. I wish her all my best on her next journey.

TRIBUTE TO TYLER SMITH

Mr. BARRASSO. Mr. President, I would like to take the opportunity to express my appreciation to Tyler Smith for his hard work as an intern in my Washington, DC, office. I recognize his efforts and contributions to my office, as well as to the State of Wyoming.

Tyler is a native of Illinois. He is a graduate of Indiana University, where he studied public affairs. He has demonstrated a strong work ethic, which has made him an invaluable asset to our office. The quality of his work is reflected in his great efforts over the last several months.

I want to thank Tyler for the dedication he has shown while working for me and my staff. It is a pleasure to have him as part of our team. I know he will have continued success with all of his future endeavors. I wish him all my best on his journey.

TRIBUTE TO ALISON CHEPERDAK

Mr. THUNE. Mr. President, today I recognize the hard work of my Commerce, Science, and Transportation committee intern Alison Cheperdak. Alison hails from Hopkinton, MA, and is in her third year at George Washington University Law School.

While interning on the Commerce Committee, Alison advocated for Consumer Protection, Product Safety, Insurance, and Data Security. She is a dedicated worker who was committed to getting the most out of her internship. I extend my sincere thanks and congratulations to Alison for her continued work helping Wyoming veterans in need.

Thank you.

ADDITIONAL STATEMENTS

TRIBUTE TO COMMAND SERGEANT MAJOR BRUNK W. CONLEY

Mr. WYDEN. Mr. President, I want to take a few minutes today to thank my friend Brunk Conley and to honor his long and distinguished career as he retires from the Oregon National Guard.

After more than 35 years of service to the Oregon Guard, the State of Oregon, and the United States—including his most recent position as Command Sergeant Major of the Army National Guard—he has certainly earned it.

Brunk, as we call him in Oregon, enlisted in December of 1981 and completed both airborne and ranger schools soon after his basic training. He demonstrated an early talent for leadership, and it wasn’t long before he was being selected for command.

He deployed to Iraq as the 41st Infantry Brigade Combat Team in 2003 as command sergeant major of the 162nd Infantry’s 2nd Battalion and to Afghanistan in 2006, after being selected as command sergeant major of the 31st.

Between those overseas deployments, he served in New Orleans as part of the relief effort following Hurricane Katrina, helping to provide stability and support to Americans in desperate need.

Anybody who knows Brunk knows that he has been tireless in his pursuit of excellence and has served as an example to his colleagues in the Oregon Guard and elsewhere.

During his service in uniform, he earned a Bronze Star, Meritorious Service Medal, and Oregon Distinguished Service Medal.

Now I have always believed in the principle that friendship fraternizes friends, so I will not read the long list of Brunk’s awards and commendations here, but let me tell you how pleased I was to learn in 2012 that Brunk had been promoted from command sergeant major of the Oregon National Guard to command sergeant major of the entire Army National Guard.

As the most senior enlisted member of the Army National Guard, Brunk made sure Army National Guard leadership addressed the needs of enlisted guardsmen into account and worked with his Active Duty counterparts to ensure policies made sense from a total Army perspective.
It was a pleasure and a privilege of mine to work with him here in Washington over these past few years, particularly on issues like tuition benefits, which he rightly championed.

Brunk’s dedication to the troops under his command was legendary, and during his 2012 promotion ceremony, he said, “I want it to be clear that in my mind there is nobody more important than the Citizen-Soldier [. . .] we live and breathe to support the Citizen-Soldier.”

Before I finish, I want to point out that Brunk sprang his retirement on everybody, announcing it on his Facebook account. In true Brunk fashion, he noted that nobody celebrated when he joined the Guard, and so he didn’t see a need to celebrate anything now.

This is the only time I can remember disagreeing with Brunk’s assessment, and so it is my distinct honor to add my name to the long list of those who want to celebrate his career.

It was his wife, Laura, and their five sons many happy years together, and I join the rest of Oregon in thanking him for his dedication to our National Guard, our state, and our nation.

EXECUTIVE AND OTHER COMMUNICATIONS

The following communications were laid before the Senate, together with accompanying papers, reports, and documents, and were referred as indicated:

EC–2840. A communication from the Acting Administrator of the Specialty Crops Program, Agricultural Marketing Service, Department of Agriculture, transmitting, pursuant to law, the report of a rule entitled “Tart Cherries Grown in the States of Michigan, New York, Pennsylvania, Oregon, Utah, Washington, Wisconsin: Modification of Assessment” (Docket No. AMS–SC–16–0194) received in the Office of the President of the Senate on September 13, 2017; to the Committee on Agriculture, Nutrition, and Forestry.

EC–2841. A communication from the Acting Administrator of the Specialty Crops Program, Agricultural Marketing Service, Department of Agriculture, transmitting, pursuant to law, the report of a rule entitled “Cotton Board Rules and Regulations: Adjusting Supplemental Assessment on Imports (2017 Amendments)” (Docket No. AMS–SC–17–0003) received in the Office of the President of the Senate on September 13, 2017; to the Committee on Agriculture, Nutrition, and Forestry.

EC–2842. A communication from the Counsel, Legal Division, Bureau of Consumer Financial Protection, transmitting, pursuant to law, the report of a rule entitled “Home Mortgage Disclosure (Regulation C) (RIN3170–AA64 and RIN3170–AA76) received in the Office of the President of the Senate on September 13, 2017; to the Committee on Banking, Housing, and Urban Affairs.

EC–2843. A communication from the Assistant Secretary, Office of Legislative Affairs, Department of Justice, transmitting, pursuant to law, a report on the Department’s activities during calendar year 2016 relative to the Equal Credit Opportunity Act; to the Committee on Banking, Housing, and Urban Affairs.

EC–2844. A communication from the Chair of the Board of Governors, Federal Reserve System, transmitting, pursuant to law, a report entitled “Annual Report to Congress on the President’s Financial Ethics Program”; to the Committee on Banking, Housing, and Urban Affairs.

EC–2845. A communication from the President of the United States, transmitting, pursuant to law, a report relative to the designation for Overseas Contingency Operations/Global War on Terrorism all funding (including the rescission of funds and contributions from foreign governments so designated by the Congress in the Continuing Appropriations Act, 2018 and Supplemental Appropriations for Disaster Relief Requirements Act, 2017, pursuant to section 251(b)(2)(A) of the Balanced Budget and Emergency Deficit Control Act of 1985, as amended, for the enclosed list of accounts; to the Committee on the Budget.

EC–2846. A communication from the President of the United States, transmitting, pursuant to law, a report relative to the designation as an emergency requirement all funding (including the rescission of funds and contributions from foreign governments so designated by the Congress in the Continuing Appropriations Act, 2018 and Supplemental Appropriations for Disaster Relief Requirements Act, 2017, pursuant to section 251(b)(2)(A) of the Balanced Budget and Emergency Deficit Control Act of 1985, as amended, for the enclosed list of accounts; to the Committee on the Budget.

EC–2847. A communication from the Deputy Assistant Administrator for Regulatory Programs, Office of protected Resources, Department of Commerce, transmitting, pursuant to law, the Report and Order and Further Notice of Proposed Rulemaking” (FCC 17–111) received in the Office of the President of the Senate on September 13, 2017; to the Committee on Commerce, Science, and Transportation.

EC–2848. A communication from the Acting Assistant Secretary, Legislative Affairs, Department of State, transmitting, pursuant to section 36(c) of the Arms Export Control Act, the certification of a proposed license for the export of firearms and accessories abroad controlled under Category I of the United States Munitions List of various machine guns and spare barrels to the United Arab Emirates in the amount of $1,000,000 or more (Transmittal No. DDTC 17–167); to the Committee on Foreign Relations.

EC–2849. A communication from the Deputy Assistant Secretary, Bureau of Legislative Affairs, Department of State, transmitting, pursuant to law, the report of a rule entitled “Adjustment of Civil Penalties” (RIN1212–AB33) received in the Office of the President of the Senate on September 14, 2017; to the Committee on Rules and Administration.

EC–2850. A communication from the Assistant Secretary, Bureau of Legislative Affairs, Department of State, transmitting, pursuant to law, a report relative to settlements and consent decrees and orders; to the Committee on the Judiciary.

EC–2851. A communication from the Assistant Secretary, Legislative Affairs, Department of State, transmitting, pursuant to section 36(c) of the Arms Export Control Act, the certification of a proposed license for the export of firearms and accessories abroad controlled under Category I of the United States Munitions List of semiautomatic rifles, semi-automatic pistols, and magazines to Peru in the amount of $1,000,000 or more (Transmittal No. DDTC 17–031); to the Committee on Foreign Relations.

EC–2852. A communication from the Deputy Assistant Secretary, Legislative Affairs, Department of State, transmitting, pursuant to section 36(c) of the Arms Export Control Act, the certification of a proposed license for the export of firearms and accessories abroad controlled under Category I of the United States Munitions List of semi-automatic rifles, semi-automatic pistols, and magazines to Peru in the amount of $1,000,000 or more (Transmittal No. DDTC 17–031); to the Committee on Foreign Relations.

EC–2853. A communication from the Deputy Assistant Secretary, Legislative Affairs, Department of State, transmitting, pursuant to law, a report relative to the introduction of aircraft engaged in illicit drug trafficking; to the Committee on Foreign Relations.

EC–2854. A communication from the Secretary of the Treasury, transmitting, pursuant to Executive Order 13315 of July 31, 2003, a semiannual report detailing telecommunications-related payments made to Cuba pursuant to the Trade Sanctions Regulations; to the Committee on Foreign Relations.

EC–2855. A communication from the Assistant General Counsel for Regulatory Affairs, Pension Benefit Guaranty Corporation, transmitting, pursuant to law, the report of a rule entitled “Adjustment of Civil Penalties” (RIN1212–AB33) received in the Office of the President of the Senate on September 14, 2017; to the Committee on Health, Education, Labor, and Pensions.

EC–2856. A communication from the Assistant Attorney General, Office of Legislative Affairs, Department of Justice, transmitting, pursuant to law, a report relative to settlements and consent decrees and orders; to the Committee on the Judiciary.

EC–2857. A communication from the Assistant Attorney General, Office of Legislative Affairs, Department of Justice, transmitting, pursuant to law, a report relative to settlements and consent decrees and orders; to the Committee on the Judiciary.

EC–2858. A communication from the Assistant Attorney General, Office of Legislative Affairs, Department of Justice, transmitting, pursuant to law, a report relative to settlements and consent decrees and orders; to the Committee on the Judiciary.

EC–2859. A communication from the Assistant Attorney General, Office of Legislative Affairs, Department of Justice, transmitting, pursuant to law, a report relative to settlements and consent decrees and orders; to the Committee on the Judiciary.

EC–2860. A communication from the Chair, Federal Election Commission, transmitting, pursuant to law, a report on its budget request for fiscal year 2019; to the Committee on Rules and Administration.

EC–2861. A communication from the Program Analyst, Office of Managing Director, Federal Communications Commission, transmitting, pursuant to law, the report of a rule entitled “Notice of Proposed Rulemaking” (FCC 17–111) received during adjournment of the Senate in the Office of the President of the Senate on September 19, 2017; to the Committee on Commerce, Science, and Transportation.

PETITIONS AND MEMORIALS

The following petition or memorial was laid before the Senate and was referred or ordered to lie on the table as indicated:

September 19, 2017
Congressional Record — Senate
September 19, 2017

S5858

POM-112 A resolution adopted by the General Assembly of the State of New Jersey urging the President of the United States and the United States Congress to enact the “Surface and Maritime Security Act”, to the Committee on Commerce, Science, and Transportation.

Assembly Resolution No. 195

Whereas, The Transportation Security Administration (TSA) is responsible for transportation security in the United States, including air, rail, transit, maritime, and highway travel; and

Whereas, While considerable resources have been allocated to air travel security following September 11, 2001, Congressional oversight and independent audits have raised concern about the TSA’s approach to protecting rail, transit, maritime, and highway travelers; and

Whereas, In response to these concerns and with bipartisan support, Senator Thune introduced a bill to enact the “Surface Transportation and Maritime Security Act.”

Whereas, In order to improve surface transportation and maritime security, the bill requires the TSA to assess the risk of terror attacks on surface transportation facilities such as rail stations; and

Whereas, The risk assessment is to include consideration of (1) appropriate intelligence; (2) security breaches and attacks at domestic and international transportation facilities; (3) the vulnerabilities associated with specific modes of transportation; (4) current and prospective allocation of agency and stakeholder resources to mitigate threats; (5) the systems and practices designed to mitigate the identified vulnerabilities; and (6) the vetting and security training of frontline employees in surface transportation and maritime systems, as well as individuals with access to sensitive or secure areas of transportation networks; and

Whereas, Additionally, the bill directs the TSA to implement a risk-based security model for protecting surface transportation facilities and provides grant funding for the use of innovative biometric security systems in order to better identify rail passengers in an emergency; and

Whereas, With its many miles of highways and rail lines, and geographic location on the eastern seaboard, New Jersey is particularly vulnerable to threats to the transportation network; and

Whereas, On September 18, 2016 a backpack containing an explosive device was discovered outside of the train station in Elizabeth, New Jersey and this incident may be linked to the placement of explosive devices in SeaSide Park, New Jersey and New York City; and

Whereas, Securing the nation’s surface transportation and maritime security is of utmost importance and urgency to the residents of this State and nation: Now, therefore, be it

Resolved by the General Assembly of the State of New Jersey:

1. This House respectfully urges the President and the Congress of the United States to enact the “Surface Transportation and Maritime Security Act.”

2. Copies of this resolution, as filed with the Secretary of State, shall be transmitted by the Clerk of the General Assembly to the President and Vice President of the United States, the Majority and Minority Leader of the United States Senate, the Speaker and the Minority Leader of the United States House of Representatives, every sponsor of the “Surface Transportation and Maritime Security Act,” and every member of Congress from New Jersey.

Reports of Committees

The following reports of committees were submitted:

By Mr. THUNE, from the Committee on Commerce, Science, and Transportation, without amendment:
S. 396. A bill to make technical amendments to certain conservation and statutes, and for other purposes (Rept. No. 115-160).

By Mr. THUNE, from the Committee on Commerce, Science, and Transportation, Report to accompany S. 1393, a bill to streamline the process by which active duty military, reservists, and veterans receive commercial driver’s licenses (Rept. No. 115-161).

By Mr. CORKER, from the Committee on Foreign Relations, with an amendment in the nature of a substitute and with an amended preamble:

By Mr. CORKER, from the Committee on Foreign Relations, with an amendment in the nature of a substitute:
H.R. 390. To provide emergency relief for victims of genocide, crimes against humanity, and war crimes in Iraq and Syria, for accountability for perpetrators of these crimes, and for other purposes.

By Mr. CORKER, from the Committee on Foreign Relations, without amendment:
S. 1689. A bill to amend the Trafficking Victims Protection Act of 2000 to modify the criteria for determining whether countries are meeting the minimum standards for the elimination of human trafficking, and for other purposes.

Executive Reports of Committees

The following executive reports of nominations were submitted:

By Ms. MURKOWSKI for the Committee on Energy and Natural Resources:

* David S. Jonas, of Virginia, to be General Counsel of the Department of Energy.

* Joseph Ballenger, of Alaska, to be an Assistant Secretary of the Interior.


* Richard Gillard, of Virginia, to be a Member of the Federal Energy Regulatory Commission for the term expiring June 30, 2022.

* Kevin J. McIntyre, of Virginia, to be a Member of the Federal Energy Regulatory Commission for the remainder of the term expiring June 30, 2018.

* Kevin J. McIntyre, of Virginia, to be a Member of the Federal Energy Regulatory Commission for the term expiring June 30, 2023.

By Mr. CORKER for the Committee on Foreign Relations:


Post: Nassau, The Bahamas.

(The following is a list of all members of my immediate family and their spouses. I have asked each of these persons to inform me of the pertinent contributions made by them To the best of my knowledge, the information contained in this report is complete and accurate.)

Contributions, amount, date, donee:
1. Self: (See attached).
2. Spouse: Geniya Manchester (See attached).
3. Children and Spouses: N/A.
4. Parents: N/A.
5. Grandparents: N/A.
6. Brothers and Spouses: N/A.
7. Sisters and Spouses: N/A.

Policy, Group, Contribution, Made by: 2/25/2013, Taxpayers for Wyland, $72,000.00, MFG.
4/1/2013, Kaitlyn M. Laverty, $1,550.00, MFG.
5/4/2013, Jeb Bush, $5,000.00, DF.
5/28/2013, Carl DeMaio For Congress, $3,200.00, DF.
7/20/2013, Republican Party, $5,000.00, MFG.
8/19/2013, Rubio Victory Committee, $15,000.00, DF.
8/29/2013, Republican Party Gold Sponsor, $5,000.00, DF.
9/5/2013, Lincoln Club of San Diego Dinner Sponsor, $25,000.00, MFG.
9/16/2013, CA Republican Party, $100,000.00, MFG.
10/11/2013, CA Republican Party, $50,000.00, MFG.
10/15/2013, Republican Party, $50,000.00, MFG.
12/9/2013, Faulconer For Mayor 2013, $100,000.00, DF.
12/18/2013, Republican Party, $90,000.00, MFG.
2/7/2014, Republican Party, $20,000.00, MFG.
2/26/2014, San Diego Inaugural Fund, $5,000.00, DF.
2/27/2014, Zafir for Council, $505.00, DF.
4/22/2014, Cate for Council, $550.00, DF.
5/15/2014, Republican Party, $2,000.00, DF.
5/15/2014, National Republican Cong Committee, $5,000.00, DF.
6/15/2014, Republican Party of San Diego County, $10,000.00, DF.
6/20/2014, Shirley Horton, $6,000.00, DF.
6/5/2014, New Majority Dues 2014, $10,000.00, MFG.
6/12/2014, Texans for Greg Abbo, $25,000.00, DF.
8/28/2014, Lincoln Club of San Diego Dinner Sponsor, $20,000.00, MFG.
9/21/2014, Republican Party of San Diego County, $2,600.00, DF.
9/22/2014, Darrell Issa, $10,000.00, MFG.
9/26/2014, Republican Party of San Diego County, $25,000.00, DF.
9/30/2014, Cate for Council, $550.00, Geniya.
10/16/2014, NRCC, $10,000.00, MFG.
10/17/2014, Victory Congress, $5,200.00, DF.
10/17/2014, Victory Congress, $2,600.00, Geniya.
10/20/2014, Republican Party, $15,000.00, MFG.
12/29/2014, NRCC, $500.00, DF.
1/13/2015, Rubio Victory Committee, $2,600.00, DF.
1/14/2015, RickPAC, $10,000.00, DF.
1/20/2015, NRCC, $500.00, DF.
1/21/2015, Our American Revival, $5,000.00, DF.
3/20/2015, Right to Rise PAC, $25,000.00, DF.
5/6/2015, Carly for America, $10,000.00, DF.
6/8/2015, Faulconer for Mayor, $1,050.00, DF.
6/8/2015, Ray Ellis for Council, $550.00, DF.
6/8/2015, Carly for America, $2,500.00, DF.
6/8/2015, Sherman for City Council, $550.00, DF.
6/9/2015, Sherman for City Council, $550.00, Geniya.
6/12/2015, Republican Party of San Diego, $5,000.00, DF.
9/30/2015, Phil Graham for Assembly, $4,200.00, DF.
7/2/2015, Carly for President, $2,700.00, DF.
7/15/2015, Scott Walker Inc. Testing The Waters, $2,700.00, DF.
8/13/2015, New Majority Dues 2015, $10,000.00, MFG.
8/30/2015, Make America Great PAC, $10,000.00, MFG.
10/20/2015, Lincoln Club of San Diego Dinner Sponsor, $1,250.00, MFG.
September 19, 2017

CONGRESSIONAL RECORD — SENATE
S5859

10/26/2015, Ray Ellis for Council, $550.00, DFM.
11/11/2015, Greg Cox Fundraiser, $749.62, DFM.
2/18/2016, Hickey for City Attorney, $1,050.00, DFM.
3/1/2016, Anthony Bernal for City Council, $550.00, Geniya.
3/1/2016, Anthony Bernal for City Council, $550.00, DFM.
3/18/2016, Republican Party of San Diego, $15,000.00, DFM.
3/22/2016, Ray Ellis for Council, $550.00, DFM.
4/8/2016, Republican Party of San Diego, $10,000.00, DFM.
4/29/2016, Hickey for City Attorney, $1,050.00, DFM.
5/2/2016, Darrell Issa Victory Fund, $1,500.00, DFM.
5/25/2016, Trump Victory, $100,000.00, DFM.
6/21/2016, Trump Victory, $798,800.00, DFM.
6/30/2016, Phil Graham for Assessor, $1,200.00, DFM.
7/2/2016, Carly for President, $2,700.00, DFM.
7/5/2016, California Republican Party, $900.00, DFM.
9/7/2016, Trump Pence Victory, $10,000.00, Geniya.
9/13/2016, Trump for America, $5,000.00, DFM.
9/16/2016, New Majority Dues 2016, $30,000.00, MFG.
9/23/2016, Darrell Issa Victory Fund, $10,000.00, DFM.
9/26/2016, Denise Gitsham for Congress, $2,700.00, Geniya.
9/26/2016, Trump Victory, $219,162.47, DFM.
10/29/2016, La Jolla Beach and Tennis Underwrite Pence, $10,837.53, MFG.
10/25/2016, Gitsham Victory, $15,000.00, DFM.
12/12/2016, 58th Presidential Inaugural Committee, $1,000,000.00, DFM.
DFM, Contributed by Douglas F. Manchester;
MFG, Contributed by Manchester Financial Group;
Geniya, Contributed by Geniya Manchester.

*Stephen B. King, of Wisconsin, to be Ambassador Extraordinary and Plenipotentiary of the United States of America to the Czech Republic and to other countries in the region.
Nominee: Stephen B. King.
Post: US Ambassador to the Czech Republic.

( THE FOLLOWING IS A LIST OF ALL MEMBERS OF MY IMMEDIATE FAMILY AND THEIR SPOUSES. I HAVE ASKED EACH OF THESE PERSONS TO INFORM ME OF THE pertinent contributions made by them. TO THE BEST OF MY KNOWLEDGE, THE information contained in this report is complete and accurate. )
Contributions, amount, date, and donee:
1. Self: See Attached.
2. Spouse: See Attached.
3. Children and Spouses: None.
4. Parents: None.
5. Grandparents: None.
6. Brothers and Spouses: None.
7. Sisters and Spouses: None.

*Kathleen Troia McFarland, of New York, a career Member of the Senior Foreign Service, Class of Minister-Counselor, to be Ambassador Extraordinary and Plenipotentiary of the United States of America to the Republic of Singapore.
Nominee: Kathleen Troia McFarland.

( The following is a list of all members of my immediate family and their spouses. I have asked each of these persons to inform me of the pertinent contributions made by them. To the best of my knowledge, the information contained in this report is complete and accurate. )
Contributions, amount, date, and donee:
1. Self: None.
3. Children and Spouses: No Children.
4. Parents: Father—John R. Bass—deceased; Mother—Dianne K. Klinger, $100, 10/19/2014, Sean Eldridge for Congress.
5. Grandparents: Edward Schmuckmier—deceased; Viola Schmuckmier—deceased; Glenn Bass—deceased; Maude Bass—deceased.
6. Brothers and Sisters: None.
7. Sisters and Spouses: Kristin Bass, $500, 06/08/2017, Country First PAC; $500, 04/06/2017, Team Graham (Lindsay Graham); $500, 03/06/2017, Collins for Senator; $500, 02/07/17, Jeff Flake for US Senate; $500, 09/20/2015, Hillary for America; $1000, 10/21/2015, Grassley Committee; $500, 09/24/2014, Young, David, via Young for Iowa, Inc.; $500, 09/20/2013, David, via Young for Iowa, Inc.; $100, 06/24/2014, Chris Gibson for Congress; $1000, 04/20/2013, The Hawkeye PAC.
Pharmaceutical Care Management Association Political Action Committee (PCMA PAC):
$2500, 06/16/2017;
$1154, 12/15/2016;
$3146, 09/30/2016;
$3146, 06/10/2016;
$154, 02/16/2016;
$2500, 12/31/2015;
$3146, 06/12/2015;
$3146, 04/20/2015;
$3146, 01/29/2015;
$3146, 01/29/2014;
$3146, 01/29/2013;
$3146, 01/29/2012;
$3146, 01/29/2011;
$3146, 01/29/2010;
$3146, 01/29/2009;
$3146, 01/29/2008;
have asked each of these persons to inform me of the pertinent contributions made by them. To the best of my knowledge, the information contained in this report is complete and accurate.

Contributions, amount, date, and donee:
1. Self: None.
2. Spouse: None.
5. Grandparents deceased.
7. Sisters and spouses: no contributions.

Steven T. Mnuchin, of California, to be United States Governor of the African Development Bank for Reconstruction and Development, United States Governor of the Asian Development Bank, United States Governor of the African Development Bank, United States Governor of the Inter-American Development Bank, and United States Governor of the International Bank for Reconstruction and Development for a term of five years.

Barbara Lee, of California, to be Representative of the United States of America to the General Assembly of the United Nations.

Christopher Smith, of New Jersey, to be Representative of the United States of America to the General Assembly of the United Nations.

Nomination was reported with recommendation that it be confirmed subject to the nominee’s commitment to respond to requests to appear and testify before any duly constituted committee of the Senate.

INTRODUCTION OF BILLS AND JOINT RESOLUTIONS

The following bills and joint resolutions were introduced, read the first and second times by unanimous consent, and referred as indicated:

By Mr. GRASSLEY (for himself, Mr. MENENDEZ, Mr. BLUNT, Mr. CASKY, Mr. BROWN, Mr. CASSIDY, Mr. CARUSO, Mr. CARUSO, and Mr. BROWN):

S. 1829. A bill to amend title V of the Social Security Act to extend the Maternal, Infant, and Early Childhood Home Visiting Program; to the Committee on Finance.

By Mr. PAUL:

S. 1830. A bill to strengthen employee cost savings suggestions programs within the Federal Government; to the Committee on Homeland Security and Governmental Affairs.

By Ms. HEITKAMP (for herself and Mr. TESTER):

S. 1831. A bill to expand eligibility for certain housing programs for qualified volunteer first responders; to the Committee on Banking, Housing, and Urban Affairs.

By Mr. PETERS (for himself, Ms. WARREN, and Mr. SCOTT):

S. 1832. A bill to prohibit Federal agencies from using Government funds to pay for the lodging of agency employees at establishments owned by or employ certain public officials or their relatives; to the Committee on Homeland Security and Governmental Affairs.

By Mr. UDALL (for himself, Mr. HINCH, Mr. BENNET, Mr. WYDEN, and Mr. MARKZEY):

S. 1833. A bill to modify requirements applicable to locatable minerals on public domain land, and for other purposes; to the Committee on Energy and Natural Resources.

By Mr. NELSON (for himself, Mr. RUIZ, Mr. CASEY, and Ms. COLLINS):

S. 1834. A bill to amend title XVIII of the Public Health and Social Services National Advisory Committee on Seniors and Disasters; to the Committee on Health, Education, Labor, and Pensions.

By Ms. COLLINS (for herself and Mr. NELSON):

S. 1835. A bill to provide support to States to establish invisible risk pool or reinsurance programs; to the Committee on Finance.

By Mr. THUNE (for himself and Mr. SCOTT):

S. 1836. A bill to amend title 38, United States Code, to provide for annual cost-of-living adjustments to be made automatically by law each year in the rates of disability compensation for veterans with service-connected disabilities and the rates of dependency and indemnity compensation for survivors of certain service-connected disabled veterans, and for other purposes; to the Committee on Veterans’ Affairs.

By Mr. DURBIN (for himself, Mr. BROWN, Mr. BLUMENTHAL, Mr. MARKZEY, and Mr. FRANKEN):

S. 1837. A bill to amend the Internal Revenue Code of 1986 to provide tax rate parity for certain local government employees and for other purposes; to the Committee on Finance.

By Ms. WARREN (for herself, Mr. BROWN, Mrs. GILLIBRAND, Ms. BALDWIN, Mr. MARKZEY, Mr. MARKZEY, and Ms. HASSAN):

S. 1838. A bill to repeal the authority under the National Labor Relations Act for States to enact laws prohibiting agreements requiring membership in a labor organization as a condition of employment, and for other purposes; to the Committee on Health, Education, Labor, and Pensions.

By Mr. KING (for himself, Mrs. ERNST, Mr. DONNELLY, and Ms. COLLINS):

S. 1839. A bill to amend the Agricultural Trade Act of 1978 to extend and expand the market access program and the foreign market development cooperator program; to the Committee on Agriculture, Nutrition, and Forestry.

By Ms. HASSAN:

S. 1840. A bill to amend the Internal Revenue Code to provide a flat-rate tax credit for low-income individuals; to the Committee on Finance.

By Mr. WICKER:

S. 1841. A bill to amend the National Apprenticeship Act to provide that applications relating to apprenticeship programs shall be processed in a fair and timely manner, and for other purposes; to the Committee on Health, Education, Labor, and Pensions.

By Mr. WYDEN (for himself, Mr. CRAPO, Ms. FEINSTEIN, Mr. RISCH, Ms. CANTWELL, Mr. HATCH, Mr. MARRERO, Mr. GARDNER, and Mr. BENNET):

S. 1842. A bill to provide for wildfire suppression operations, and for other purposes; to the Committee on the Budget.

By Mrs. GILLIBRAND (for herself and Mr. DURBIN):

S. 1843. A bill to amend the Internal Revenue Code of 1866 to deny a deduction for excessive compensation of any employee of an employer, and for other purposes; to the Committee on Finance.

By Mr. INHOFE (for himself and Mr. KING):

S. 1844. A bill to provide for coordination by the Federal Energy Regulatory Commission of the process for reviewing certain natural gas projects under the jurisdiction of

the Commission, and for other purposes; to the Committee on Energy and Natural Resources.

By Mr. DURBIN (for himself, Mr. SCOTT, Mr. MENENDEZ, Mr. YOUNG, Mr. DONNELLY, and Ms. DUCKWORTH):

S. 1845. A bill to amend the Lead-Based Paint Poisoning Prevention Act to provide for additional procedures for families with children under the age of 6, and for other purposes; to the Committee on Banking, Housing, and Urban Affairs.

By Mr. SCHATZ (for himself, Mr. COONS, and Mr. BENNET):

S. 1846. A bill to repeal the debt ceiling; to the Committee on Finance.

By Mr. DAINES (for himself and Ms. HASSAN):

S. 1847. A bill to amend the Homeland Security Act of 2002 to ensure that the needs of children are considered in homeland security, trafficking, and disaster recovery planning, and for other purposes; to the Committee on Homeland Security and Governmental Affairs.

By Mr. CORKER:

S. 1848. An original bill to amend the Trafficking Victims Protection Act of 2000 to modify the criteria for determining whether countries are meeting the minimum standards for the elimination of human trafficking, and for other purposes; from the Committee on Foreign Relations; placed on the calendar.

By Mr. BROWN:

S. 1849. A bill to amend the Internal Revenue Code of 1986 to modify the earned income tax credit to account for the amount by which economic growth has outpaced income growth, and for other purposes; to the Committee on Finance.

SUBMISSION OF CONCURRENT AND SENATE RESOLUTIONS

The following concurrent resolutions and Senate resolutions were read, and referred (or acted upon), as indicated:

By Mr. LEAHY:

S. Res. 263. A resolution expressing the sense of the Senate that President Juan Manuel Santos has restructured and significantly strengthened the environmental sector and management capacity of the Colombian Government and has led the country to become a global environmental leader; to the Committee on Foreign Relations.

By Mr. WYDEN (for himself, Mr. HATCH, Mr. CASEY, Mr. KAIN, and Ms. KLOBUCHAR):

S. Res. 264. A resolution designating September 2017 as “National Kinship Care Month”; to the Committee on the Judiciary.

By Ms. COLLINS (for herself and Mr. CASEY):

S. Res. 265. A resolution designating September 22, 2017, as "National Falls Prevention Awareness Day" to raise awareness and encourage the prevention of falls among older adults; considered and agreed to.

ADDITIONAL COSPONSORS

S. 109

At the request of Mr. GRASSLEY, the name of the Senator from Maryland (Mr. VAN HOLLEN) was added as a cosponsor of S. 109, a bill to amend title XVIII of the Social Security Act to provide for coverage under the Medicare program of pharmacist services.

S. 188

At the request of Mr. CASSIDY, the name of the Senator from Louisiana
(Mr. KENNEDY) was added as a cosponsor of S. 188, a bill to prohibit the use of Federal funds for the costs of painting portraits of officers and employees of the Federal Government.

S. 188

At the request of Mr. RUBIO, the name of the Senator from Wisconsin (Ms. BALSWIN) was added as a cosponsor of S. 188, a bill to require continued and enhanced annual reporting to Congress in the Annual Report on International Religious Freedom on anti-Semitic incidents in Europe, the safety and security of European Jewish communities, and the efforts of the United States to partner with European governments, the European Union, and civil society groups, to combat anti-Semitism, and for other purposes.

S. 396

At the request of Mr. Kaine, the name of the Senator from Michigan (Ms. STABENOW) was added as a cosponsor of S. 206, a bill to amend the Higher Education Act of 1965 to allow the Secretary of Education to award job training Federal Pell Grants.

S. 206

At the request of Mr. Peters, the name of the Senator from Maryland (Mr. CARDIN) was added as a cosponsor of S. 322, a bill to protect victims of domestic violence, sexual assault, stalking, and dating violence from emotional and psychological trauma caused by acts of violence or threats of violence against their pets.

S. 322

At the request of Ms. KLOBuchar, the name of the Senator from Massachusetts (Mr. MARKEY) was added as a cosponsor of S. 366, a bill to amend the Help America Vote Act of 2002 to require States to provide for same day registration.

S. 366

At the request of Mr. Portman, the name of the Senator from North Dakota (Mr. HOEVEN) was added as a cosponsor of S. 665, a bill to amend the Tariff Act of 1930 to ensure that merchandise arriving through the mail shall be subject to review by U.S. Customs and Border Protection and to require the provision of advance electronic information on shipments of mail to U.S. Customs and Border Protection for other purposes.

S. 665

At the request of Mr. Thune, the name of the Senator from Maryland (Mr. VAN HOLLEN) was added as a cosponsor of S. 431, a bill to amend title XVIII of the Social Security Act to expand the use of telehealth for individuals with stroke.

S. 431

At the request of Mr. Rubio, the name of the Senator from Colorado (Mr. GARDNER) was added as a cosponsor of S. 458, a bill to designate the area between the intersections of Wisconsin Avenue, Northwest and Davis Street, Northwest and Wisconsin Avenue, Northwest and Edmunds Street, Northwest in Washington, District of Columbia, as "Boris Nemtsov Plaza", and for other purposes.

S. 458

At the request of Mr. Brown, the names of the Senator from Indiana (Mr. DONNELLY), the Senator from Maine (Mr. KING) and the Senator from Maryland (Mr. VAN HOLLEN) were added as cosponsors of S. 479, 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. 479

At the request of Ms. Cantwell, the names of the Senator from New Mexico (Mr. HEINRICH) and the Senator from Maryland (Mr. VAN HOLLEN) were added as cosponsors of S. 497, a bill to amend title XVIII of the Social Security Act to provide for Medicare coverage of certain lymphedema compression treatment items as items of durable medical equipment.

S. 497

At the request of Mr. Tester, the name of the Senator from Maine (Mr. KING) was added as a cosponsor of S. 619, a bill to amend the Public Health Service Act to provide for the participation of physical therapists in the National Health Service Corps Loan Repayment Program, and for other purposes.

S. 619

At the request of Mr. Paul, the name of the Senator from Oregon (Mr. MERKLEY) was added as a cosponsor of S. 642, a bill to restore the integrity of the Fifth Amendment to the Constitution of the United States, and for other purposes.

S. 642

At the request of Mr. Gardner, the name of the Senator from Minnesota (Ms. KLOBuchar) was added as a cosponsor of S. 660, a bill to amend the Higher Education Act of 1965 in order to fulfill the Federal mandate to provide higher educational opportunities for Native American Indians.

S. 660

At the request of Mr. Inhofe, the name of the Senator from Alabama (Mr. STRANGE) was added as a cosponsor of S. 678, a bill to declare English as the official language of the United States, to establish a uniform English language rule for naturalization, and to avoid misconstructions of the English language texts of the laws of the United States, pursuant to Congress' powers to provide for the general welfare of the United States and to establish a uniform rule of naturalization under article I, section 8, of the Constitution.

S. 678

At the request of Ms. Baldwin, the names of the Senator from Rhode Island (Mr. REED) and the Senator from Idaho (Mr. CRAPO) were added as cosponsors of S. 693, a bill to amend the Public Health Service Act to increase the number of permanent faculty in palliative care at accredited allopathic and osteopathic medical schools, nursing schools, social work schools, and other programs, including physician assistant education programs, to promote education and research in palliative care and hospice, and to support the development of faculty careers in academic palliative medicine.

S. 693

At the request of Mr. Wyden, the name of the Senator from Minnesota (Mr. Franken) was added as a cosponsor of S. 777, a bill to amend the Internal Revenue Code of 1986 to allow deductions and credits relating to expenditures in connection with marijuana sales conducted in compliance with State law.

S. 777

At the request of Mrs. Murray, the name of the Senator from Hawaii (Mr. Schatz) was added as a cosponsor of S. 819, a bill to amend the Fair Labor Standards Act of 1938 to provide more effective remedies to victims of discrimination in the payment of wages on the basis of sex, and for other purposes.

S. 819

At the request of Mr. Cassidy, the name of the Senator from North Carolina (Mr. Burr) was added as a cosponsor of S. 830, a bill to amend title XVIII of the Social Security Act to provide for the coordination of programs to prevent and treat obesity, and for other purposes.

S. 830

At the request of Mr. Durbin, the name of the Senator from Illinois (Ms. Duckworth) was added as a cosponsor of S. 948, a bill to designate as wilderness certain Federal portions of the red rock canyons of the Colorado Plateau and the Great Basin Deserts in the State of Utah for the benefit of present and future generations of people in the United States.

S. 948

At the request of Mr. Kaine, the name of the Senator from Michigan (Ms. Stabenow) was added as a cosponsor of S. 1004, a bill to amend the Carl D. Perkins Career and Technical Education Act of 2006 to support innovative approaches to career and technical education and redesign the high school experience for students by providing students with equitable access to rigorous, engaging, and relevant real world education through partnerships with business and industry and higher education that prepare students to graduate from high school and enroll into postsecondary education without the need for remediation and with the ability to use knowledge to solve complex problems, think critically, communicate effectively, collaborate with others, and develop academic mindsets.

S. 1004

At the request of Ms. Duckworth, the name of the Senator from Rhode Island (Mr. Whitehouse) was added as a
cosponsor of S. 1069, a bill to award a Congressional Gold Medal, collectively, to the Chinese-American Veterans of World War II, in recognition of their dedicated service during World War II.

At the request of Mr. Cassidy, the name of the Senator from New Hampshire (Mrs. Shaheen) was added as a cosponsor of S. 1132, a bill to amend title XVIII of the Social Security Act to make permanent the removal of the rental cap for durable medical equipment under the Medicare program with respect to speech generating devices.

At the request of Mr. Markey, the name of the Senator from Georgia (Mr. Isakson) was added as a cosponsor of S. 1256, a bill to award a Congressional Gold Medal to the 23d Headquarters, Special Troops and the 3133d Signal Service Company in recognition of their unique and distinguished service as a "Ghost Army" that conducted deception operations in Europe during World War II.

At the request of Mr. Rounds, the name of the Senator from Wyoming (Mr. Enzi) was added as a cosponsor of S. 1310, a bill to amend the Home Mortgage Disclosure Act of 1975 to specify which depository institutions are subject to the maintenance of records and disclosure requirements of such Act, and for other purposes.

At the request of Mr. Craapo, the name of the Senator from Idaho (Mr. Risch) was added as a cosponsor of S. 1361, a bill to amend title XVIII of the Social Security Act to allow physician assistants, nurse practitioners, and clinical nurse specialists to supervise cardiac, intensive cardiac, and pulmonary rehabilitation programs.

At the request of Mr. Sanders, the name of the Senator from Michigan (Ms. Stabenow) was added as a cosponsor of S. 1590, a bill to provide for youth jobs, and for other purposes.

At the request of Mr. Rubio, the names of the Senator from South Dakota (Mr. Rounds), the Senator from Kansas (Mr. Moran), the Senator from Louisiana (Mr. Kennedy) and the Senator from Colorado (Mr. Gardner) were added as cosponsors of S. 1595, a bill to amend the Hizballah International Financing Prevention Act of 2015 to impose additional sanctions with respect to Hizballah, and for other purposes.

At the request of Mr. Cassidy, the name of the Senator from Alabama (Mr. Strange) was added as a cosponsor of S. 1686, a bill to amend the Magna

At the request of Mr. Portman, the names of the Senator from Illinois (Ms. Duckworth) and the Senator from Nebraska (Mrs. Fischer) were added as cosponsors of S. 1693, a bill to amend the Communications Act of 1934 to clarify that section 230 of that Act does not prohibit the enforcement against providers and users of interactive computer service, Federal and State criminal and civil law relating to sex trafficking.

At the request of Mr. Booker, the name of the Senator from New Mexico (Mr. Udall) was added as a cosponsor of S. 1761, a bill to amend and prohibit the principle of federalism to State drug policy, provide access to medical marijuana, and enable research into the medicinal properties of marijuana.

At the request of Mr. Cornyn, the names of the Senator from Delaware (Mr. Coons) and the Senator from Ohio (Mr. Portman) were added as cosponsors of S. 1766, a bill to reauthorize the SAFER Act of 2013, and for other purposes.

At the request of Ms. Duckworth, the name of the Senator from Oregon (Mr. Merkley) was added as a cosponsor of S. 1783, a bill to amend the National Voter Registration Act of 1993 to require each State to implement a process under which individuals who are 16 years of age may apply to register to vote in elections for Federal office in the State, to direct the Election Assistance Commission to make grants to States to increase the involvement of minors in public election activities, and for other purposes.

At the request of Mrs. Ernst, the name of the Senator from Nebraska (Mrs. Fischer) was added as a cosponsor of S. 1791, a bill to amend the Act of August 25, 1958, commonly known as the ‘Former Presidents Act of 1958’, with respect to the monetary allowance payable to a former President, and for other purposes.

At the request of Ms. Baldwin, the names of the Senator from Michigan (Ms. Stabenow) and the Senator from New Hampshire (Ms. Hassan) were added as cosponsors of S. 1808, a bill to extend temporarily the Federal Perkins Loan program, and for other purposes.

At the request of Mr. Hatch, the name of the Senator from Illinois (Ms. Duckworth) was added as a cosponsor of S. 1827, a bill to extend funding for the Children’s Health Insurance Program, and for other purposes.

At the request of Mr. Reed, the names of the Senator from New York (Mrs. Gillibrand) and the Senator from Massachusetts (Ms. Warren) were added as cosponsors of S. 1828, a bill to change the date for regularly scheduled general elections for Federal office to the first Saturday and Sunday after the first Friday in November in every even-numbered year.

At the request of Ms. Wyden, the names of the Senator from Wisconsin (Ms. Baldwin), the Senate from Missouri (Mr. Blunt), the Senator from California (Mrs. Feinstein), the Senator from Arizona (Mr. McCain), the Senator from Ohio (Mr. Portman), the Senator from Massachusetts (Ms. Warren) and the Senator from Rhode Island (Mr. Whitehouse) were added as cosponsors of S. Res. 139, a resolution condemning the Government of Iran’s state-sponsored persecution of its Baha’i minority and its continued violation of the International Covenants on Human Rights.

At the request of Mr. Durbin, the names of the Senator from Wisconsin (Ms. Baldwin), the Senator from Oregon (Mr. Wyden) and the Senator from Oregon (Mr. Merkley) were added as cosponsors of S. Res. 250, a resolution condemning horrific acts of violence against Burma’s Rohingya population and calling on Aung San Suu Kyi to play an active role in ending this humanitarian tragedy.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Ms. Collins (for herself and Mr. Nelson):

S. 1835. A bill to provide support to States to establish invisible high risk pool or reinsurance programs; to the Committee on Finance.

Ms. Collins. Mr. President, the cost of health insurance has been a major problem with the Affordable Care Act and with many of the bills which have been advanced to repeal and replace this law.

I rise to introduce the Lower Premiums Through Reinsurance Act of 2017. This bill would provide States with the flexibility and support they need to create State-based reinsurance programs for their individual health insurance markets in order to lower premiums while ensuring continued coverage for people with preexisting conditions.

I am very pleased to be joined by my colleague and friend Senator Bill Nelson introducing this bill. Senator Nelson is a former insurance commissioner who comes to this issue with a wealth of knowledge dating to his experience with Florida’s innovative home-owners’ reinsurance program, developed in the 1990’s in the wake of Hurricane Andrew. For my own part, I spent 5 years in State government overseeing a department which included the Bureau of Insurance.

Over the past 2 weeks, the Senate HELP Committee, on which I am privileged to serve, conducted a round of hearings under the able leadership of Chairman Lamar Alexander and Ranking Member Patty Murray. They
looked at the steps we could take in the near term to stabilize the individual market and help to bring down rates. Reinsurance was frequently mentioned as an option Congress should consider and adopt. Insurance commissioners from Alaska, Pennsylvania, South Carolina, Tennessee, and Washington State all spoke positively of its benefits, as did the five Governors who testified before the committee—three Republicans and two Democrats. Although the witnesses presented different visions on how reinsurance might be structured, they were in broad agreement that reinsurance funding would help stabilize the markets and lower premiums.

The National Association of Insurance Commissioners has recommended that Congress provide reinsurance funding of $15 billion annually to help cover high-cost claims in the individual market. We realize, however, we are living in very tight budget times, and there is an understandable reluctance among many Members to provide that level of Federal funding. We believe the ACA’s section 1332 flowthrough mechanism can effectively leverage that level of funding with a much smaller contribution of Federal dollars. Our bill, therefore, would appropriate $2.25 billion per year in 2018 and 2019, which should be sufficient to leverage $15 billion in total reinsurance funding annually, based on the ratios in Alaska’s recently approved 1332 waiver.

As Alaska’s insurance commissioner told the HELP Committee, next year her State will be able to fund its $55 million reinsurance program with just $6.6 million of its own money—15 percent of the total. The remaining $48.4 million will be provided in Federal flowthrough funding that matches the savings to the Federal Government resulting from the reinsurance program. Let me explain why there would be savings for the Federal Government.

If we are able to reduce the cost of premiums, then the Federal Government will be paying less by way of subsidies to individuals who qualify for those subsidies because they make 400 percent or less of the Federal poverty level.

The bill we are introducing today would allow States to quickly stand up their own reinsurance programs through the Affordable Care Act’s section 1332 waiver process. Broadly speaking, the bill would create a menu of options States could use to design reinsurance programs, which in turn would be eligible for Federal seed money grants. States may also obviously add funds from other sources to the mix.

States that want to set up their own reinsurance pools quickly could do so under our bill by using one of three options designed for expedited review: first, creating a reinsurance program that is an “invisible high-risk pool” along the lines of the Maine and Alaska models, which I will describe in more detail in a moment; second, by showing that their program fits within the parameters of ObamaCare’s “transitional insurance program,” which expired at the end of last year; and third, by submitting what I would call a “me too” application based on another State’s program that has already received approval.

I wish to take a moment to explain why our legislation provides expedited review for different reinsurance pool designs. First, many of the witnesses who testified before our Committee made the point that States would have difficulty quickly coming up with their own design. We acknowledge that, and that is why we provided expedited review for a pool based on the transitional ACA reinsurance program previously in effect and with which States are already familiar.

Second, we know from the experience of the States of Maine and Alaska how effective invisible reinsurance pools can be. A visible pool reduced a projected 40-percent rate increase to just 7 percent this year and is expected to contribute to a 20-percent decline in premiums next year. Maine saw similar results in its program, the Maine Guaranteed Access Reinsurance Association.

The Maine program, which was in operation from 2012 until the end of 2013, covered approximately 3,600 insured individuals, at a cost of approximately $25 million per year, and reduced rates in the individual market by about 20 percent on average.

It is important for us to keep in mind that the individual market is where people who do not have employer-sponsored insurance have to go to buy their insurance. If they make 400 percent or less of the Federal poverty level, they get premium tax credits—subsidies, in other words—from the Federal Government to assist them with the cost. But if they make up to 400 percent of the Federal poverty level, they lose that assistance altogether.

Another problem that is in the ACA is those cliffs, which make no sense whatsoever and really penalize individuals who may work in the trades, such as electricians and plumbers, who don’t know for certain what their income is going to be and can face an unexpected bill where they have to pay back the entire subsidy. But there are others who would not know it and didn’t qualify for the subsidy, but they still have to purchase in the individual market. I think that should be revisited, but that is a speech for another day.

My point is that they would benefit greatly from a 20-percent reduction in the premiums they pay. That was our experience in Maine. On average there was a 20-percent reduction in premiums when the reinsurance pool was in effect. The reinsurance pool even generated a surplus of $5 million during its 18 months of operation.

The Maine pool was successful for several reasons. First, risks were ceded up front so insurers could not wait until a policyholder developed an unexpected serious health condition to decide who was going to be in the high-risk pool and who was not. The rules also required policies for individuals who suffered from certain high-risk conditions to be automatically ceded to the pool on enrollment.

I note that when an insurer made the decision to cede to the pool the risk for a particular policyholder, or if it was an automatic ceding, 90 percent of the premiums from that policyholder went to the reinsurance pool to help finance it.

Second—and this is important—the program was invisible to both individuals who were insured through it and to healthcare providers. Individuals were covered seamlessly and enjoyed the same benefits as nonpool enrollees. Likewise, healthcare providers did not know whose policy had been ceded to the pool.

Third—and also very important—Maine’s program operated with the full set of consumer protection guarantors set by the ACA, including guaranteed issue, guaranteed renewability, and prohibitions against taking preexisting conditions or health status into account in issuing policies or setting rates.

Fourth, the Maine program was designed to provide true reinsurance. Insurers paid the first $7,500 in costs, plus 10 percent of the next $25,000. After that threshold, the pool picked up the rest of the costs.

Finally, Maine’s program was backed by a stable funding source. In addition to receiving 90 percent of the premiums for ceded policies, it also received funding that was assessed at a rate of $4 per person, per month, on all healthcare policies.

While Alaska’s reinsurance program differs from Maine’s in some respects, the success of both models shows the promise and proves the promise of invisible reinsurance pools, and that is why our bill includes invisible reinsurance pools as an option for expedited review and approval.

Open enrollment in the ACA exchanges begins November 1, just about 6 weeks from now. In just days, CMS is expected to finalize the premiums insurers will charge in the ACA exchanges next year. While I personally remain ever hopeful that a bipartisan agreement on a targeted, consensus approach to stabilizing the markets and reducing premiums can still be reached, clearly, we have very little time. Beyond providing cost-sharing reduction funding, there is no step that would be more powerful in stabilizing markets and reducing premiums than providing reinsurance.

This Chamber is deeply divided on what to do on healthcare policy, but the HELP Committee has come together and build on the good work that the leaders of the HELP Committee have done—work that more than 60
S. 1845

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 “Lead-Safe Housing for Kids Act of 2017”.

SEC. 2. AMENDMENTS TO THE LEAD-BASED PAINT POISONING PREVENTION ACT.

Section 302(a) of the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. 4822(a)) is amended—

(1) by redesignating paragraph (4) as paragraph (5); and

(2) by inserting after paragraph (3) the following:

“(4) ADDITIONAL PROCEDURES FOR FAMILIES WITH CHILDREN UNDER THE AGE OF 6.—

“(A) RISK ASSESSMENT.—

“(1) DEFINITION. In this subparagraph, the term ‘covered housing’—

“(i) means housing receiving Federal assistance described in paragraph (1) that was constructed prior to 1978; and

“(ii) does not include—

“(aa) single-family housing covered by an application for mortgage insurance under the National Housing Act (12 U.S.C. 1701 et seq.); or

“(bb) multi-family housing that—

“(B) RISK ASSESSMENT.—

“(1) IN GENERAL.—Except as provided in paragraphs (2) through (4), the amendments made by this section shall apply to articles removed (as defined in section 5702(j) of the Internal Revenue Code of 1986) after the last day of the month which includes the date of the enactment of this Act.

“(2) DISCRETE SINGLE-USE UNITS AND PROCESSED TOBACCO.—The amendments made by subsections (b)(1), (b)(2), and (d) shall apply to articles removed after December 31, 2017.

“(3) LARGE CIGARS.—The amendments made by subsection (c) shall apply to articles removed after December 31, 2017.

“(4) TOBACCO PRODUCTS.—The amendments made by subsection (e)(1) shall apply to products removed after the last day of the month which includes the date that the Secretary of the Treasury (or the Secretary of the Treasury’s delegate) issues final regulations establishing the level of tax for such product.

By Mr. DURBIN (for himself, Mr. SCOTT, Mr. MENENDEZ, Mr. YOUNG, Mr. DONELLY, and Ms. DUCKWORTH):

S. 1845. A bill to amend the Lead-Based Paint Poisoning Prevention Act to provide for additional procedures for families with children under the age of 6, and for other purposes; to the Committee on Banking, Housing, and Urban Affairs.

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. 1845

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 “Lead-Safe Housing for Kids Act of 2017”.

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By Mr. DURBIN (for himself, Mr. SCOTT, Mr. MENENDEZ, Mr. YOUNG, Mr. DONELLY, and Ms. DUCKWORTH):
“(AA) is covered by an application for mortgage insurance under the National Housing Act (12 U.S.C. 1701 et seq.); and
“(BB) does not receive any other Federal housing assistance.

“(ii) Regulations.—Not later than 180 days after the date of enactment of the Lead-Safe Housing for Kids Act of 2017, the Secretary shall promulgate regulations that—

“(I) require the owner of covered housing in which a family with a child of less than 6 years of age will reside or is expected to reside to conduct an initial risk assessment for lead-based paint hazards—

“(aa) in the case of covered housing receiving tenant-based rental assistance under section 8 of the United States Housing Act of 1937 (42 U.S.C. 1437f), not later than 15 days after the date on which the family and the owner submit a request for approval of a tenancy;

“(bb) in the case of covered housing receiving public housing assistance under the United States Housing Act of 1937 (42 U.S.C. 1437 et seq.) or project-based rental assistance under section 8 of the United States Housing Act of 1937 (42 U.S.C. 1437f), not later than 15 days after the date on which a family with a child of less than 6 years of age that occupies a dwelling unit in covered housing in which lead-based paint hazards were identified, but not controlled in accordance with regulations promulgated under section 402 or 404 of the Toxic Substances Control Act (15 U.S.C. 2682, 2684a), and

“(cc) covered housing that has not been describes in item (aa) or (bb), not later than a date established by the Secretary;

“(III) require that, if lead-based paint hazards are identified by an initial risk assessment conducted under subclause (I), the owner of the covered housing shall—

“(aa) not later than 30 days after the date on which the initial risk assessment is conducted, control the lead-based paint hazards, including achieving clearance in accordance with regulations promulgated under section 402 or 404 of the Toxic Substances Control Act (15 U.S.C. 2682, 2684a), as applicable; and

“(bb) provide notice to all residents in the covered housing affected by the initial risk assessment, and provide notice in the common areas of the covered housing, that lead-based paint hazards were identified and will be controlled within the 30-day period described in item (aa);

“(IV) provide that there shall be no extension of the 30-day period described in subclause (I)(aa);

“(V) provide that—

“(I) if the owner of the covered housing submits to the Secretary documentation—

“(aa) that the owner conducted a risk assessment for lead-based paint hazards during the 12-month period preceding the date on which the family is expected to reside in the covered housing; and

“(bb) of any clearance examinations of lead-based paint hazard control work resulting from the risk assessment described in item (aa);

“(II) from which any lead-based paint hazards that are identified in the dwelling unit in the covered housing in which the family will reside or is expected to reside;

“(III) which is expected to be occupied by a family with a child of less than 6 years of age that occupies a dwelling unit that has no lead-based paint hazards; and

“(IV) in accordance with any other standard or exception the Secretary deems appropriate based on health-based standards.

“(I) Regulations.—Not later than 180 days after the date of enactment of the Lead-Safe Housing for Kids Act of 2017, the Secretary shall promulgate regulations to provide that a family with a child of less than 6 years of age that occupies a dwelling unit in covered housing in which lead-based paint hazards were identified, but not controlled in accordance with regulations required under clause (ii), may relocate on an emergency basis and without placement on any waitlist, penalty (including rent payments to be made for that dwelling unit), or lapse in assistance to—

“(i) a dwelling unit that was constructed in 1978 or later; or

“(ii) another dwelling unit in covered housing that has no lead-based paint hazards.”

SEC. 3. AUTHORIZATION OF APPROPRIATIONS.

There is authorized to be appropriated to carry out the amendments made by section 2 such sums as may be necessary for each of fiscal years 2018 through 2022.

By Mr. DAINES (for himself and Ms. HASSEAN): S. 1847. I am pleased to introduce the Homeland Security Act of 2002 to ensure that the needs of children are considered in homeland security, trafficking, and disaster recovery planning, and for other purposes; to the Committee on Homeland Security and Governmental Affairs.

Mr. DAINES. Mr. President, the Department of Homeland Security, DHS, is tasked with keeping the American public safe in the homeland. Its mission ranges from thwarting terrorist attacks to responding to natural and manmade disasters, from interrogating the movement of illicit drugs at the border to combating human trafficking and protecting its victims. Nearly one-quarter of the population within our borders are children. They have unique needs, and we must ensure those needs are met in the face of threat and in recovery.

For example, when children are stranded at school because of a terrorist attack or a natural disaster, they need a planned route and means to get home safely. A child is caught up in a drug cartel and used as a trafficking mule—the child is a victim, not a criminal. He needs help breaking the addiction. An adolescent, promised a better life, has her passport stolen and forced to sell herself. She needs help escaping her captors and healing.

The recent tragedies of wildfires in Montana and across the Northwest and Hurricanes Harvey and Irma are all too recent reminders that we need to plan for the needs of children in both building resiliency and responding to disasters. That is why I am introducing the Homeland Security for Children Act. This legislation would simply ensure that DHS’ Strategic Plan, Policy, and Plans include input from organizations representing the needs of children when soliciting stakeholder feedback and developing policies. Further, a technical expert at the Federal Emergency Management Agency would be authorized to lead its external collaboration and policy developments to integrate the needs of children into its activities to prepare for and respond to threats.

I thank Senator HASSEAN for being an original co-sponsor of this bill, as well as Representative DONALD PAYNE of New Jersey for leading in the House of Representatives. I ask my Senate colleagues to join us in support of this important initiative.

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

S. 1847

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 “Homeland Security for Children Act”.

SEC. 2. RESPONSIBILITIES OF THE UNDER SECRETARY FOR STRATEGY, POLICY, AND PLANS.

Section 709(c)(6) of the Homeland Security Act of 2002 (6 U.S.C. 349(c)(6)) is amended by inserting, including by appointing a technical expert, who may consult with relevant outside organizations and experts, as necessary, to coordinate such integration, as necessary.”.

SEC. 3. TECHNICAL EXPERT AUTHORIZED.

Section 503(b)(2) of the Homeland Security Act of 2002 (6 U.S.C. 313(b)(2)) is amended—

(1) in subparagraph (G), by striking “and” at the end;

(2) in subparagraph (H), by striking the period at the end and inserting “;”;

(3) by adding at the end the following:

“(I) identify and integrate the needs of children into activities to prepare for, protect against, respond to, recover from, and mitigate against the risk of natural disasters, acts of terrorism, and other manmade disasters, including catastrophic incidents, including by appointing a technical expert, who may consult with relevant outside organizations and experts, as necessary, to coordinate such integration, as necessary.”.

SEC. 4. REPORT.

Not later than 1 year after the date of enactment of this Act and annually thereafter for 4 years, the Under Secretary for Strategy, Policy, and Plans of the Department of Homeland Security shall submit to the Committee on Homeland Security and Governmental Affairs of the Senate and the Committee on Homeland Security of the House of Representatives a report describing the efforts the Department has undertaken to review and incorporate feedback from organizations representing the needs of children in the Department’s policy and program integration, as required by paragraph (6) of section 709(c) of the Homeland Security Act of 2002 (6 U.S.C. 349(c)) (as added by section 2 of this Act), and the effect of that review and incorporation on the efforts of the Department to combat human trafficking and drug trafficking and respond to natural and manmade disasters, including incidents on the border.

(1) The designation of any individual responsible for carrying out the duties under such paragraph (6).

(2) Any review, formal or informal, of Department policies, programs, or activities to assess the suitability of the policies, programs, or activities for children and whether feedback from organizations representing the needs of children should be reviewed and incorporated.
(3) Any review, change, modification, or promulgation of Department policies, programs, or activities to ensure that the policies, programs, or activities are appropriate for children and families; and
(4) Coordination with organizations or experts outside the Department, under such paragraph (6), conducted to inform any review, change, modification, or promulgation of policies, programs, or activities described in paragraph (2) or (3) of this subsection.

SUBMITTED RESOLUTIONS

SENATE RESOLUTION 263—EXPRESSING THE SENSE OF THE SENATE THAT PRESIDENT JUAN MANUEL SANTOS HAS RESTRUCTURED AND SIGNIFICANTLY STRENGTHENED THE ENVIRONMENTAL SECTOR AND MANAGEMENT CAPACITY OF THE COLOMBIAN GOVERNMENT AND HAS LED THE COUNTRY TO BECOME A GLOBAL ENVIRONMENTAL LEADER

Mr. LEAHY submitted the following resolution; which was referred to the Committee on Foreign Relations:

Mr. LEAHY. Mr. President, today I am introducing a sense-of-senate resolution commending Colombian President Juan Manuel Santos for his extraordinary leadership in protecting Colombia’s natural environment. Anyone who has lived in, traveled to, or read about Colombia knows it is a country of exceptional beauty and biological diversity. It is also home to many indigenous groups who have played an indispensible role as environmental stewards of their territories. During the years of his Presidency, President Santos’s efforts have not only established Colombia as a global environmental leader, they will provide lasting benefits to future generations and to the international community.

On September 21, President Santos will be honored by the National Geographic Society for his efforts to protect Colombia’s natural environment, and I believe the U.S. Senate should also recognize his achievements.

Whereas Colombia is one of the world’s “megadiverse” countries, hosting close to 10 percent of the planet’s biodiversity and producing an estimated 15 percent of the world’s oxygen;
Whereas Colombia occupies—
(1) first place worldwide in the number of birds and orchids;
(2) second place in species of plants, amphibians, butterflies and fresh water fish;
(3) third place in species of palm trees and reptiles;
(4) fourth place in biodiversity of mammals; and
(5) fifth place in marine and continental ecosystems;
Whereas Colombia’s extraordinary mix of ecological, climatic, and biological components are dispersed among its 311 ecosystems and 59 protected areas;
Whereas Colombia’s biodiversity is at risk, mainly because of habitat loss, urbanization, illicit drug cultivation and production, mining and other extractive industries, deforestation, and overfishing;
Whereas on the day of his inauguration in 2010, and continuously since that date, President Santos has made environmental management and resource conservation top priorities of the Colombian Government;
Whereas since his inauguration, 14,800,000 hectares have been incorporated into the National System of Protected Areas, including Chiribiquete National Park, C oralies de Profundidad National Park, Arcandí, Playas del Playona Wildlife Sanctuaries, and Bahía Portete – Kaurre National Natural Park; whereas Colombia now has 26,400,000 hectares incorporated into the National System of Protected Areas;
Whereas the Colombian Government approved the establishment and expansion of indigenous reserves to protect indigenous cultures and curtail deforestation of critical ecosystems;
Whereas the Colombian Government adopted measures to reduce carbon emissions resulting from deforestation in the Colombian Amazon;
Whereas the Colombian Government developed a national strategy to combat climate change;
Whereas, through the Visión Amazonia initiative, the Colombian Government has set an ambitious goal of achieving zero net deforestation in the Colombian Amazon by 2020;
Whereas for the first time in 2016, the Colombian Government completed a greenhouse gas emissions inventory that includes data from both department and municipal levels; and
Whereas Colombia played a primary role in the Rio+20 Conference agenda for a green economy and continues to be an active member in the international environmental dialogue:
Now, therefore, be it
Resolved, That it is the sense of the Senate that—
(1) President Juan Manuel Santos has restructured and significantly strengthened the environmental sector and management capacity of the Colombian Government and has led the country to become a global environmental leader;
(2) President Santos has enhanced public awareness of the importance of protecting indigenous cultures and of the indispensable role of indigenous people in protecting the environment;
(3) President Santos’ efforts to protect Colombia’s biodiversity will provide lasting benefits to future generations of Colombians and to the international community; and
(4) President Santos should be recognized and commended for these efforts and achievements.

SENATE RESOLUTION 264—DESIGNATING SEPTEMBER 2017 AS “NATIONAL KINSHIP CARE MONTH”

Mr. WYDEN (for himself, Mr. HATCH, Mr. CASEY, Mr. KAIN, and Ms. KUCHAR) submitted the following resolution; which was referred to the Committee on the Judiciary:

That the Senate—
(A) to support vulnerable families;
(B) to invest in prevention and reunification services; and
(C) to ensure that extended family members who take on the role of kinship caregivers receive the necessary support.

Whereas individuals who are 65 years of age or older (referred to in this preamble as “older adults”) are the fastest growing segment of the population in the United States and the number of older adults in the United States will increase from 46,200,000 in 2014 to 82,300,000 in 2040;
Whereas kinship care is a national resource that provides loving homes for children at risk; whereas kinship caregivers face daunting challenges to keep countless children from entering foster care; whereas the Senate is proud to recognize the many kinship care families in which a child is raised by grandparents or other relatives;
Whereas the Senate wishes to honor the many kinship caregivers who throughout the history of the United States have provided loving homes for parentless children; whereas National Kinship Care Month provides an opportunity to urge people in every State to join in recognizing and celebrating kinship caregiving families and the tradition of families in the United States to help raise children; and whereas much remains to be done to ensure that all children have a safe, loving, nurturing, and permanent family, regardless of their special needs: Now, therefore, be it
Resolved, That the Senate—
(1) designates September 2017 as “National Kinship Care Month’’;
(2) encourages Congress to implement policies to improve the lives of vulnerable children and families;
(3) honors the commitment and dedication of kinship caregivers and the advocates and allies who work tirelessly to provide assistance and services to kinship caregiving families; and
(4) reaffirms the need to continue working to improve the outcomes of all vulnerable children through programs designed—
(A) to support vulnerable families;
(B) to invest in prevention and reunification services; and
(C) to ensure that extended family members who take on the role of kinship caregivers receive the necessary support.

SENATE RESOLUTION 265—DESIGNATING SEPTEMBER 22, 2017, AS “NATIONAL FALLS PREVENTION AWARENESS DAY” TO RAISE AWARENESS AND ENCOURAGE THE PREVENTION OF FALLS AMONG OLDER ADULTS

Ms. COLLINS (for herself and Mr. CASEY) submitted the following resolution; which was considered and agreed to:

Whereas individuals who are 65 years of age or older (referred to in this preamble as “older adults”) are the fastest growing segment of the population in the United States and the number of older adults in the United States will increase from 46,200,000 in 2014 to 82,300,000 in 2040;
Whereas more than 1 of 4 older adults in the United States falls each year; 
Whereas falls are the leading cause of both fatal and nonfatal injuries among older adults; 
Whereas, in 2014, approximately 2,800,000 older adults were treated in hospital emergency departments for fall-related injuries and many of those older adults were subsequently hospitalized; 
Whereas, in 2014, more than 27,000 older adults died from injuries related to unintentional falls, and death rates from falls of older adults in the United States have risen sharply in the last decade; 
Whereas, in 2015, the total direct medical cost of fall-related injuries for older adults, adjusted for inflation, was $31,000,000,000; 
Whereas, if the rate of increase in falls is not slowed, the annual cost of fall injuries will reach $67,700,000,000 by 2029; and 
Whereas evidence-based programs reduce falls by utilizing cost-effective strategies, such as exercise programs to improve balance and strength, medication management, vision improvement, reduction of home hazards, and fall prevention education: Now, therefore, be it
Resolved, That the Senate—
(1) designates September 22, 2017, as “National Falls Prevention Awareness Day”;
(2) recognizes that there are proven, cost-effective falls prevention programs and policies; 
(3) commends the 72 member organizations of the Falls Free Coalition and the falls prevention coalitions in 43 States and the District of Columbia for their efforts to work together to increase education and awareness about preventing falls among older adults;
(4) encourages businesses, individuals, Federal, State, and local governments, the public health community, and health care providers to work together to raise awareness of falls in an effort to reduce the incidence of falls among older adults in the United States; 
(5) recognizes the Centers for Disease Control and Prevention for its work developing and evaluating interventions for all members of health care teams to make falls prevention a routine part of clinical care;
(6) recognizes the Administration for Community Living for its work to promote access to programs and services in communities across the United States;
(7) encourages State health departments and State units on aging, which provide significant leadership in reducing injuries and related healthcare costs by collaborating with organizations and individuals, to reduce falls among older adults; and 
(8) encourages experts in the field of falls prevention to share their best practices so that their success can be replicated by others.

AUTHORITY FOR COMMITTEES TO MEET
Mr. Burr. Mr. President, I have 10 requests for committees to meet during today’s session of the Senate. They have the approval of the Majority and Minority leaders. 
Pursuant to Rule XXVI, paragraph 5(a), of the Standing Rules of the Senate, the following committees are authorized to meet during today’s session of the Senate:
COMMITTEE ON AGRICULTURE, NUTRITION, AND FORESTRY The Committee on Agriculture, Nutrition, and Forestry is authorized to meet during the session of the Senate on Tuesday, September 19, 2017 at 9:30 a.m., in 216 Hart Senate Office Building, in order to conduct a hearing to consider the nominations of Ted McKinney and Stephen Censky to the U.S. Department of Agriculture.
COMMITTEE ON ARMED SERVICES The Committee on Armed Services is authorized to meet during the session of the Senate on Tuesday, September 19, 2017, at 10 a.m., in open session, to receive testimony on recent United States Navy accidents at sea.
COMMITTEE ON COMMERCE, SCIENCE, AND TRANSPORTATION The Committee on Commerce, Science, and Transportation is authorized to meet during the session of the Senate on Tuesday, September 19, 2017 at 10:30 a.m. in room 253 of the Russell Senate Office Building.
COMMITTEE ON ENERGY AND NATURAL RESOURCES The Senate Committee on Energy and Natural Resources is authorized to meet during the session of the Senate in order to hold a Business Meeting on Tuesday, September 19, 2017, beginning at 9:30 a.m. in Room 366 of the Dirksen Senate Office Building in Washington, DC.
COMMITTEE ON ENERGY AND NATURAL RESOURCES The Senate Committee on Energy and Natural Resources is authorized to meet during the session of the Senate in order to hold a hearing on Tuesday, September 19, 2017 at 10 a.m. in Room 366 of the Dirksen Senate Office Building in Washington, DC.
COMMITTEE ON FINANCE The Committee on Finance is authorized to meet during the session of the Senate on Tuesday, September 19, 2017 at 10 a.m., in 215 Dirksen Senate Office Building, to conduct a hearing entitled “Business Tax Reform.”
COMMITTEE ON FOREIGN RELATIONS The Committee on Foreign Relations is authorized to meet during the session of the Senate on Tuesday, September 19, 2017 at 10:15 a.m., to hold a hearing entitled “Nominations.”
COMMITTEE ON HEALTH, EDUCATION, LABOR, AND PENSIONS The Committee on Health, Education, Labor, and Pensions is authorized to meet during the session of the Senate on Tuesday, September 19, 2017 at 10 a.m., to hold a business meeting.”
COMMITTEE ON FOREIGN RELATIONS The Committee on Foreign Relations is authorized to meet during the session of the Senate on Tuesday, September 19, 2017 at 10:15 a.m., to hold a hearing entitled “Nominations.”
COMMITTEE ON HEALTH, EDUCATION, LABOR, AND PENSIONS The Committee on Health, Education, Labor, and Pensions is authorized to meet during the session of the Senate, in order to conduct a hearing entitled “Nominations” on Tuesday, September 19, 2017, at 10 a.m., in room 430 of the Dirksen Senate Office Building.
SELECT COMMITTEE ON INTELLIGENCE The Select Committee on Intelligence is authorized to meet during the session of the 115th Congress of the U.S. Senate on Tuesday, September 19, 2017 at 2:30 p.m. in room SH-219 of the Hart Senate Office Building to hold a closed briefing.

NATIONAL DEFENSE AUTHORIZATION ACT FOR FISCAL YEAR 2018
Mr. McConnell. Mr. President, I ask unanimous consent that notwithstanding the passage of H.R. 2810, as amended, that amendment No. 545 be considered and adopted.

The PRESIDING OFFICER. Without objection, it is so ordered.

The amendment (No. 545) was agreed to as follows:
(Purpose: To strike the section relating to the treatment of storm water collection systems as utility systems)
Strike section 2814.

FINANCIAL STABILITY OVERSIGHT COUNCIL INSURANCE MEMBER CONTINUITY ACT
Mr. McConnell. Mr. President, I ask unanimous consent that the Senate proceed to the immediate consideration of H.R. 3110, which was received from the House.

The PRESIDING OFFICER. The clerk will report the bill by title.

The senior assistant legislative clerk read as follows:
A bill (H.R. 3110) to amend the Financial Stability Act of 2010 to modify the term of the independent member of the Financial Stability Oversight Council.

There being no objection, the Senate proceeded to consider the bill.

Mr. McConnell. Mr. President, I ask unanimous consent that the bill be considered read a third time and passed and the motion to reconsider be considered made and laid upon the table.

The PRESIDING OFFICER. Without objection, it is so ordered.

The bill (H.R. 3110) was ordered to a third reading, was read the third time, and passed.

NATIONAL FALLS PREVENTION AWARENESS DAY
Mr. McConnell. Mr. President, I ask unanimous consent that the Senate proceed to the consideration of S. Res. 265, submitted earlier today.

The PRESIDING OFFICER. The clerk will report the resolution by title.

The senior assistant legislative clerk read as follows:
A resolution (S. Res. 265) designating September 22, 2017, as “National Falls Prevention Awareness Day” to raise awareness and encourage the prevention of falls among older adults.

There being no objection, the Senate proceeded to consider the resolution.

Mr. McConnell. Mr. President, I ask unanimous consent 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. Without objection, it is so ordered.
The resolution (S. Res. 265) was agreed to. The preamble was agreed to. (The resolution, with its preamble, is printed in today's RECORD under "Submitted Resolutions".)

ORDERS FOR THURSDAY, SEPTEMBER 21, 2017, AND MONDAY, SEPTEMBER 25, 2017

Mr. McCONNELL. Mr. President, I ask unanimous consent that when the Senate completes its business today, it adjourn to reconvene for a formal session only, with no business being conducted, on Thursday, September 21, at 8:30 a.m.; I further ask that when the Senate adjourns on Thursday, September 21, it next convene at 4 p.m. on Monday, September 25; further, that following the prayer and pledge, the morning hour be deemed expired, the Journal of proceedings be approved to date, the time for the two leaders be reserved for their use in 6 p.m. and morning business be closed; further, that following leader remarks, the Senate proceed to executive session and resume consideration of the Emanuel nomination, with the time until 5:30 p.m. equally divided between the two leaders or their designees; finally, that at 5:30 p.m., all postcloture time be expired and the Senate vote on the confirmation of the Emanuel nomination with no intervening action or debate, and, if confirmed, the motion to reconsider be considered made and laid upon the table, the President be immediately notified of the Senate's action, and the Senate then resume legislative session. The PRESIDING OFFICER. Without objection, it is so ordered.

ORDER FOR ADJOURNMENT

Mr. MCCONNELL. Mr. President, if there is no further business to come before the Senate, I ask unanimous consent that it stand adjourned under the previous order, following the remarks of Senator BLUMENTHAL.

The PRESIDING OFFICER. Without objection, it is so ordered. The Senator from Connecticut.

HEALTHCARE

Mr. BLUMENTHAL. Mr. President, I thank the majority leader for yielding me this time before we close business today, as the last speaker of the day.

Let me first of all say how deeply we feel about folks who have been affected by these mammoth storms in the Gulf Coast, in Florida, and in the Virgin Islands and Puerto Rico, as well as others elsewhere. Our hearts and prayers are with them.

I am here today to talk about another potential disaster to our country, although it is of a completely different kind and not a physical disaster made by nature but a disaster potentially of our own making—one that can be prevented and avoided. I am horrified that I am here again, fighting back again, against a proposal that would devastate the health and finances of so many families in Connecticut and around the country.

This proposal—the so-called Graham-Cassidy bill—is cruel beyond measure. It is undoubtedly the most extreme proposal we have seen from my Republican colleagues in their political crusade to destroy the successes of the Affordable Care Act. For ill or good and irresponsible to pretend that my Republican colleagues continue to do that, any proposal that cuts billions of dollars from Medicaid and decimates important Affordable Care Act provisions protecting people with preexisting conditions and high medical costs will somehow result in a better healthcare system. In fact, it will vastly diminish and in some respects destroy that system.

The Republican obsession with repealing the Affordable Care Act and gutting Medicaid really has to end, and it has to end today.

My constituents in Connecticut made themselves heard loud and clear in saying that past proposals were sickening attempts to rip us away from the progress we have made in providing better healthcare to many people. Those folks who came to town meetings and emergency field hearings, who wrote, who phoned, who made their views known, were the catalyst in defeating these ill-advised efforts before. I can assure you that, once again, they will be heard. They will make themselves heard. They will, once again, guarantee its defeat.

Under this lethal proposal, hundreds of billions of dollars will be cut from Medicaid. Those severe cuts will cause Connecticut more than $2 billion by 2026. In 2027 alone, without the reauthorization of funds, Connecticut would lose $4 billion. In 2027 alone, $4 billion would be lost to Connecticut without reauthorization. Those are not just dollars, those are lives. They are hundreds of thousands of lives.

This bill would end the patient protection that countless Americans have come to rely on in their oftentimes lifesaving care. States would allow insurance companies to reimpose annual caps and lifetime limits; insurers could decide to drop essential health benefits, like maternity care or mental health services, for people with preexisting conditions should be weakened, diminished, eviscerated. I question whether they can look at Conner or his family and care for him when he is at his most vulnerable. That is the only way he will have a fair chance at life. This bill, to put it mildly, deprives him of that fair chance.

So I question whether my Republican colleagues can look Conner or his family in the eye and explain why protections for children with preexisting conditions should be weakened, diminished, eviscerated. I question whether they can look at Conner's smile and tell him why Medicaid will be eliminated. This is the program that one day will make sure he has everything he needs to live. It is a program that should be enhanced, not cut by hundreds of billions of dollars.

Tell his parents why the insufficient or non-existent emergency funds they have proposed to replace Medicaid will run out in 10 years, as a shadow of Medicaid that you have left behind goes dark. See whether Conner's family cares about your legislation. See if your empty promises leave them reasurred.

I can tell you, Conner's parents are two of the kindest, most wonderful people you will ever meet. They are also among the hardest working. They worry about countless things every single day. They worry about Conner's slowing body and medical research that could save him before that pernicious disease takes his life. They worry
about his independence. They worry about his two brothers and the toll this awful disease will have on them. They worry about those stairs—the ones that will have a lift. I promise you, Conner’s parents worry nonstop. All of us worry about our children. They worry about Conner unceasingly.

I will say it again. I am ready to work with all my colleagues on solutions to the healthcare problems our country faces. They are urgent and important—critically important—to address. I refuse to stand silently and let this cruel proposal give Conner’s family even more reason to worry.

We as a country are better than these reprehensible proposals—first, repeal and replace; now, Graham-Cassidy. They are all different versions of TrumpCare that is a catastrophe which will lead to a humanitarian crisis. This heartless proposal should be put behind us. We should work together as our colleagues Senators Alexander and Murray are doing and, at least for the moment, give Conner some assurance that we are making things better for him, not worse, and the parents who worry about their little boy know that at least we are moving in the right direction, not rolling back the progress we have made.

Mr. President, I yield the floor.

ADJOURNMENT UNTIL THURSDAY, SEPTEMBER 21, 2017, AT 8:30 A.M.

The PRESIDING OFFICER. The Senate stands adjourned until 8:30 a.m. on Thursday.

Thereupon, the Senate, at 7:14 p.m., adjourned until Thursday, September 21, 2017, at 8:30 a.m.
Chamber Action

Routine Proceedings, pages S5825–S5869

Measures Introduced: Twenty-one bills and three resolutions were introduced, as follows: S. 1829–1849, and S. Res. 263–265.

Measures Reported:

S. 396, to make technical amendments to certain marine fish conservation statutes. (S. Rept. No. 115–160)

Report to accompany S. 1393, to streamline the process by which active duty military, reservists, and veterans receive commercial driver’s licenses. (S. Rept. No. 115–161)

H.R. 390, To provide emergency relief for victims of genocide, crimes against humanity, and war crimes in Iraq and Syria, for accountability for perpetrators of these crimes, with an amendment in the nature of a substitute.

S. Res. 168, supporting respect for human rights and encouraging inclusive governance in Ethiopia, with an amendment in the nature of a substitute and with an amended preamble.

S. 1848, to amend the Trafficking Victims Protection Act of 2000 to modify the criteria for determining whether countries are meeting the minimum standards for the elimination of human trafficking.

Measures Passed:

Financial Stability Oversight Council Insurance Member Continuity Act: Senate passed H.R. 3110, to amend the Financial Stability Act of 2010 to modify the term of the independent member of the Financial Stability Oversight Council.

National Falls Prevention Awareness Day: Senate agreed to S. Res. 265, designating September 22, 2017, as “National Falls Prevention Awareness Day” to raise awareness and encourage the prevention of falls among older adults.

National Defense Authorization Act—Agreement: A unanimous-consent agreement was reached providing that notwithstanding the passage of H.R. 2810, to authorize appropriations for military activities of the Department of Defense, for military construction, and for defense activities of the Department of Energy, to prescribe military personnel strengths for such fiscal year, as amended; that McConnell (for McCain) Amendment No. 545, to strike the section relating to the treatment of storm water collection systems as utility systems, be considered and adopted.

Emanuel Nomination—Agreement: Senate continued consideration of the nomination of William J. Emanuel, of California, to be a Member of the National Labor Relations Board.

During consideration of this nomination today, Senate also took the following action:

By 49 yeas to 44 nays (Vote No. 202), Senate agreed to the motion to close further debate on the nomination.

A unanimous-consent agreement was reached providing that at approximately 4 p.m. on Monday, September 25, 2017, Senate resume consideration of the nomination, post-cloture, with the time until 5:30 p.m. equally divided between the two Leaders or their designees; and that at 5:30 p.m., all post-cloture time be expired and Senate vote on confirmation of the nomination with no intervening action or debate.

Nomination Confirmed: Senate confirmed the following nomination:

By 50 yeas to 47 nays (Vote No. EX. 201), Noel J. Francisco, of the District of Columbia, to be Solicitor General of the United States.

During consideration of this nomination today, Senate also took the following action:

By 49 yeas to 47 nays (Vote No. 200), Senate agreed to the motion to close further debate on the nomination.

Executive Communications:

Petitions and Memorials:

Additional Cosponsors:

Statements on Introduced Bills/Resolutions:

Additional Statements:

Authorities for Committees to Meet:

Page S5867
Record Votes: Three record votes were taken today. 
(Total—202) Pages S5831, S5835, S5842

Adjournment: Senate convened at 10 a.m. and adjourned at 7:14 p.m., until 8:30 a.m. on Thursday, September 21, 2017. (For Senate’s program, see the remarks of the Majority Leader in today’s Record on page S5868.)

Committee Meetings

Committees not listed did not meet

NOMINATIONS

Committee on Agriculture, Nutrition, and Forestry: Committee concluded a hearing to examine the nominations of Stephen Censky, of Missouri, to be Deputy Secretary, who was introduced by Senator Thune, and Ted McKinney, of Indiana, to be Under Secretary for Trade and Foreign Agricultural Affairs, who was introduced by Senator Donnelly, both of the Department of Agriculture, after the nominees testified and answered questions in their own behalf.

RECENT NAVY INCIDENTS AT SEA

Committee on Armed Services: Committee concluded a hearing to examine recent Navy incidents at sea, after receiving testimony from Richard V. Spencer, Secretary of the Navy, and Admiral John M. Richardson, USN, Chief of Naval Operations, both of the Department of Defense; and John H. Pendleton, Director, Defense Force Structure and Readiness Issues, Government Accountability Office.

STOP ENABLING SEX TRAFFICKERS ACT

Committee on Commerce, Science, and Transportation: Committee concluded a hearing to examine S. 1693, to amend the Communications Act of 1934 to clarify that section 230 of that Act does not prohibit the enforcement against providers and users of interactive computer services of Federal and State criminal and civil law relating to sex trafficking, after receiving testimony from California Attorney General Xavier Becerra, Sacramento; Eric Goldman, Santa Clara University School of Law, Santa Clara, California; Yiota G. Souras, The National Center for Missing and Exploited Children, Alexandria, Virginia; and Abigail Slater, Internet Association, Washington, D.C.

BUSINESS MEETING

Committee on Energy and Natural Resources: Committee ordered favorably reported the nominations of Richard Glick, of Virginia, and Kevin J. McIntyre, of Virginia, both to be a Member of the Federal Energy Regulatory Commission, and David S. Jonas, of Virginia, to be General Counsel, all of the Department of Energy, and Joseph Balash, of Alaska, to be an Assistant Secretary, and Ryan Douglas Nelson, of Idaho, to be Solicitor, both of the Department of the Interior.

VEGETATION MANAGEMENT REQUIREMENTS

Committee on Energy and Natural Resources: Committee concluded a hearing a hearing to examine the vegetation management requirements for electricity assets located on Federal lands, including Section 2310 of S. 1460, to provide for the modernization of the energy and natural resources policies of the United States, and H.R. 1873, to amend the Federal Land Policy and Management Act of 1976 to enhance the reliability of the electricity grid and reduce the threat of wildfires to and from electric transmission and distribution facilities on Federal lands by facilitating vegetation management on such lands, after receiving testimony from Glenn Casamassa, Associate Deputy Chief, National Forest System, Department of Agriculture; John Ruhs, Acting Deputy Director for Operation, Bureau of Land Management, Department of the Interior; Mark C. Hayden, Missoula Electric Cooperative, Missoula, Montana; Scott Miller, The Wilderness Society, Denver, Colorado; and Andrew Rable, Arizona Public Service Company, Phoenix, on behalf of the Edison Electric Institute.

BUSINESS MEETING

Committee on Finance: Committee concluded a hearing to examine business tax reform, after receiving testimony from Scott A. Hodge, Tax Foundation, Donald B. Marron, Urban Institute and Urban-Brookings Tax Policy Center, and Jeffrey D. DeBoer, The Real Estate Roundtable, all of Washington, D.C.; and Troy K. Lewis, American Institute of Certified Public Accountants, Provo, Utah.

BUSINESS MEETING

Committee on Foreign Relations: Committee ordered favorably reported the following business items:

H.R. 390, to provide emergency relief for victims of genocide, crimes against humanity, and war crimes in Iraq and Syria, for accountability for perpetrators of these crimes, with an amendment in the nature of a substitute; 

S. Res. 168, supporting respect for human rights and encouraging inclusive governance in Ethiopia, with an amendment in the nature of a substitute; 

An original bill entitled, “Trafficking Victims Protection Reauthorization Act of 2017”; and
The nominations of Barbara Lee, of California, and Christopher Smith, of New Jersey, both to be a Representative to the Seventy-second Session of the General Assembly of the United Nations, Doug Manchester, of California, to be Ambassador to the Commonwealth of The Bahamas, Kathleen Trotia McFarland, of New York, to be Ambassador to the Republic of Singapore, Stephen B. King, of Wisconsin, to be Ambassador to the Czech Republic, and John R. Bass, of New York, to be Ambassador to the Islamic Republic of Afghanistan, all of the Department of State, and Steven T. Mnuchin, of California, to be United States Governor of the International Monetary Fund, United States Governor of the African Development Bank, United States Governor of the Inter-American Development Bank, United States Governor of the International Bank for Reconstruction and Development, United States Governor of the European Bank for Reconstruction and Development, United States Governor of the African Development Fund, and United States Governor of the Asian Development Bank.

NOMINATIONS

Committee on Foreign Relations: Committee concluded a hearing to examine the nominations of Jon M. Huntsman, Jr., of Utah, to be Ambassador to the Russian Federation, who was introduced by Senators Manchin and Lee, and A. Wess Mitchell, of Virginia, to be an Assistant Secretary (European and Eurasian Affairs), who was introduced by Senator Cornyn, both of the Department of State, after the nominees testified and answered questions in their own behalf.

NOMINATIONS

Committee on Health, Education, Labor, and Pensions: Committee concluded a hearing to examine the nominations of Carlos G. Muniz, of Florida, to be General Counsel, Department of Education, who was introduced by Senator Rubio, and Janet Dhillon, of Pennsylvania, and Daniel M. Gade, of North Dakota, who was introduced by Senator Isakson, both to be a Member of the Equal Employment Opportunity Commission, after the nominees testified and answered questions in their own behalf.

INTELLIGENCE

Select Committee on Intelligence: Committee met in closed session to receive a briefing on certain intelligence matters from officials of the intelligence community.

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House of Representatives

Chamber Action
The House was not in session today. The House is scheduled to meet in a Pro Forma session at 11 a.m. on Thursday, September 21, 2017.

Committee Meetings
No hearings were held.

Joint Meetings
No joint committee meetings were held.

COMMITTEE MEETINGS FOR WEDNESDAY, SEPTEMBER 20, 2017

(Committee meetings are open unless otherwise indicated)

Senate
Committee on Homeland Security and Governmental Affairs: Subcommittee on Federal Spending Oversight and Emergency Management, to hold hearings to examine end of the year spending, 2:30 p.m., SD–342.

Committee on the Judiciary: to hold hearings to examine the nominations of Allison H. Eid, of Colorado, to be United States Circuit Judge for the Tenth Circuit, Annemarie Carney Axon, to be United States District Judge for the Northern District of Alabama, Michael Lawrence Brown, to be United States District Judge for the Northern District of Georgia, Thomas Alvin Farr, to be United States District Judge for the Eastern District of North Carolina, and William M. Ray II, to be United States District Judge for the Northern District of Georgia, 10 a.m., SD–226.

Special Committee on Aging: to hold hearings to examine disaster preparedness and response, focusing on the special needs of older Americans, 9 a.m., SD–562.

House
No hearings are scheduled.
Next Meeting of the SENATE
8:30 a.m., Thursday, September 21

Senate Chamber

Program for Thursday: Senate will meet in a pro forma session.

Next Meeting of the HOUSE OF REPRESENTATIVES
11 a.m., Thursday, September 21

House Chamber

Program for Thursday: House will meet in Pro Forma session at 11 a.m.