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House of Representatives

The House was not in session today. Its next meeting will be held on Thursday, September 21, 2017, at 11 a.m.

Senate

TUESDAY, SEPTEMBER 19, 2017

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,
Washington, DC, September 19, 2017.

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

• This "bullet" symbol identifies statements or insertions which are not spoken by a Member of the Senate on the floor.



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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 urge 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 heavyhanded 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 our 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 Chairman HATCH for his leadership, and I look forward to this morning's hearing and more hearings to come, as we continue to discuss our tax reform goals.

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 deliver more opportunity for 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 ObamaCare: skyrocketing costs, plummeting choices, and collapsing markets. Many of us thought our constituents deserved better. That is why we did as we promised and voted to repeal this failed law so that we could replace it with something better.

The forces of the status quo went all out to defeat our every effort to improve healthcare. Thus far, they have succeeded. Thus far, they have yet to offer truly serious solutions of their own.

Last week, our colleague from Vermont rolled out healthcare legislation that would quadruple down on the failures of 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 take away so many decisions over their own healthcare, that would require almost unimaginably high tax increases, and that already collapsed, interestingly 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 on our country.

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.

The ACTING PRESIDENT pro tempore. The majority whip.

FISA AND CFIUS

Mr. CORNYN. Mr. President, as the subway attack in London last week proves all too well, when terrorism goes underground, it doesn't disappear. Every day there are individuals operating in the world's shadows in places like the Parsons Green station in Fulham. They mean to do our allies and us great harm, and they are not going away.

As President Trump said last week, in this era in which attacks like that in London are the new normal, we have to be proactive. We can't take our security for granted. We can't naively assume that when it comes to threats like that and others even bigger, our country is out of the woods. One way to be proactive and to keep our country safe is to reauthorize section 702 of the Foreign Intelligence Surveillance Act.

Earlier this month, Attorney General Jeff Sessions and Director of National Intelligence Dan Coats sent a letter to congressional leadership calling for this reauthorization. It is easy to see why. Title VII of the Foreign Intelligence Surveillance Act allows the intelligence community to collect vital information about international terrorists, cyber actors, and other important foreign intelligence targets. Information collected under one particular section—section 702—produces particularly important foreign intelligence that helps prevent terrorist attacks and malign state actors as well. It does so by focusing on non-U.S. persons, which is important, because, as it is called, it is foreign intelligence surveillance. It focuses on non-U.S. persons located outside of the United States who are foreign intelligence targets.

But that is not all. Just as importantly, section 702 also includes a comprehensive oversight regime to make sure the privacy of U.S. persons is protected under the Constitution. That is done by not only oversight here in the Senate and in the House through the intelligence committees but also by the Foreign Intelligence Surveillance Court, which monitors compliance with the law.

There has been some criticism of this provision, but I must say that the overwhelming support for the section 702 reauthorization is quite remarkable in this polarized environment in which we live. Even the Privacy and Civil Liberties Oversight Board gave the program a ringing endorsement.

But the criticism that has been made is actually based on very few actual facts and often reflects a misunderstanding, both of the purpose of FISA and the controls that constrain government action. Just to be clear, section 702 does not allow intelligence personnel to evade the Fourth Amendment to the U.S. Constitution. It may not be used to intentionally target a citizen of the United States. That citizen could be in New York or New Delhi. It simply doesn't matter. He or she is off limits.

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 possibility that 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 flashlights 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 recommending 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 intel-

ligence, 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 not currently 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 consider 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 pro-

vide 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 State.

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. The new 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 in the middle-class—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 almost all 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 Americans' 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 coverage 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 don't have a CBO score yet, 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 Medicaid funding levels on 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 by 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 entitlements, but Americans 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 couldn'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 have to give; that is how it works around here—or 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 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 bipartisanship. We have seen bipartisan 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 Francisco 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 personal life experience 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 issues, particularly the more 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, during the period of Republicans' efforts to repeal, 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 behind me 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 had just seen but a different way—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 and donuts 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 down and 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 healthcare—quality care? It was a good-faith effort, and it was encouraging, after 7 wasted months of political debate on the floor of the Senate.

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 that took 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.

There being no objection, 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 Republican effort to repeal the Affordable Care Act is back, a zombie again on the march weeks after it was declared dead. The newest incarnation is Cassidy-Graham, named after 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 and pave the way for the elimination of all protection for those with preexisting medical conditions.

Among the biggest losers 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 be punished with draconian cuts in healthcare funding. Among the big winners would be states that have done nothing of the kind for their residents—refusing the Medicaid expansion and interfering with outreach efforts. They'd be rewarded for their stupidity and inhumanity with an increase in federal funds.

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 provider and consumer organizations have turned thumbs down, as have analysts looking at its economic effects.

Fitch 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." Fitch finds that "states that expanded Medicaid access to the newly eligible population under the Affordable Care Act (ACA) are particularly at risk under this latest bill."

The bill surfaced just as the political tide seemed to be shifting away from the GOP campaign to roll back the gains in health coverage experienced 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 termed—teeing up 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 measure through by Sept. 30, the last day it could be passed with only 50 votes (plus a tie-breaker cast by Vice President Mike Pence) under Senate reconciliation rules. After that, it would need a filibuster-proof count of 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 their vote 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), whose "no" vote helped to scuttle 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 been quoted on her position, but there don't seem to be compelling reasons for her to shift to the "yes" column now. The position of Sen. John McCain (R-Ariz.), who also voted against the last bill, 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 ex-

pansion, 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 and employer mandates retroactive to Dec. 31, 2015.

The bill provides for no replacement of these provisions, beyond a capped block grant to states. 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 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 unique healthcare needs of the patients in each state." That papers over its significant drawbacks.

By their nature, when block grants are proposed to replace existing programs, they're almost always back-door mechanisms to reduce federal spending. That's the case here. The Cassidy-Graham block grants would replace the money now being spent on Medicaid expansion and the premium and cost-sharing subsidies, and a couple of other spending provisions. But the existing spending is pegged to demand—Medicaid funding adjusts automatically to enrollment and the medical needs of the enrollees, and the subsidies are 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 Medicaid or any other state programs, 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 Democratic, that have expanded Medicaid and aggressively pursued enrolling their lower income populations in Medicaid and exchange coverage," observes healthcare expert Timothy S. Jost. "Money would move toward states, predominantly Republican, that have not expanded Medicaid."

Some 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 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.

States that shunned 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 2026, and Mississippi, another black hole for healthcare reform, would get \$1.4 billion more. This is how carrot-and-stick approaches to healthcare reform work—in 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 will face budgetary challenges given 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 eviscerate 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, there’s that crucial Republican litmus test—abortion. The bill bars any insurance policy receiving federal funds—that is, a policy whose enrollees get subsidies or that is subject to payments under the Affordable Care Act’s reinsurance rule—from offering coverage for abortions except when the mother’s life is in jeopardy or in cases of rape or incest.

Remarkably, this bill’s sponsors are pitching it as a moderate, common-sense alternative to its predecessors. They may also be hoping that opposition fatigue has set in, and that they’ll be able to steamroll the measure through while the public is distracted by other issues. As with other repeal efforts, this one is being brought out without a minute of hearings.

Cassidy asserts that this measure is a blow for equality. The measure “treats all Americans the same no matter where they live.” He’s right, in a way: It treats all Americans as potential victims of insurance company profiteering.

Mr. DURBIN. Let me quote a few sentences from this article because I think they make the case dramatically about how bad the Cassidy-Graham substitute would be. Here is what he said:

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

and pave the way for the elimination of all protection for those with preexisting medical conditions.

He goes on to say:

Among the biggest losers 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 [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 provider 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 Republican repeal-and-replace measures, which the budget office said could cut enrollments by 20 million to 22 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 and pay our share of the premiums. 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 this 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 with health insurance, what would the Cassidy-Graham bill do for the State of Texas? They wouldn’t lose a penny. They would add in Federal funding \$8,234 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 eviscerate consumer-protection rules in the Affordable Care Act.

One of the most important parts of the Affordable Care Act was a reform that said: If you are 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 thought 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 most expensive policy 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 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 looking at mental illness as an illness rather than a curse. We are looking at it as something that can be successfully treated. Yet here comes Cassidy-Graham tossing out that requirement as well.

Let 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 in case they do. Cassidy-Graham walks away from that. They are for 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 he would have to be institutionalized, 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 in nursing homes—seniors 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. I, 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 tempore. 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 quorum call be rescinded.

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

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.

Mitch McConnell, John Kennedy, Lamar Alexander, Johnny Isakson, Mike Rounds, Tom Cotton, Roy Blunt, John Barrasso, Patrick J. Toomey, Cory Gardner, John Hoeven, Rob Portman, Bill Cassidy, John Cornyn, Orrin G. Hatch, Lisa Murkowski, Thom Tillis.

The ACTING PRESIDENT pro tempore. 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 PRESIDING OFFICER (Mr. FLAKE). Are there any other Senators in the Chamber desiring to vote?

The yeas and nays resulted—yeas 49, nays 47, as follows:

[Rollcall Vote No. 200 Ex.]

YEAS—49

Alexander	Flake	Portman
Barrasso	Gardner	Risch
Blunt	Grassley	Roberts
Boozman	Hatch	Rounds
Burr	Heller	Rubio
Capito	Hoeven	Sasse
Cassidy	Inhofe	Scott
Collins	Isakson	Shelby
Corker	Johnson	Strange
Cornyn	Kennedy	Sullivan
Cotton	Lankford	Thune
Crapo	Lee	Tillis
Cruz	McCain	Toomey
Daines	McConnell	Wicker
Enzi	Murkowski	Young
Ernst	Paul	
Fischer	Perdue	

NAYS—47

Baldwin	Gillibrand	Nelson
Bennet	Harris	Peters
Blumenthal	Hassan	Reed
Booker	Heinrich	Sanders
Brown	Heitkamp	Schatz
Cantwell	Hirono	Schumer
Cardin	Kaine	Shaheen
Carper	King	Stabenow
Casey	Klobuchar	Tester
Coons	Leahy	Udall
Cortez Masto	Manchin	Van Hollen
Donnelly	Markey	Warner
Duckworth	McCaskill	Warren
Durbin	Merkley	Whitehouse
Feinstein	Murphy	Wyden
Franken	Murray	

NOT VOTING—4

Cochran	Menendez
Graham	Moran

The PRESIDING OFFICER. 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 cochair 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

and contributions would eventually be recognized as being equal to those of land and sea power. In essence, the birth of the U.S. Air Force began the dawn of a new era, where the skies became the ultimate high ground.

As we celebrate this historic occasion, we must also remember and honor the courageous men and women of the U.S. Air Force, as the service would not be what it is today without these fine airmen.

I had the privilege of speaking at the Department of Defense's National Prisoner of War/Missing In Action Recognition Day last week. It served as a poignant reminder of the many sacrifices made by our men and women in uniform.

One such airman, Brig. Gen. Kenneth Newton Walker, played an important role in building the organization that would later become an independent air service. General Walker's direct contributions to crafting doctrine and policy were instrumental to the creation of the modern U.S. Air Force.

General Walker was reported missing in action after his B-17 Flying Fortress went missing over Papua, New Guinea, in 1943, and was posthumously awarded the Medal of Honor by President Roosevelt. The actions of fearless warriors like General Walker symbolize a continuing commitment to meeting the demands of an increasingly dynamic and dangerous world with limitless strength, resolve, and determination.

These dedicated airmen and their values of integrity, service before self, and excellence that they uphold in all they do embody a proud heritage, a tradition of honor, and a legacy of valor. We owe them a tremendous amount of gratitude for the sacrifices they have made defending the greatest country on Earth on this, the 70th anniversary of the United States Air Force.

I am especially proud of my home State of Arkansas and its contribution to our air superiority. The Little Rock Air Force Base and the 188th Wing in Fort Smith play an important role in our national security. I am proud to support these missions and look forward to continuing to support our airmen stationed in Arkansas and throughout the world.

I am pleased to be here speaking on behalf of a grateful nation, remembering, honoring, and commending our airmen and the world's greatest Air Force.

I yield back.

Mr. GRASSLEY. Mr. President, I am pleased to support Noel Francisco to serve as the next Solicitor General.

Mr. Francisco comes to us with impressive credentials. He graduated from the University of Chicago Law School and clerked for Judge Luttig on the Fourth Circuit and Justice Scalia on the Supreme Court. He has spent time in both the private sector at prestigious law firms and in the public sector as counsel to the President at the White House and in leadership roles at the Department of Justice.

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 position he wants the United States to 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 original version of 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 absurd 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 when he was in the Justice Department'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 clammed up when it came to this particular clause which is directly relevant to President Trump's behavior.

While Mr. Francisco has been reluctant to demonstrate independence from President Trump, he has been willing at many points in his career to demonstrate loyalty to special interests. For example, Mr. Francisco gave a speech at the 2015 annual conference of the Community Financial Services Association, better known as the trade association for the payday lending industry. Here is what he said: "The payday lending industry is facing the challenge of a lifetime. It is essential that, as an industry, you be prepared to respond on all fronts, and it has been my privilege to assist you in doing this over the last few years. This includes the legislative front, the regulatory front, and—my favorite—the legal front."

Let's be clear. We don't need a Solicitor General who thinks it is a privilege to assist payday lenders.

Mr. Francisco also was a prominent lawyer for the tobacco industry. His advocacy on their behalf prompted a number of national antismoking and health organizations to call for Mr. Francisco to recuse himself from tobacco-related litigation matters if he were confirmed. I asked Mr. Francisco if he would commit to recuse himself from tobacco litigation, but he would not make that commitment.

Mr. Francisco has been eager to position himself alongside rightwing groups like the Federalist Society and the Heritage Foundation. He made this particularly clear at a speech he gave to the Heritage Foundation on May 19, 2016, when he said: "We live in an era where our views, traditional views, are under constant attack. Our adversaries have not even really tried to beat us through the democratic processes, but instead go straight to the courts, where they often win not by asserting that our views are legally wrong, but that they are so fundamentally illegitimate that the Constitution prohibits them. And they now have an increasingly compliant Judiciary that agrees with their policy views and that is unconstrained by legal principle."

This is a troubling characterization, to claim that people who do not share the views of the Heritage Foundation are "our adversaries." It is just as troubling to claim that the Judiciary is acting "unconstrained by legal principle" whenever it disagrees with the views of the Heritage Foundation. Comments like this raise serious questions about the ideology Mr. Francisco would bring to the Solicitor General's office.

Make no mistake—President Trump is likely to keep the Supreme Court

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 display that 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 Republican 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 \$5,600 under Graham-Cassidy.

Graham-Cassidy will also allow States to decide what insurers have to cover and what 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 Medicaid—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 disorders. 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." "Ratchet 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 gutting 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, provider, 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 detracting attention from bipartisan efforts to stabilize 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 family 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 program or to hurt a program, you 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 healthcare repeal bill.

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; plans 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 after the Senate Democrats were joined by three Republican Senators in voting 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 Democrats, Republicans, and Independents. I heard from people from our cities and people from our rural areas. There are a lot of people—nearly 2 million people—at the Minnesota State Fair, which is the biggest State fair in the country. A lot of people stopped by my booth. 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 with 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 Pensions 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 the individual markets and to 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 incredible speech he gave when he came back to the Senate. If that isn't enough, we heard yesterday that we will not even be able to get a full Congressional Budget Office analysis of this bill this month. 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. Our constituents are owed this. 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 bill—either financially 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 insurance 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, and 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 and the Children's Hospital Association, which are 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 option. 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 early morning breakfasts or, 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. They also know, 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 moment—from 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. This bill would lower premiums by providing support for high-cost patients.

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 crucial to 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 isn't a healthy 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 those bills in this 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—to come up with 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 has struggled 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.”

Luckily, under the Affordable Care Act, Teri can afford insurance and is currently responding well to treatment, which, by the way—I see Senator DURBIN here—is based on NIH-funded research. It is treatment based on that research, which, unfortunately, we cut back on in the bill, and Senator DURBIN will continue to fight to get that treatment through the Department of Defense included.

But the bill we are facing now, the Graham-Cassidy bill, would allow insurers to charge sick people or those with preexisting conditions much more than healthy people. Teri is worried that it would make it difficult, if not impossible, for people like her to afford health insurance.

This debate is about all the parents whom I have spoken to over the last few months who have children with disabilities. These parents would literally come up to me at parades over the summer, bring their kids over in the middle of the parade route, and introduce those children to me—kids in wheelchairs, kids with Down syndrome—and say: This is a preexisting condition. This is what a preexisting condition looks like. That is why they oppose repeal.

In Minnesota, one out of four children get their health coverage from Medicaid, and 39 percent of our children with disabilities or special healthcare rely on Medicaid or children's health insurance. We should be spending our time this week reauthorizing the Children's Health Insurance Program before States like mine run out of money at the end of the month, before debating another repeal bill for which we don't even have a Congressional Budget Office score on the impact. 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 are essential to rural communities. They don't just provide health services; they employ thousands of doctors, nurses, pharmacists, and other healthcare workers. These rural hospitals often operate at margins of less than 1 percent. 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 Medicaid expansion 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 real 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 other 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 us 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:

[Rollcall Vote No. 201 Ex.]

YEAS—50

Alexander	Flake	Perdue
Barrasso	Gardner	Portman
Blunt	Graham	Risch
Boozman	Grassley	Roberts
Burr	Hatch	Rounds
Capito	Heller	Rubio
Cassidy	Hoeven	Sasse
Collins	Inhofe	Scott
Corker	Isakson	Shelby
Cornyn	Johnson	Strange
Cotton	Kennedy	Sullivan
Crapo	Lankford	Thune
Cruz	Lee	Tillis
Daines	McCain	Toomey
Enzi	McConnell	Wicker
Ernst	Murkowski	Young
Fischer	Paul	

NAYS—47

Baldwin	Gillibrand	Nelson
Bennet	Harris	Peters
Blumenthal	Hassan	Reed
Booker	Heinrich	Sanders
Brown	Heitkamp	Schatz
Cantwell	Hirono	Schumer
Cardin	Kaine	Shaheen
Carper	King	Stabenow
Casey	Klobuchar	Tester
Coons	Leahy	Udall
Cortez Masto	Manchin	Van Hollen
Donnelly	Markey	Warner
Duckworth	McCaskey	Warren
Durbin	Merkley	Whitehouse
Feinstein	Murphy	Wyden
Franken	Murray	

NOT VOTING—3

Cochran	Menendez	Moran
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The nomination was confirmed.

The PRESIDING OFFICER. The Senator from Alaska.

Ms. MURKOWSKI. Mr. President, I ask unanimous consent that with respect to the Francisco nomination, the motion to reconsider be considered made and laid upon the table and the President be immediately notified of the Senate's action.

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

EXECUTIVE CALENDAR

Ms. MURKOWSKI. Mr. President, I ask unanimous consent that the Senate resume consideration of the Emanuel nomination.

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

The clerk will report the nomination.

The bill clerk read the nomination of William J. Emanuel, of California, to be a Member of the National Labor Relations Board for the term of five years expiring August 27, 2021.

RECESS

The PRESIDING OFFICER. Under the previous order, the Senate stands in recess until 2:15 p.m.

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 customer 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 from consumers 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 that backdrop, 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 all been victims of the Equifax 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 buying a home, 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 refinancing 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 se-

curity. 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. The basic idea is simple: 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 bill doesn't fix 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 American 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.

The PRESIDING OFFICER. The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

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.

HEALTHCARE

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 have 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

brought up as an amendment but with us returning to reconciliation.

Let me first explain what that means. That means there will be no chance for us to offer amendments to the legislation. That means there will be no opportunity in our committees to mark up legislation or to get the cost of the legislation or the technical help to do any bill, let alone a bill that affects a large part of our economy.

The Presiding Officer and I both 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 it is what is known 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. That is unconscionable. We know 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 coverage and 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 of this country would be block-granted and would be capped. So the Federal Government could be getting out of the Medicaid business. The States would be given greater flexibility on how to operate the exchanges in their State and would no longer be subject to the same national requirements.

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 totally unaffordable for people 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, the parents' policy 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 protection against annual lifetime caps. 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 ineffective. 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 cover 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 maybe are misunderstood about the Medicaid system is that 1.75 million veterans are in the Medicaid system. Quite frankly, their 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. It is not giving them 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 for hospital costs, 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 don't 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 get 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 went 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, and we lose more.

I thought this was the United States. I thought we were all in this together. The people of Maryland are proud to help the people of Texas or Florida because of the hurricane, and now you are coming back and saying you are going to 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 not only do the right 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 rush 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 of citizens in our country and that giving 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, thereby 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, which would leave States with 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 as 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 kicking 15 million people off Medicaid and sunseting 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 off 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 kicking 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 ideas of 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 sunseting, it is privatization, and it is cutting people off care. That is why we 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 market. Bundling up a population and giving them clout to negotiate on rates and giving a State the ability to negotiate on rates—either on drug costs or on insurance—yes, this 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 or then 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 their families under 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 save the American taxpayer money. 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 introduction 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 healthcare for everyone in America. Some refer to it as BernieCare. 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 lib-

eral 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 get worse, and the impacts, such as those that I hear every weekend in Wyoming, including this past weekend.

From what I heard from the Democrats, they seem to want to let the system collapse in a way that they 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 for them, 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 their plan? 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 a Medicare Advantage plan. The reason they sign up for Medicare Advantage is that for them personally, when they study it, there are 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 way.

What happens to these 17 million Americans who are currently on Medicare Advantage with the scheme that Senator SANDERS and other Democrats have come up with? They don't say. Did the Democrats who came to the floor last night have anything to say about these 17 million seniors who would lose their Medicare, seniors who are on Medicare today? What is going 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 be-

cause 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 with 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. But certainly 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 priority, when 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.

All 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 of 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 the benefits for Medicare are 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 raising taxes a lot. 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 in to the Medicaid Program, which has significantly strained Medicaid and made it much harder for people on Medicaid, 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 accessible, available access to care. The people who suffer the most are going to be the seniors who have no other options. These are seniors who

are relying on Medicare today. They were promised that Medicare would be there for them. We need to keep that promise.

Instead of protecting seniors today, however, Democrats are trying to give Medicare to everyone else. So 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 that Democrats push out of the system as they continue to put more and 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 that time, the Senate 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. It 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 end access to 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 make no mistake, this bill is far worse. 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 to 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 markets, to 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 keep copays 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 yet another divisive, partisan 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 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 by health insurance companies. 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 well-being 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 to essentially 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 great healthcare 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, with very 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 meet 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 to make agonizing decisions between providing healthcare to seniors or to children, to people who are disabled or to people who are just trying to get on

their feet and go to work without the specter of a healthcare disaster hanging over them.

I suspect we will have more to say about this next week, but it is a travesty.

I understand there is going to be a little hearing on Monday. I call it a fig-leaf hearing. There is going to be a hearing. We don't know who is going to be there. We don't know exactly what the testimony is going to be. It is going to be a hearing so people can say, yes, we had a hearing.

Well, come on. This is not a responsible way to legislate, and the people of this country expect more of us. I hope both parties—both parties—will recognize the folly of what is being proposed here and say no. Then, let's go back to talking, on a bipartisan basis, and fix the problems with the American healthcare system which certainly need to be addressed.

Mr. President, I yield the floor.

The PRESIDING OFFICER (Mr. JOHNSON). Under the previous order, there will now be 2 minutes of debate, equally divided between the two parties.

Mr. CRAPO. Mr. President, I ask unanimous consent to yield back all time.

The PRESIDING OFFICER. Is there objection?

Without objection, it is so ordered.

All time is yielded back.

CLOTURE MOTION

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

The 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 William J. Emanuel, of California, to be a Member of the National Labor Relations Board.

Mitch McConnell, John Hoeven, Joni Ernst, Thom Tillis, Steve Daines, Mike Crapo, Jerry Moran, Tom Cotton, Roger F. Wicker, Pat Roberts, James M. Inhofe, Johnny Isakson, John Cornyn, James Lankford, John Boozman, James E. Risch, John Thune.

The PRESIDING OFFICER. 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 William J. Emanuel, of California, to be a Member of the National Labor Relations Board, shall be brought to a close?

The yeas and nays are mandatory under the rule.

The clerk will call the roll.

The bill clerk called the roll.

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

Mr. DURBIN. I announce that the Senator from Hawaii (Ms. HIRONO), the Senator from New Jersey (Mr. MENENDEZ), the Senator from Florida (Mr.

NELSON), and the Senator from Hawaii (Mr. SCHATZ) are necessarily absent.

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

The yeas and nays resulted—yeas 49, nays 44, as follows:

[Rollcall Vote No. 202 Ex.]

YEAS—49

Alexander	Flake	Perdue
Barrasso	Gardner	Portman
Blunt	Graham	Risch
Boozman	Grassley	Roberts
Burr	Hatch	Rounds
Capito	Heller	Rubio
Cassidy	Hoeven	Sasse
Collins	Inhofe	Scott
Corker	Isakson	Shelby
Cornyn	Johnson	Sullivan
Cotton	Kennedy	Thune
Crapo	Lankford	Tillis
Cruz	Lee	Toomey
Daines	McCain	Wicker
Enzi	McConnell	Young
Ernst	Murkowski	
Fischer	Paul	

NAYS—44

Baldwin	Franken	Murray
Bennet	Gillibrand	Peters
Blumenthal	Harris	Reed
Booker	Hassan	Sanders
Brown	Heinrich	Schumer
Cantwell	Heitkamp	Shaheen
Cardin	Kaine	Stabenow
Carper	King	Tester
Casey	Klobuchar	Udall
Coons	Leahy	Van Hollen
Cortez Masto	Manchin	Warner
Donnelly	Markey	Warren
Duckworth	McCaskill	Whitehouse
Durbin	Merkley	Wyden
Feinstein	Murphy	

NOT VOTING—7

Cochran	Moran	Strange
Hirono	Nelson	
Menendez	Schatz	

The PRESIDING OFFICER. On this vote, the yeas are 49, the nays are 44.

The motion is agreed to.

The Senator from Arizona.

Mr. MCCAIN. Mr. President, I ask unanimous consent to address the Senate as in morning business.

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

TRIBUTE TO JOE DONOGHUE

Mr. MCCAIN. Mr. President, this week marks 30 years of loyal service to the Senate by one Joe Donoghue, my legislative director—30 years working for the citizens of Arizona and trying to make me a better Senator. During those three decades, he worked his way from the mailroom to a position of considerable importance on my staff. He has made himself something of an expert not only on Senate procedure but on all the many issues our staff has worked on over the years—from budget matters to immigration reform, to national security.

Joe is capable, intelligent, hard-working, and trustworthy—a justifiably proud professional staffer, a pro's pro. He is well liked by staff and Members on both sides of the aisle, especially by those who, like him, have dedicated most of their careers to the Senate. I have come to depend on his professionalism and his counsel. More than that, my wife Cindy and my children treasure his friendship, as do I—as do I.

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 both of us.

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 immense 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 lead responsibility 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 am not sure they are fond memories for the floor staff who had to process the amendments.

As I mentioned, in addition to his legislative work, Joe was my driver for over 20 years. I travel an awful lot, back and forth to Arizona on weekends, campaigning for colleagues, and on overseas trips. During the week, when the Senate is in session, my nights are often consumed with meetings, dinners, and speeches. Joe worked a long shift in the office during the day and drove me to various appointments day and night—taking me to airports and picking me up, getting me safely and on time through Washington traffic to keep a schedule that was always impossibly crowded.

We spent a lot of hours together—thousands of hours—and Joe was almost always good company, even when I was not. He always made a point on those drives to tell me a joke, and some of them got me in trouble when I repeated them in public.

During my 2008 Presidential campaign, Joe worked as my assistant, traveling from campaign stop to campaign stop, doing all manner of small and large tasks for me, even once holding an umbrella overhead while I gave a speech in the rain in Manchester, NH.

As my legislative director, Joe is someone everyone on my staff looks to for policy guidance and instruction on Senate procedure and for insights into the personalities and priorities of senior staff in other offices and for the leadership. He goes out of his way to make sure each one of my staff knows they are appreciated and an integral part of our office. I am grateful for Joe

Donoghue's faithful service to my office, the Senate, the people of Arizona, and to me.

On their behalf and mine, I want to thank Joe. I have barked at you, teased you, laughed with you, and counted on you. We have been through a lot of highs and lows in our 30-year association—good times and bad. The good times were better and the bad times easier because of your help and friendship. Thank you, my friend, my dear friend. It has been quite a ride together. I cannot 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 treatment centers, nursing programs 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 partisan 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 about 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 an effort to dramatically go after, 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. It 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, but initial indication has led groups like the American Medical Association and 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 301,000 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 Medicare 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 with 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 they 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 with a tracheostomy tube 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 caps and limitations 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 medical supplies. 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. The Graham-Cassidy 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 world's greatest deliberative body would stop a secretive, harmful rush and, instead, embrace dialogue, hearing from experts and witnesses as we would improve healthcare, attempting to stabilize the individual marketplace, lower premiums, and expand care rather than reduce it.

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 after 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 nothing, asking 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 try the old way of 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 Ranking Member Murray hold 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 see if we can pass something that will be 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 the repeal of ObamaCare—decided finally to do what the HELP Committee should do. The "H" is for "Health." To pass a bill reorienting one-sixth of the American economy around the most important expenditure that anybody ever makes 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 interact and hear 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, with the support of 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. The idea is to force 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 just 6 weeks ago 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 stand here—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 rushed, 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 subjected to a normal review by the 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. Between 15 and 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-

ing the expenditure of priority that is the single most important priority in anyone's life, that is important enough.

I would argue, in closing, that there is something I think is equally important; that is, this body. We celebrated the 230th anniversary of the Constitution this past Sunday. James Madison and others in Philadelphia, tried to figure out how this government should work. They made a very unusual decision that would be different from the decisions that are made in many countries; that is, they put the legislative branch first.

There are three coequal branches. In most societies, the executive is first, but not here—first among equals. We are meant to really play an A game. We are really meant not to be an article-II-and-a-half branch reacting to a Presidential tweet or encouragement; we are supposed to be an article I branch.

In the legislative branch in article I, the Senate is given a very particular role. We are called the world's greatest deliberative body. We are the saucer into which the partisan heat of the day is poured and allowed to cool, so the decisions made in the Senate are supposed to be more careful and more deliberate.

This is a great body that has been sadly hobbled by partisan gridlock, and we have not achieved what the Senate should achieve. We learn in math as we grow up that the whole is equal to the sum of the parts, but what you find in life is that often the math doesn't work out. Sometimes the whole can be equal to or greater than the sum of the parts in life if teams work well together. But sometimes—and this describes the Senate now—there are 100 wonderful, accomplished people in this body. Yet again and again, and now for years, the whole has been equal to less than the sum of the parts.

We have done very little of meaning, very little of substance. Yet now we are poised to tackle the most important issue that most affects people and the biggest sector of the American economy. If we get it right, we can send a message to the public that the Senate will once again be the Senate. We will once again be a deliberative body. We will once again do what we are supposed to do.

I think this country now needs to see some adults in the room, some group of people willing to work together—Democratic and Republican—to solve problems and do the right thing for the American public. If we do this right, we can send that message. If we do it wrong, we will hurt people, and we will also hurt the credibility of this institution in a way that I think will last for years.

We have a choice. It is up to us. We either follow the advice that our colleague gave us on the floor 6 weeks ago, which we gave him a standing ovation for, and we gave him the ovation because we knew he was right—we ei-

ther follow that advice or we decide to ignore it and continue the downward spiral of a great body.

With that, I yield the floor.

The PRESIDING OFFICER. The Senator from Minnesota.

Mr. FRANKEN. Mr. President, in May, Jimmy Kimmel shared the story of his newborn son Billy, who was born with a life-threatening condition that required open-heart surgery. Kimmel said that he was fortunate to have had good health coverage and was able to pay for the care that his son needed, something he believed every American deserved.

A few weeks later, as efforts to repeal ObamaCare were gaining steam, Senator BILL CASSIDY explained that the bar he believed any healthcare bill had to clear to get his vote was what he called the Jimmy Kimmel test. He said: "Will a child born with congenital heart disease be able to get everything she or he would need in the first year of life?"

When Kimmel interviewed Senator CASSIDY a few days later, Kimmel explained the test this way: "No family should be denied medical care, emergency or otherwise, because they can't afford it." Well, I am here to report that this latest version of TrumpCare, offered by none other than Senator CASSIDY himself, fails the Jimmy Kimmel test miserably.

Over the past few weeks, there have been two ongoing conversations about the future of healthcare in the United States. The first has been conducted in an open, bipartisan manner in the Senate Health, Education, Labor, and Pensions Committee in full accord with the traditions of this body. In the HELP Committee, Republicans and Democrats alike have been talking with Governors, insurance commissioners, and other experts on ways to address concerns of States and consumers by stabilizing the individual market and lowering premium costs. That is how the Senate is supposed to work, and the bill that emerges from that process will be one that makes things better, not worse. It will create certainty. It will bring down costs for consumers. It is a bill that any Senator should be proud to vote for.

The second conversation is a model of how things shouldn't work. It has occurred behind closed doors between Senate Republicans and party operatives. It is not about making the system work; it is about passing something—anything that can be said to repeal and replace the Affordable Care Act, and along the way, it destroys the Medicaid Program as we know it. As many of us have argued before, this conversation is an affront to the traditions of this body and, more importantly, to the will of the American people.

I urge my Republican colleagues to oppose the Graham-Cassidy bill—the newest iteration of TrumpCare—which will rip healthcare coverage from tens of millions of people, create higher

costs for consumers, and ensure the destabilization of the individual health insurance market.

While I have worked closely with Senators CASSIDY and GRAHAM on other bills, and I respect them, I have grave concerns with this legislation.

First, the bill undermines protections for people with preexisting conditions.

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 protection for people with preexisting conditions.

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 coverage for vital services, such as prescription drugs, maternity care, mental health, and substance use disorder services.

While the bill technically requires States to describe—just simply describe—how they will “maintain access to adequate and affordable health coverage for individuals with preexisting conditions,” there is no definition of what that means, and there are no enforcement mechanisms. Insurers would still be able to charge people with preexisting conditions more for their care or exclude services altogether. Under this plan, millions of people with preexisting conditions could face much higher costs, if they can get coverage at all. Again, this bill rips away protections for people with preexisting conditions.

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 eliminates the ACA's premium subsidies, eliminates the Medicaid expansion, eliminates cost-sharing reduction payments, 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.

The bill also proposes to dramatically reduce funds for States that have expanded Medicaid and have successfully enrolled more adults in ACA exchanges—States like Minnesota. Instead of incentivizing success, the bill will reward failure, initially increasing funds for States that refuse to expand Medicaid and have done little to encourage enrollment. But even these States lose out in the end. In fact, the funding stops completely after 2026, resulting in enormous losses for every State, and even prior to 2026, the Center on Budget and Policy Priorities estimates, most States will receive significantly 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. Those include Arizona, which would lose \$1.6 billion; Alaska, \$255 million; Maine, \$115 million; Colorado, \$823 million; and the list goes on. Healthcare isn't free. These shortfalls will mean that families don't get the services they need.

On top of all that, the Graham-Cassidy proposal caps and cuts Medicaid—a program that provides coverage to seniors, families with children, and people with disabilities. In Minnesota alone, that is 1.2 million people facing cuts to their benefits or losing coverage altogether.

I believe many of us truly want to help our constituents access the care they need. As I have said before, the ACA is far from perfect, but it has resulted in significant improvements in millions of people's lives.

I have heard from countless Minnesotans who have literally had their lives or the life of a loved one saved by the ACA—the same way that Billy Kimmel's life was saved by the treatment he was able to receive at the beginning of his life. Take Leanna, for example. Leanna's 3-year-old son, Henry, has been diagnosed with acute lymphoblastic leukemia. His treatment will last until April of 2018. He often needs round-the-clock care to manage his nausea, vomiting, pain, and sleepless nights—a 3-year-old.

Henry's immune system is so compromised that he is not supposed to go to daycare, so Leanna left her job to care for him. Leanna and Henry are supported by her spouse, but they couldn't pay for Henry's treatment on one salary.

Leanna says:

It is because of the ACA that Henry gets proper 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 enrolled in Minnesota's Medicaid Program after finishing her graduate degree and while looking for full-time employment. Maria was grateful for the coverage because she needed access to treatments for her endometriosis, 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 insurance. 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, affordable, 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 me in tears, explaining that if the Affordable Care Act is repealed or if draconian 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 economic security, and their livelihood, all to achieve a destructive political end—to do it without holding thorough hearings in the committees of jurisdiction, without hearing from experts, and without a complete assessment from the Congressional Budget Office on how this legislation would affect the American people.

I urge my Republican colleagues to once again abandon their efforts to ram through dangerous legislation that would fundamentally restructure our healthcare system. This new iteration of TrumpCare 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 MURRAY have held four bipartisan hearings on individual health insurance market reforms and are working to forge a legislative compromise to reduce premiums for consumers. We have heard from Governors, we have heard from insurance commissioners, and we have heard from experts—all of whom span the ideological 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 colleagues 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 effort to repeal the Affordable Care Act and end the Medicaid Program as we know it.

Do not shortchange those important legislative developments. Do not shortchange 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 the 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 disappointing 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. When that bill failed, I was hopeful that we would move forward on a bipartisan process to make key improvements to the Affordable Care Act. That is exactly the process we have started on in the HELP Committee, focusing on bipartisan solutions to stabilize the health insurance market.

Now, in direct conflict to this important bipartisan work, some of our colleagues are making one last-ditch effort to pass partisan legislation. Make no mistake, Graham-Cassidy is more of the same, and it is every bit as dangerous as the TrumpCare plans we saw this summer, if not worse.

Granite Staters and all Americans should be concerned if this bill is rushed into law. My colleagues are moving so quickly to try to get this bill passed that the CBO says it will not be able to score it by September 30, but it is clear that this bill would make things worse for most 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 its coverage. It would put thousands of people at risk.

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, losing hundreds of millions of dollars in Federal funding for Medicaid over the next decade. This cut 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 ma-

ternity care, prescription drugs, and substance use disorder services.

Finally, this bill would continue Republican efforts to roll back 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 actually play out on the ground 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 all because he knew he 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 community as a result of the personal 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 be taken away 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 are faced with another harmful, partisan TrumpCare bill that will destabilize our healthcare system, drive up premiums, and make care less affordable.

We must come together to build on and improve the Affordable Care Act and ensure that every American has meaningful, truly affordable access to the type of care each of us would choose for our own family. We must reject this proposal and continue moving forward on the bipartisan path we have started on in the HELP Committee.

I am going to keep standing with my Democratic colleagues, and I urge the people of New Hampshire and all Americans to continue to speak out and to share their stories. Together, we will, once again, defeat this attempt to undermine the healthcare of millions of Americans, and we will make clear that in the United States of America, all of our people must be able to get quality, affordable care.

Thank you, Mr. President.

I suggest the absence of a quorum.

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

The senior assistant legislative clerk proceeded to call the roll.

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 every individual identifies with 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 I may be for is going to cause more people to 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 across the aisle 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 been 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 bronze plan was \$6,000 per individual, and for almost all 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 got 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 tens of thousands of dollars 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 Southwest Missouri was a freshman 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 Sarcoux, MO.

He said: In my hometown, almost everybody knows where Washington, DC, is, but here in Washington, almost nobody knows where Sarcoux is. Does that mean the people in Sarcoux are a lot smarter than the people in Washington? Maybe not, but it meant they probably knew what was better for Sarcoux 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 all 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 State governments 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 access to healthcare people in desperate 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 what is good 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 34 senators, and the Governor leading to have a real understanding of where 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 10 people, sending them to Washington, 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 do that than we would to 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, they 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 hav-

ing that 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.

So we are going to have an opportunity to make a big decision about the future of healthcare. We are going to be deciding, among other things, do we trust people to make that decision who are closer to the problem or do we think it is better to try to solve the problem further away from the problem. I think the right answer here is, clearly, what we are doing isn't working.

Let's take advantage of the Constitution and the Federal system of government, 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 KENNEDY lives—that has a unique opportunity 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 opportunity, greatest sensitivity, greatest availability, and greatest understanding 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 Senator 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. He 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 the Presiding Officer, 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 both 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 growth is something special, 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 hamstringing 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 chasing 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 women 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 for economic growth 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 handouts, and we are in the middle and we get stuck with the bill.

They say: KENNEDY, we can't pay it anymore because our health insurance has gone up—thanks to ObamaCare—our kids' tuition has gone up, and our taxes have gone up. I will tell you what hasn't gone up, our wages and our income.

They feel that we in Washington don't listen and we don't care. They feel like they have no voice and no chance, and that anger is understandable.

This bar graph shows U.S. real median household income going all the way back to 1999. We can see where it was in 1999: slightly over \$58,000. This is median household income. Of course, it took a dip in 2012 as a result of the recession, but look where we are in 2016. We are practically right where we were in 1999.

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. That is why I wanted to come 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. Seventy percent of 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, DC. They never 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 one quarter—the U.S. Treasury set a brandnew tax revenue record of \$1 trillion—\$1,084,840,000,000. A lot of that money came out of the hides of ordinary people.

I will give you an example. Right now, if you are a middle-class family in Alexandria, LA—right smack dab in the middle of my State—you have a household income of \$59,000. You have two children. You want your children to have a better future than you had. You claim all your exemptions and you take the standard deduction. You are going to be paying the Federal Government about \$3,500 a year.

That is not even counting what that middle-class family has to pay in State and local taxes or their payments to Social Security or Medicare. By the time their bills are paid and by the time they put gas in the car, that doesn't leave them much to work with.

I have an idea about how tax reform can target the middle class and bring 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 10 years. That is according to a 2014 CRS report. That would be an immediate shot in the arm to the American economy.

That family of four in Alexandria, LA, whom I just talked about would have their Federal tax bill cut to \$1,700, freeing up almost \$2,000 of their hard-earned income. That is \$2,000 toward a new car, a new lawn mower, fixing their home, putting money back into their business, or saving money for their children's college education. It is pretty simple. It is also \$2,000 right back into the economy.

As the cost of earning more is reduced, people will want to work harder. I believe people respond to incentives—not just Americans, but that is human nature. That means more productivity and more growth. It is economics 101. Unless you were throwing a frisbee in the quad, you were in an economics 101 class, and you know that if you give people more to spend and they spend it, the economy is going to grow in the process. I believe, Mr. President, as I know you do, that people can spend their own money better than the government can.

The strength of the middle class was the cornerstone of our past economic growth, and I think it will be the key to our future.

I have said it before, and I will say it again: We do need tax reform for businesses. I repeat: We do need tax cuts for businessmen and businesswomen—not just for the large C corporations but also for the passthroughs, the LLCs, the LLPs, the sub S corporations, and the sole proprietorships and family farms.

If tax reform does not include relief for the middle class, if it doesn't include relief for ordinary Americans, then we will lose a historic opportunity. It will be another generation before we will have this opportunity again, and we will never get our economy back on track unless we can close that loop.

We need to liberate the middle class and their power to spend and their power to save and renew their belief in the American dream. A tax reform policy that provides relief to the middle class, such as doubling the standard deduction—that certainly is not the only way to do it, but it would certainly do the trick—will give people the incentive to work and to save and to invest.

Our economic fate is tied to the health of our middle class. I am not saying that other parts of our great Nation, our economy, are not important, but the bedrock is the middle class. The bedrock is small business. And it is high time that we offer ordinary Americans a tax code that believes in them.

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

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

CLIMATE CHANGE

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 and another 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 contagions.

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 carbon pollution 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 \$280 billion. So \$280 billion is the annual cost that the fossil fuel industry offloads onto the American public in harm from the carbon dioxide emissions. That is a big number and a big consequence—\$280 billion per year.

There was a more complex analysis than my simple math that was done by the International Monetary Fund. The International Monetary Fund has a lot of smart people. They don't have any conflict of interest that I am aware of in dealing with this issue. Their calculation puts the annual subsidy just in the United States of America for the fossil fuel industry at \$700 billion per year.

So is it my simple math where the social cost of carbon is \$280 billion per year or is it what the International Monetary Fund calculated at \$700 billion per year? Whichever it is, it is a big enough harm to the American public that you would think we might do something about it here in the Senate. But of course, we don't because that huge social cost of carbon, that huge subsidy gives the fossil fuel industry the biggest incentive in the world to—instead of fixing up its situation and cleaning up its mess—come over here and instead mess with our politics so that our ability to deal with this issue is silenced by their political muscle and manipulations.

One way in which they play this game is to populate the climate denial machinery with one-eyed accountants—accountants who can only see the pollutants' 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 some 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 from cars. Well, that went up on appeal to the U.S. Court of Appeals for the Ninth Circuit, and in 2007, the Circuit Court of Appeals agreed. The court acknowledged that there is a cost of carbon pollution, and that cost is “certainly not zero.” So it told the agency to go back, redo the rule and to come up with a real social cost of carbon. Thus was born the legal requirement that agencies consider a social cost of carbon in decisions.

Because of this decision, the Bush administration produced a wide range of numbers up to \$159 per ton of carbon emissions. The Obama administration continued the effort to calculate a social cost of carbon. An interagency working group, including scientists and economists from across the Federal Government, relied on existing scientific literature and on well vetted scientific models to produce a first 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 greenhouse gas emissions when it approved an Arch Coal mine expansion in the Gunnison National Forest. 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 commercial refrigeration equipment. The industry objected, and on appeal, the Seventh Circuit said: No, they did the right thing putting that in there.

Just last month, a three-judge panel from another U.S. circuit court of appeals—in this case, the U.S. Court of Appeals for the District of Columbia Circuit—ruled that the Federal Energy Regulatory Commission has to consider the effects of carbon emissions that would result from building three pipelines in the Southeast. Specifically, the ruling directed FERC to either better calculate the project's carbon emissions, using the social cost of carbon, or explain why it didn't use it.

Also last month, another U.S. district court blocked another coal mine expansion in Montana, citing the agency's failure to assess the environmental effects of coal. Specifically, the judge referenced the agency's failure to include any social cost of carbon.

Just last week a Federal appeals court in Denver told the Bureau of Land Management that its lack of analysis on the climate effects of four coal leases in the Powder River Basin was “irrational” and told them to start over.

It is not just Federal courts. Agencies at the State level are also using the social cost of carbon pollution in their activities. The New York Public Service Commission affirmed the importance of the social cost of carbon in its zero-emissions credit program. The Illinois State legislature also incorporated a social cost of carbon into its zero-emissions credit program, and prevailed in a challenge in the courts. These State zero-emissions programs were the programs that were rolled out to help existing nuclear energy providers against competition by natural gas plants. The carbon price allowed carbon-free nuclear generation to better compete in the wholesale markets.

Up in Minnesota, since 1993, the Minnesota Public Utilities Commission has required utilities to consider the estimated cost of carbon emissions in planning for new infrastructure projects. This year, the commission voted to raise its social cost of carbon to \$43 per ton.

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. Private companies 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.

Just last week, the Washington Post reported that 1,200 global businesses either have adopted or are adopting a carbon price in some form. The Center for Climate and Energy Solutions found that companies like Microsoft,

Disney, the insurance giant Swiss Re, Unilever, Shell, BP, the mining corporation Rio Tinto, and General Motors have all taken steps to put a price on their own use of carbon.

Courts have made it the law for agencies to use the social cost of carbon. States are deploying the social cost of carbon. The business community recognizes and is incorporating into its financial planning the social cost of carbon. Yet here in Congress and down at the Trump White House, the leaders of the Republican Party continue to ignore climate change, pretend it doesn't exist, and ignore the very real costs that society bears from carbon pollution.

It goes without saying that the storm that has just ravaged Florida was spun up by warmer ocean waters, carried more rain because of warmer air, dumped more rain, and pushed storm surge further into Florida because of risen seas and those other characteristics.

Are we seeing any action? No. The President in March issued a sweeping Executive order rolling back Federal energy and environmental standards. It disbanded the interagency working group, and it asserted that the social cost of carbon was "no longer representative of governmental policy." Nice try with that, given where the courts are.

Of course, the House and the Senate Republicans followed suit by introducing a pair of bills by Congressman EVAN JENKINS on the House side and our colleague from Oklahoma, Senator LANKFORD, on our side that purport to prohibit the Federal Government from using the social cost of carbon in rule-making and in regulatory processes. Of course, you can't do that, and those laws aren't going anywhere. Why? Because they violate a very basic principle both in courts and in administrative agencies. That very basic principle is at the heart of the rule of law, and it is that facts have to be factual and that conclusions have to be logical. Any decision that fails this standard—that is, to use the administrative law terms "arbitrary and capricious" or "not based on substantial evidence"—fails as a matter of law. Although Congress, of course, is bound and gagged by the polluters and their front groups, it is going to be hard for those polluters to try to stop the social cost of carbon in courts and administrative agencies. Despite the efforts of ExxonMobil and the Koch brothers to make America their fossil fuel banana republic, we still are a rule-of-law country and those rule-of-law principles that facts must be factual and that conclusions must be logical are too basic for our courts and administrative agencies to ignore.

In our courts and administrative agencies, lying and misleading can be exposed on cross-examination, for instance, and lying and misleading gets you punished, unlike in Congress where lying and misleading have been fossil

fuel tactics for decades and sickeningly successful ones backed up by huge political muscle.

The failure in Congress and the remedy in the courts is one reason the Founding Fathers designed our government that way so that even where political branches of government were captured by special interests, there would still be a path for the truth, and there would still be a means for justice to have its way.

If the courts and the States and so many major businesses are all behind recognizing the social cost of carbon, who is behind the President and our Republican colleagues in denying that it is real? In my experience, it is powerful trade associations like the American Petroleum Institute, the American Chemistry Council, the National Association of Manufacturers, the U.S. Chamber of Commerce, and others that have a distaste for any honest assessment of the social cost of carbon.

Right now, since the costs of those industries' pollution is offloaded onto the rest of us for free, why not? Why would they want to start paying for the harm they cause right now?

Think tanks and front groups funded by the Koch brothers and other polluters have vigorously fought against recognizing the fact of the social cost of carbon for years. These groups have neutral sounding names—maybe even friendly sounding names—like the Competitive Enterprise Institute, the American Energy Alliance, the Heritage Foundation, FreedomWorks—my personal favorite—the Heartland Institute, a group so good that it put up billboards comparing climate scientists to the Unabomber. It is really a classy contribution to the debate.

One thing this crowd of bad actors does know is how to throw its weight around, especially since the Citizens United decision threw open the floodgates of special interest money into our politics. That is what has put Congress in the thrall of the polluters. It is an indecent and wrong place for us to be, but with any luck, the adherence of courts and administrative agencies to the rule of law—the principles that facts must be factual and conclusions must be logical—will help us get out of the political trap that the fossil fuel industry has constructed.

With that, I yield the floor.

The PRESIDING OFFICER (Mr. KENNEDY). The Senator from Florida.

HURRICANE IRMA RECOVERY

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 returning to Florida instead of staying here 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 Florida but actually toward the city in which I live. Then the Nation and State watched over the next few days as that storm took its track.

There has been a lot said about Hurricane Irma since that time. I have heard some say that it could have been worse, and I imagine in some particular instances perhaps that is true. Had that storm entered through Tampa Bay, FL, the loss would have been incalculable. Had it hit directly throughout the southeast coast, right through the major metropolitan areas of Miami-Dade, Broward, and Palm Beach Counties, the economic costs would have been very significant. So it is possible that the storm could have had an even greater impact, but it is difficult to say that to the people who were impacted by it.

It was a unique storm in a lot of different ways, like the sheer scope of it. One of the things that really perplexed people in Florida, including myself—we were thinking perhaps we should move our families to another part of the State. We have a very good building code in Florida, but there are no structures under our building code that can withstand the hurricane winds of a category 4 storm. It is very difficult to do that, given the height and level of construction.

One of the difficult things about figuring out where to go is that the whole State was covered by it. It was a huge storm in its size and an enormous storm in its impact. I know for a fact that dozens of people left South Florida, as an example, and drove to another part of the State, only to find themselves actually worse off than they would have been had they stayed home. There was no way to know that at the time.

I can tell you, maybe it is because of our history with hurricanes. Obviously, in 1992, as a student at the University of Florida, I was home, the semester was about to begin, and Hurricane Andrew came barreling through there. It fundamentally altered what South Dade looked like.

Whether it was the impact of the storms in 2004 or 2005 or perhaps it was the images from Harvey from just a few weeks ago and the impact it has had on Houston and the State of Texas, people took the threat incredibly seriously, and there was a massive evacuation, perhaps the single largest evacuation in the history of the United States.

In any event, the storm did come. We measure the impact of the storm first and foremost by the loss of life, and there were 59 people who lost their lives—directly related to the storm in one way or another. Eleven of those people died after the storm from carbon monoxide poisoning. When power is lost, people run generators, sometimes even running them inside their homes. Carbon monoxide gets on them, and before you know it, they are dead. At least a dozen more didn't die, but they had been poisoned. It is an incredible threat after storms that we see every single time.

Nine people died in Monroe County, some from natural causes, although it

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's air-conditioning unit failed them in the middle of the night. The heat became unbearable, and they passed.

You can only think, despite these horrible tragedies of losing 59 people, how many more would have died had they not heeded 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 they 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, they have 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 for the extraordinary work they do every day but in particular—at this moment—because of the storm.

We think about the National Guard. These were people who, on Monday or Tuesday of that week, were at the accounting firm or doing whatever their job might be. They were called up, and within a matter of hours found themselves on the road and headed toward an uncertain number of days that lay ahead.

We think of all the people throughout the emergency operations centers—from the State center in the capital to all of the counties—who put in over a dozen hours a day, if not more, preparing to handle the storm.

We thank the Coast Guard for the extraordinary work they do and the Department of Defense, particularly the Navy, which were prepared to respond—and did so—to the storm, even as many of them were coming off similar duty just a few weeks earlier responding to Harvey.

Of course, we thank the first responders, who came in from all over the country. I was in the Florida Keys on Friday, and I ran into firefighters and police officers from as far away as Colorado, and we thank them for coming all the way to Florida to help us. We could not have done it without them.

I would also be remiss if I didn't thank the National Hurricane Center. The improvements that have continued to happen year after year have helped improve not just the forecast track of the storm but its intensity, even though I can tell you, all hurricanes are bad. Obviously, the stronger they get, the more damaging they become. I would just say that the work they do—we had 5, 6 days to get ready for this, and it all began because of the Na-

tional Hurricane Center. They don't always have that much time, but they were able to give us and everyone proper notice. You can't carry out these evacuations unless you have accurate meteorological information, and they did an extraordinary job and continue to do so now, monitoring the new storm that tomorrow is going to make landfall over the island of Puerto Rico, potentially as a category 5 but certainly a category 4; I will talk about that more in a moment. 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 huge State.

From Jacksonville, FL, in the northeast all the way down to Key West is a long distance, and we are talking about a storm that had damage in Key West, damage in Jacksonville and the southwest in Naples and the central part of the State and the southeast. Literally, the entire State of Florida was impacted by the storm because of its size and because of the route that it took, and that poses all kinds of challenges.

Our emergency operations system is built on the idea that if two counties are hit, all the other counties help respond. Well, every county was being hit. Every county was getting ready. So that right away put a real strain on our emergency operations system. We were counting on other counties being able to help us, but they couldn't because they themselves were getting ready to deal with the impact of the storm.

There were prepositioned assets in Alabama and Georgia getting ready to come down and help us, but they themselves were also in the track of the tropical storm and winds headed in their direction, not to mention the impact it had on their ability to get there. So it impacted the entire State.

You know, we have gotten trained, in watching these storms, to see images of destroyed buildings. Obviously, that is a terrible thing. We lived through that with Andrew, and we have our share of that. If you see the images of the Florida Keys, you can tell quickly that a storm went through there. But underneath the surface, underneath the structures that might still be standing and the roofs that might still be intact are deep scars and damage that will be around and will impact us for months if not years to come.

Think, for example, of the Florida Keys. If you haven't been there, it is an incredibly unique place. There is only one way in and one way out. It is a chain of small islands built on a coral rock formation, and it is truly unique. The further south you get in the Keys

and the further southwest you get as it turns, the more unique it gets. It is a place where I have spent many days, especially with our family. Some of our best memories with the family were made in the Florida Keys. We spent a number of days there not long ago before the storm.

If you know anything about the Florida Keys, this is not a place with Johnny Rockets or TGI Fridays. It has a lot of small businesses, not just in the restaurant industry but in the hotels, the bait shops, the charter captains, and everything in between. There are a lot of small businesses, and many of them are generational businesses. The families have been there and have been doing it for 60 years. Those businesses are literally going to have no customers now or for the foreseeable future. They still don't have power in many places. They don't have internet. They don't have fuel. They certainly don't have tourists.

Imagine 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 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 people who work 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 an 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 Southeast. 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 floodwater, it cannot be used or sold. The FDA says it can no longer be consumed safely. They lost all of it, on top of 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 an orange tree and next 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 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 because that crop 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 gets put back on and the schools reopen, 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 the 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 scoff about power outages. I don't know how 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 or people who require 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, because these trailer parks are 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. That means that we will lose our housing 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.

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 significant 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 food in their 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 clean up these roads, and 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 be going to Naples, FL, and Fort Myers later this week. We will be back 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 homes and put tarps on 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 have 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 these principals, custodians, and 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. We were able to match them with a donor, who insists on remaining anonymous, 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 Naples and Miami. 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—who 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 no longer go 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, I ask unanimous consent that the Senate be in a period of morning business, with Senators permitted to speak therein for up to 10 minutes each.

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

HONORING OUR ARMED FORCES

STAFF SERGEANT AARON BUTLER

Mr. HATCH. Mr. President, it is with great reverence that I rise 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, Butler 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 the rank of 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, teammate, 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 fiancée, 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, grandchildren, 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 threats and harassments. 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. Ultimately, democracy cannot 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 alltime high, with companies around the globe putting greater emphasis on 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 killed 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 inter-agency 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 (j), the Assistant Secretary of State for Democracy, Human Rights, and Labor shall consult with the Committee and with representatives of civil society and independent media organizations whose members have been threatened or killed. 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 all 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 2015 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 service members and other United States citizens or nationals, or to nationals of the North Atlantic Treaty Organization (NATO) or major non-NATO allies initially designated pursuant to 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 report 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 more people infected with 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 disposed of 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 contribu-

tions 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 mentioned makes 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 in Haiti any more than we have caused countless other calamities 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 of Nyumbani. Despite confronting 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 as-

surance 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 will. He was a man whose friendship I cherished.

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 of HIV.

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 his knowledge 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 rollcall vote No. 201, 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 rollcall vote No. 202, the motion to invoke cloture on the nomination of William J. Emanuel, of California, to be a Member of the National Labor Relations Board. 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 1967 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, Kalth 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 LIEUTENANT COLONEL BARRY GASDEK

Mr. ENZI. Mr. President, I wish to honor retired LTC Barry Gasdek of Laramie, WY, for his decades of past and present service to our country, the sacrifices he has made, and to commemorate his recent naming as commander of Region III of the Military Order of the Purple Heart.

A man of distinction, heroism, and continuous achievement, Mr. Gasdek is a supremely decorated veteran, having been awarded the Distinguished Service Cross, the Silver Star, five Bronze Stars, the Soldier's Medal, 17 Air Medals, and two Purple Hearts, among

other awards. Mr. Gasdek earned these Purple Hearts during his service in Vietnam for wounds he sustained under heavy enemy fire and explosives. It was once said by his commander that Mr. Gasdek was a "magnet" for enemy fire, but this didn't stop him from charging forward to protect his men and give them the leadership they needed when they found themselves right in the thick of it.

It is clear to anyone who knows Mr. Gasdek that he is an outstanding American veteran, and his valor has not gone unnoticed. I congratulate Mr. Gasdek for his achievement with the Military Order of the Purple Heart and wish him the very best with his continued work helping Wyoming veterans in need.

Thank you.

ADDITIONAL STATEMENTS

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 Com-

merce, 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 assisted the 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 appreciation to Alison for all of the fine work she did for the committee and wish her continued success in the years to come.●

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 the 10th 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 with Oregon's 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 41st.

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 of both.

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 friends don't flibuster 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 leaders took 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 sprung 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.

I wish Brunk, 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, and Wisconsin; Modification of Allocation of Assessments" (Docket No. AMS-SC-16-0104) 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 Attorney General, 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 Presidential \$1 Dollar Coin 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) 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 of a rule entitled "Endangered and Threatened Species; Designation of Critical Habitat for the Endangered New York Bight, Chesapeake Bay, Carolina and South Atlantic Distinct Population Segments of Atlantic Sturgeon and the Threatened Gulf of Maine Distinct Population Segment of Atlantic Sturgeon" (RIN0648-BF48) received in the Office of the President of the Senate on September 13, 2017; to the Committee on Environment and Public Works.

EC-2848. A communication from the Regulations Coordinator, Office of Strategic Operations and Regulatory Affairs, Department of Health and Human Services, transmitting, pursuant to law, the report of a rule entitled "Adjustment of Civil Monetary Penalties for Inflation; Correcting Amendment" (RIN0991-AC0) received in the Office of the President of the Senate on September 14, 2017; to the Committee on Finance.

EC-2849. 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-2850. 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-2851. 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 various machine guns and spare barrels to the United Arab Emirates in the amount of \$1,000,000 or more (Transmittal No. DDTC 16-117); to the Committee on Foreign Relations.

EC-2852. A communication from the Deputy Assistant Secretary, Bureau of Legislative Affairs, Department of State, transmitting, pursuant to the Arms Export Control Act, the certification of a proposed transfer of major defense equipment relative to the transfer of 50,000 M107 artillery rounds from the Republic of Korea to the Kingdom of Saudi Arabia in the amount of \$60,000,000 or more; 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 interdiction 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 13313 of July 31, 2003, a semiannual report detailing telecommunications-related payments made to Cuba pursuant to Department of the Treasury licenses; 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 relative to 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 "Report and Order and Further Notice of Proposed Rulemaking" (FCC 17-111) received during adjournment of the Senate in the Office of the President of the Senate on September 15, 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:

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 Transportation 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 the events of 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,"; and

Whereas, In order to improve surface transportation and maritime security, the bill requires the TSA to assess the risk of terrorist 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 increased passenger manifest data to better identify rail passengers in an emergency; and

Whereas, With its many miles of highways and railways, busy ports, 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 explosive devices 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 marine fish conservation 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:

S. Res. 168. A resolution supporting respect for human rights and encouraging inclusive governance in Ethiopia.

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. 1848. 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 Balash, of Alaska, to be an Assistant Secretary of the Interior.

*Ryan Douglas Nelson, of Idaho, to be Solicitor of the Department of the Interior.

*Richard Glick, 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.

*Doug Manchester, of California, to be Ambassador Extraordinary and Plenipotentiary of the United States of America to the Commonwealth of The Bahamas.

Nominee: Douglas F. Manchester.

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.

Date, Group, Contribution, Made by:
2/25/2013, Taxpayers for Wyland, 77 \$2,000.00, MFG;

4/1/2013, Kaitlyn M. Lavery, \$1,550.00, MFG;
5/6/2013, Jeb Bush, \$5,000.00, DFM;
5/28/2013, Carl DeMaio For Congress, \$5,200.00, DFM;

7/26/2013, Republican Party, \$5,000.00, MFG;
8/19/2013, Rubio Victory Committee, \$15,000.00, DFM;

8/29/2013, Republican Party Gold Sponsor, \$5,000.00, MFG;

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, \$100.00, DFM;

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, MFG;

4/22/2014, Zapf for Council, \$550.00, DFM;
4/22/2014, Cate for Council, \$550.00, DFM;

5/15/2014, Republican Party, \$20,000.00, MFG;
5/15/2014, National Republican Cong Com-

mittee, \$5,000.00, DFM;

5/16/2014, Republican Party of San Diego County, \$10,000.00, DFM;

6/20/2014, Shirley Horton, \$6,000.00, MFG;
8/5/2014, New Majority Dues 2014, \$10,000.00, MFG;

8/12/2014, Texans for Greg Abbo, \$25,000.00, DFM;

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, DFM;

9/22/2014, Darrell Issa, \$10,000.00, DFM;

9/26/2014, Republican Party of San Diego County, \$25,000.00, DFM;

9/30/2014, Cate for Council, \$550.00, Geniya;

10/16/2014, NRCC, \$10,000.00, DFM;

10/17/2014, Victory Congress, \$5,200.00, DFM;

10/17/2014, Victory Congress, \$2,600.00, Geniya;

10/20/2014, Republican Party, \$15,000.00, MFG;

12/29/2014, NRCC, \$500.00, DFM.

1/13/2015, Rubio Victory Committee, \$2,600.00, DFM;

1/14/2015, RickPAC, \$10,000.00, DFM;

1/20/2015, NRCC, \$500.00, DFM;

1/21/2015, Our American Revival, \$5,000.00, DFM;

3/20/2015, Right to Rise PAC, \$25,000.00, DFM;

5/6/2015, Carly for America, \$10,000.00, DFM;

6/8/2015, Faulconer for Mayor, \$1,050.00, DFM;

6/8/2015, Ray Ellis for Council, \$550.00, DFM;

6/8/2015, Carly for America, \$2,500.00, DFM;

6/8/2015, Sherman for City Council, \$550.00, DFM;

6/9/2015, Sherman for City Council, \$550.00, Geniya;

6/12/2015, Republican Party of San Diego, \$5,000.00, DFM;

6/30/2015, Phil Graham for Assembly, \$4,200.00, DFM;

7/2/2015, Carly for President, \$2,700.00, DFM;

7/15/2015, Scott Walker Inc. Testing The Waters, \$2,700.00, DFM;

8/13/2015, New Majority Dues 2015, \$10,000.00, MFG;

9/30/2015, Make America Great PAC, \$50,000.00, MFG;

10/22/2015, Lincoln Club of San Diego Dinner Sponsor, \$1,250.00, MFG;

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, \$4,200.00, 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, \$10,000.00, MFG;
 9/23/2016, Darrell Issa Victory Fund, \$10,800.00, DFM;
 9/26/2016, Denise Gitsham for Congress, \$2,700.00, Geniya;
 9/28/2016, Trump Victory, \$89,162.47, DFM;
 10/20/2016, 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.

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.
3. Grandparents: None.
6. Brothers and Spouses: None.
7. Sisters and Spouses: None.

Transaction Date, Filing Period Name, Contributor Name, Contribution Amount, Receiving Committee Name:

6/23/2016, July Continuing 2016, King, Steven, 100.00, Republican Party of Rock County; 4/23/2015, July Continuing 2015, King, Steve B., 20.00, Republican Party of Wisconsin; 2/20/2015, Spring Pre-Election 2015 (/20th Senate Special), King, Steve B., 20.00, Republican Party of Wisconsin; 8/15/2014, Fall Pre-Election 2014, King, Steve B., 5000.00 Republican Party of Wisconsin; 9/22/2014, Fall Pre-Election 2014, King, Steve B., 20.00, Republican Party of Wisconsin; 12/12/2013, January Continuing 2014, King, Steve B., 20.00 Re-

publican Party of Wisconsin; 10/2/2013, Special Pre-Primary 2013 (21st & 69th Assembly), King, Steve B., 20.00, Republican Party of Wisconsin; 5/9/2013, July Continuing 2013, King, Steve, 30.00, Republican Party of Wisconsin; 5/9/2013, July Continuing 2013, King, Steve, 55.00, Republican Party of Wisconsin; 5/9/2013, July Continuing 2013, King, Steve, 25.00, Republican Party of Wisconsin; 5/9/2013, July Continuing 2013, King, Steve, 60.00, Republican Party of Wisconsin; 5/9/2013, July Continuing 2013, King, Steve, 60.00, Republican Party of Wisconsin.

Transaction Date, Filing Period Name, Contributor Name, Contribution Amount, Receiving Committee Name:

3/18/2015, Spring Pre-Election 2015 (/20th Senate Special), King, Stephen, 500.00, Judge Daley for Supreme Court Committee; 10/30/2014, January Continuing 2015, King, Stephen*, 2500.00, Friends of Scott Walker; 11/3/2014, January Continuing 2015, King, Stephen, 500.00, 1st District Republican Party of Wisconsin; 9/12/2014, Fall Pre-Election 2014, King, Stephen, 500.00, Schimel for Attorney General; 5/5/2014, July Continuing 2014, King, Stephen, 1000.00, Schimel for Attorney General; 6/26/2014, July Continuing 2014, King, Stephen, 1000.00, Taxpayers for Marklein; 3/8/2013, 98th Assembly/Spring Pre-Election 2013, King, Stephen, 1000.00, Justice Roggensack for Supreme Court Committee.

Transaction Date, Contribution Amount, Contributor Name, Receiving Committee Name:

6/23/2016, 100.00, King, Steven, Republican Party of Rock County; 4/23/2015, 20.00, King, Steve B., Republican Party of Wisconsin; 2/20/2015, 20.00, King, Steve B., Republican Party of Wisconsin; 8/15/2014, 5000.00, King, Steve B., Republican Party of Wisconsin; 9/22/2014, 20.00, King, Steve B., Republican Party of Wisconsin; 12/12/2013, 20.00 King, Steve B., Republican Party of Wisconsin; 10/2/2013, 20.00, King, Steve B., Republican Party of Wisconsin; 5/9/2013, 30.00, King, Steve, Republican Party of Wisconsin; 5/9/2013, 55.00, King, Steve, Republican Party of Wisconsin; 5/9/2013, 25.00, King, Steve, Republican Party of Wisconsin; 5/9/2013, 60.00, King, Steve, Republican Party of Wisconsin; 5/9/2013, 60.00, King, Steve, Republican Party of Wisconsin.

Steve King North Carolina contributions:

(1) 08/27/2015, \$1,000.00 Check.
 General; Pat McCrory Comm; 2015 Year End Semi-Annual (Amendment); Stephen B. King; PO Box 596, Manteo, NC 27954-0596; Investments; King Capital.

(2) 10/04/2016; \$1,000.00 Check.
 General; Pat McCrory Comm; 2016 Third Quarter; Stephen B. King; PO Box 596, Manteo, NC 27954-0596; Investments; King Capital.

Karen King Federal contributions:
 7/17/2013; \$1,000 to Wells Griffith for Congress.

Karen R. King, Janesville, WI.
 Name, Committee Name, Date Occurred, Amount:

Karen King, Comm to Elect Paul Tine, 2/10/2012, 1000; Karen King, Comm to Elect Paul Tine, 5/26/2012, 500; Karen King, Comm to Elect Paul Tine, 9/18/2012, 1000; Karen King, Comm to Elect Paul Tine, 6/25/2013, 4000; Karen King, Comm to Elect Paul Tine, 8/5/2014 1000.

Contributor Name, City, State, ZIP Code, Employer, Occupation, Committee Name, Transaction Date, Amount, Image Number:

King, Stephen, Janesville, WI, 53545, King Capital, LLC, Owner, Republican Party of Wisconsin, 9/16/2013, 5000.00, 14960561564; King, Stephen, Janesville, WI, 53545, King Capital, LLC, Self, Investor, Ryan, Paul D. via Ryan for Congress, Inc. 10/22/2013, 1000.00, 14960039086; King, Stephen B. Mr., Janesville, WI, 53545, King Capital, LLC, Johnson, Ron Harold via Ron Johnson for Senate Inc. 10/07/

2016, 1000.00 201610280200624262; King, Stephen B. Mr., Janesville, WI, 53545, King Capital, LLC, Johnson, Ron Harold via Ron Johnson for Senate Inc. 10/07/2016, 1000.00 201701190200013461; King, Stephen B., Janesville, WI, 53545, King Capital, LLC, Investments, Republican Party of Wisconsin, 01/04/2016, 5000.00, 201606069017474151; King, Stephen R. Mr., Janesville, WI, 53545, King Capital, LLC, Owner, Johnson, Ron Harold via Ron Johnson for Senate Inc. 08/17/2015, 1000.00, 201602010200017836; King, Stephen R. Mr., Janesville, WI, 53545, King Capital, LLC, Owner, Johnson, Ron Harold via Ron Johnson for Senate, Inc., 12/31/2015, 1000.00 201602040200063732.

Steve King, Republican Party of Wisconsin, 06/20/2016, \$750.00.

Steve King, Missouri Repub State Federal Comm, 07/30/2013, \$217.00.

Steve King, Republican National Committee, 12/23/2014, \$350.00.

*John R Bass, 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 Islamic Republic of Afghanistan.

Nominee: John R. Bass.

Post: Kabul.

(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.
2. Spouse: Holly Holzer Bass: \$500, 09/19/2016, Hillary for America.
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; Vilma Schmuckmier—deceased; Glenn Bass—deceased; Maude Bass—deceased.

6. Brothers and Spouses: 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; \$5000, 09/30/2016, Hillary for America; \$1000, 10/21/2015, Grassley Committee; \$500, 09/24/2014, Young, David, via Young for Iowa, Inc.; \$500, 09/30/2013, Young, David, via Young for Iowa, Inc.; \$500, 06/24/2014, Chris Gibson for Congress; \$1000, 4/30/2013, The Hawkeye PAC.

Pharmaceutical Care Management Association Political Action Committee (PCMA PAC):

\$2500, 06/16/2017;
 \$1154, 12/15/2016;
 \$1346, 09/30/2016;
 \$1346, 06/10/2016;
 \$1154, 03/29/2016;
 \$2500, 12/31/2015;
 \$1346, 08/12/2015;
 \$1154, 04/20/2015;
 \$1346, 01/29/2015;
 \$1154, 10/29/2014;
 \$1346, 07/15/2014;
 \$1154, 04/01/2014;
 \$1539, 01/15/2014;
 \$961, 09/24/2013;
 \$1346, 06/25/2013;
 \$1153, 03/19/2013.

Sister: Kim E Bass, None.

*Kathleen Troia McFarland, of New York, to be Ambassador Extraordinary and Plenipotentiary of the United States of America to the Republic of Singapore.

Nominee: Kathleen Troia McFarland.

Post: Singapore.

(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.
2. Spouse: None.
3. Children and spouses: Gavin McFarland: 06/21/2016, \$500, Chaz Beasley—NC House; 10/18/2014, \$500, for Tim Bishop for Congress; 10/18/2014, \$500 for Act Blue—PAC.
4. Parents: deceased.
5. Grandparents deceased.
6. Brothers and spouses: no contributions.
7. Sisters and spouses: no contributions.

*Steven T. Mnuchin, of California, to be 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.

*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, 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 Seventy-second Session of the General Assembly of the United Nations.

*Christopher Smith, of New Jersey, to be Representative of the United States of America to the Seventy-second Session of 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. CASEY, Mr. GARDNER, Mr. CARDIN, 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. UDALL):

S. 1832. A bill to prohibit Federal agencies from using Government funds to pay for the lodging of agency employees at establishments that are 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. HEINRICH, Mr. BENNET, Mr. WYDEN, and Mr. MARKEY):

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. RUBIO, Mr. CASEY, and Ms. COLLINS):

S. 1834. A bill to amend title XXVIII of the Public Health Service Act to establish a 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 high risk pool or reinsurance programs; to the Committee on Finance.

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

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. REED, Mr. BLUMENTHAL, Mr. MARKEY, and Mr. FRANKEN):

S. 1837. A bill to amend the Internal Revenue Code of 1986 to provide tax rate parity among all tobacco products, and for other purposes; to the Committee on Finance.

By Ms. WARREN (for herself, Mr. BROWN, Mrs. GILLIBRAND, Ms. BALDWIN, Mr. MERKLEY, Mr. MARKEY, 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 of 1986 to provide a working America tax credit; 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, Mrs. FEINSTEIN, Mr. RISCH, Ms. CANTWELL, Mr. HATCH, Mr. MERKLEY, 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 1986 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. Kaine, 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. 198

At the request of Mr. RUBIO, the name of the Senator from Wisconsin (Ms. BALDWIN) was added as a cosponsor of S. 198, 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. 206

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. 322

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. 360

At the request of Ms. KLOBUCHAR, the name of the Senator from Massachusetts (Mr. MARKEY) was added as a cosponsor of S. 360, a bill to amend the Help America Vote Act of 2002 to require States to provide for same day registration.

S. 372

At the request of Mr. PORTMAN, the name of the Senator from North Dakota (Mr. HOEVEN) was added as a cosponsor of S. 372, 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 and for other purposes.

S. 431

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. 459

At the request of Mr. RUBIO, the name of the Senator from Colorado (Mr. GARDNER) was added as a cosponsor of S. 459, 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. 479

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. 497

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. 619

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. 642

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. 660

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. 678

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 delcare 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. 693

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. 777

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. 819

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. 830

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. 948

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. 1004

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. 1050

At the request of Ms. DUCKWORTH, the name of the Senator from Rhode Island (Mr. WHITEHOUSE) was added as a

cosponsor of S. 1050, 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.

S. 1132

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.

S. 1256

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.

S. 1310

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.

S. 1361

At the request of Mr. CRAPO, the name of the Senator from Idaho (Mr. RISC) 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.

S. 1590

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.

S. 1595

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.

S. 1686

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 Magnuson-Stevens Fishery Conservation and Management Act to provide for management of red snapper in the Gulf of Mexico, and for other purposes.

S. 1693

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 services of Federal and State criminal and civil law relating to sex trafficking.

S. 1764

At the request of Mr. BOOKER, the name of the Senator from New Mexico (Mr. UDALL) was added as a cosponsor of S. 1764, a bill to extend the principle of federalism to State drug policy, provide access to medical marijuana, and enable research into the medicinal properties of marijuana.

S. 1766

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.

S. 1783

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.

S. 1791

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.

S. 1808

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.

S. 1827

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.

S. 1828

At the request of Mr. REED, the names of the Senator from New York (Mrs. GILLIBRAND) and the Senator from Massachusetts (Mr. MARKEY) 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.

S. RES. 139

At the request of Mr. WYDEN, the names of the Senator from Wisconsin (Ms. BALDWIN), the Senator 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.

S. RES. 250

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 in 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 homeowners' reinsurance program, developed in the 1990s 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, completed 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 views on how a reinsurance mechanism 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's 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, by demonstrating that their program 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 the HELP 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. Alaska's invisible 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 \$12,500 per person, 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 a dollar over 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 make above 400 percent who knew 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 billion 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 guardrails 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 surely we ought to be able to come together and build on the good work that the leaders of the HELP Committee have done—work that more than 60

Senators have witnessed and participated in by attending coffees that Senator LAMAR ALEXANDER and Senator PATTY MURRAY have sponsored with our witnesses and by participating in the HELP Committee hearings. They have worked hard to produce a bill that would really make a difference.

The bill Senator NELSON and I are introducing today helps to fill out the reinsurance provisions that I know from attending each of those hearings have been widely supported by virtually every witness who testified before us. It would enable States to stand up their own reinsurance program simply and quickly, and it would reduce the costs of the Federal Government if we used the section 1332 flow-through mechanism far below what would otherwise be required. Most important of all, it is something that we could do right off, along with the cost-saving reductions, which help low-income people with their copays and their deductibles—their out-of-pocket costs. Those two steps are actions that we could take right now to help moderate premium increases that would otherwise occur and that would be of real benefit to anyone who is in the individual market.

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

S. 1837. A bill to amend the Internal Revenue Code of 1986 to provide tax rate parity among all tobacco products, and for other purposes; to the Committee on Finance.

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. 1837

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 “Tobacco Tax Equity Act of 2017”.

SEC. 2. ESTABLISHING EXCISE TAX EQUITY AMONG ALL TOBACCO PRODUCT TAX RATES.

(a) TAX PARITY FOR PIPE TOBACCO AND ROLL-YOUR-OWN TOBACCO.—Section 5701(f) of the Internal Revenue Code of 1986 is amended by striking “\$2.8311 cents” and inserting “\$24.78”.

(b) TAX PARITY FOR SMOKELESS TOBACCO.—(1) Section 5701(e) of the Internal Revenue Code of 1986 is amended—

(A) in paragraph (1), by striking “\$1.51” and inserting “\$13.42”;

(B) in paragraph (2), by striking “\$0.33 cents” and inserting “\$5.37”; and

(C) by adding at the end the following:

“(3) SMOKELESS TOBACCO SOLD IN DISCRETE SINGLE-USE UNITS.—On discrete single-use units, \$50.33 per thousand.”.

(2) Section 5702(m) of such Code is amended—

(A) in paragraph (1), by striking “or chewing tobacco” and inserting “, chewing tobacco, or discrete single-use unit”;

(B) in paragraphs (2) and (3), by inserting “that is not a discrete single-use unit” before the period in each such paragraph; and

(C) by adding at the end the following:

“(4) DISCRETE SINGLE-USE UNIT.—The term ‘discrete single-use unit’ means any product containing tobacco that—

“(A) is not intended to be smoked; and

“(B) is in the form of a lozenge, tablet, pill, pouch, dissolvable strip, or other discrete single-use or single-dose unit.”.

(c) TAX PARITY FOR LARGE CIGARS.—

(1) IN GENERAL.—Paragraph (2) of section 5701(a) of the Internal Revenue Code of 1986 is amended by striking “52.75 percent” and all that follows through the period and inserting the following: “\$24.78 per pound and a proportionate tax at the like rate on all fractional parts of a pound but not less than 5.033 cents per cigar.”.

(2) GUIDANCE.—The Secretary of the Treasury, or the Secretary’s delegate, may issue guidance regarding the appropriate method for determining the weight of large cigars for purposes of calculating the applicable tax under section 5701(a)(2) of the Internal Revenue Code of 1986.

(d) TAX PARITY FOR ROLL-YOUR-OWN TOBACCO AND CERTAIN PROCESSED TOBACCO.—Subsection (c) of section 5702 of the Internal Revenue Code of 1986 is amended by inserting “, and includes processed tobacco that is removed for delivery or delivered to a person other than a person with a permit provided under section 5713, but does not include removals of processed tobacco for exportation” after “wrappers thereof”.

(e) CLARIFYING TAX RATE FOR OTHER TOBACCO PRODUCTS.—

(1) IN GENERAL.—Section 5701 of the Internal Revenue Code of 1986 is amended by adding at the end the following new subsection:

“(i) OTHER TOBACCO PRODUCTS.—Any product not otherwise described under this section that has been determined to be a tobacco product by the Food and Drug Administration through its authorities under the Family Smoking Prevention and Tobacco Control Act shall be taxed at a level of tax equivalent to the tax rate for cigarettes on an estimated per use basis as determined by the Secretary.”.

(2) ESTABLISHING PER USE BASIS.—For purposes of section 5701(i) of the Internal Revenue Code of 1986, not later than 12 months after the later of the date of the enactment of this Act or the date that a product has been determined to be a tobacco product by the Food and Drug Administration, the Secretary of the Treasury (or the Secretary of the Treasury’s delegate) shall issue final regulations establishing the level of tax for such product that is equivalent to the tax rate for cigarettes on an estimated per use basis.

(f) CLARIFYING DEFINITION OF TOBACCO PRODUCTS.—

(1) IN GENERAL.—Subsection (c) of section 5702 of the Internal Revenue Code of 1986 is amended to read as follows:

“(c) TOBACCO PRODUCTS.—The term ‘tobacco products’ means—

“(1) cigars, cigarettes, smokeless tobacco, pipe tobacco, and roll-your-own tobacco, and

“(2) any other product subject to tax pursuant to section 5701(i).”.

(2) CONFORMING AMENDMENTS.—Subsection (d) of section 5702 of such Code is amended by striking “cigars, cigarettes, smokeless tobacco, pipe tobacco, or roll-your-own tobacco” each place it appears and inserting “tobacco products”.

(g) TAX RATES ADJUSTED FOR INFLATION.—Section 5701 of such Code, as amended by subsection (e), is amended by adding at the end the following new subsection:

“(j) INFLATION ADJUSTMENT.—

“(1) IN GENERAL.—In the case of any calendar year beginning after 2017, the dollar amounts provided under this chapter shall each be increased by an amount equal to—

“(A) such dollar amount, multiplied by

“(B) the cost-of-living adjustment determined under section 1(f)(3) for the calendar year, determined by substituting ‘calendar year 2016’ for ‘calendar year 1992’ in subparagraph (B) thereof.

“(2) ROUNDING.—If any amount as adjusted under paragraph (1) is not a multiple of \$0.01, such amount shall be rounded to the next highest multiple of \$0.01.”.

(h) EFFECTIVE DATES.—

(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)(C), (b)(2), and (d) shall apply to articles removed (as defined in section 5702(j) of the Internal Revenue Code of 1986) after the date that is 6 months after the date of the enactment of this Act.

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

(4) OTHER 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. 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.

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”.

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.—

“(i) 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—

“(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 physical condition inspection occurs; and

“(cc) in the case of covered housing not described in item (aa) or (bb), not later than a date established by the Secretary;

“(II) provide that a visual assessment alone is not sufficient for purposes of complying with subclause (I);

“(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, 2684), 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); and

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

“(iii) EXCEPTIONS.—The regulations promulgated under clause (ii) shall provide an exception to the requirement under subclause (I) of such clause for covered housing—

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

“(aa) that the owner conducted a risk assessment of the covered housing 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 all lead-based paint has been identified and removed and clearance has been achieved in accordance with regulations promulgated under section 402 or 404 of the Toxic Substances Control Act (15 U.S.C. 2682, 2684), as applicable;

“(III)(aa) if lead-based paint hazards are identified in the dwelling unit in the covered housing in which the family will reside or is expected to reside;

“(bb) the dwelling unit is unoccupied;

“(cc) the owner of the covered housing, without any further delay in occupancy or increase in rent, provides the family with an-

other dwelling unit in the covered housing that has no lead-based paint hazards; and

“(dd) the common areas servicing the new dwelling unit have no lead-based paint hazards; and

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

“(B) RELOCATION.—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. 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.

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 interdicting 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 DHS's Under Secretary for Strategy, Policy, and Plans includes 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, disasters.

I thank Senator HASSAN for being an original cosponsor 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 legislation.

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 feedback from organizations representing the needs of children,” after “stakeholder feedback”.

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 “; and”; and

(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 into Department policy in accordance with 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 information on the following:

(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 where 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.

(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 indispensable 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.

S. RES. 263

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, min-

ing 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 of territory have been incorporated into the National System of Protected Areas, including Chiribiquete National Park, Corales de Profundidad National Park, Acandí, Playón and Playona Wildlife Sanctuaries, and Bahía Portete -Kaurrele National Natural Park;

Whereas Colombia now has 28,400,000 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 Vision 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. KAINE, and Ms. KLOBUCHAR) submitted the following resolution; which was referred to the Committee on the Judiciary:

S. RES. 264

Whereas in September 2017, "National Kinship Care Month" is observed;

Whereas nationally 2,700,000 children are living in kinship care with grandparents or other relatives;

Whereas nationally more than 125,000 kinship children in foster care are placed with grandparents or other relatives, with more

than 2,570,000 kinship children supported outside of the foster care system;

Whereas grandparents and other relatives are increasingly providing caring homes for children because of the opioid crisis;

Whereas grandparents and relatives residing in urban, rural, and suburban households in every county of the United States have stepped forward out of love and loyalty to care for children during times in which biological parents are unable to do so;

Whereas kinship caregivers provide safety, promote well-being, and establish stable households for vulnerable children;

Whereas kinship care enables a child—

(1) to maintain family relationships and cultural heritage; and

(2) to remain in the community of the child;

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 age or 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 parts B and E of title IV of the Social Security Act (42 U.S.C. 601 et seq.), and other 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:

S. RES. 265

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 more than 812,000 of those older adults were subsequently hospitalized;

Whereas, in 2014, more than 27,000 older adults died from injuries related to unintentional falls and the 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 2020; 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 evidence-based 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 health care 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 incidents 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 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 Senate 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 then convene for a pro forma 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 later in the day, 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 pre-

vented 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. How illogical and irresponsible to pretend, as 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 ruin the gains 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; and those with preexisting conditions could see their premiums skyrocket, leaving them with no affordable options and nowhere to turn. It would be a humanitarian catastrophe. This is not hyperbole. It is not exaggeration. It is reality.

In a recent report on this legislation, there was a finding that a person with metastatic cancer would see a \$142,650 premium surcharge; a pregnancy would mean a \$17,320 premium surcharge; and, during a deadly and unrelenting opioid epidemic, people struggling with substance abuse disorder could expect to see a \$20,450 premium surcharge. These effects are immoral and incomprehen-

sible. They will lead to many Americans needlessly losing their health insurance and very likely their lives.

When I see the true effects of this bill and what they are likely to be, I can't help but think of a little boy in Connecticut whom I mentioned on the floor before. He is 7-year-old Conner Curran. Conner has Duchenne muscular dystrophy. It is a chronic and terminal condition that will slowly erode his motor functions unless there is a cure, and none exists now. This disease will eventually take his life. He is a young man of extraordinary courage and strength and so is his family.

His parents have told me that although he appears healthy, he will slowly lose his ability to run, walk, or even hug them goodnight. In fact, earlier this summer, just days before the last Republican effort to gut Medicaid and repeal the Affordable Care Act—which failed in the Senate, fortunately—Conner's family had two lifts installed in their home so he could move up and down the stairs more easily. The video shows Conner's infectious smile as he tries out the new lift, not fully understanding the disease that necessitates it but enjoying his newfound freedom. He is just a little kid.

His mom wrote that this experience shows just how important Medicaid is to their family. As Conner gets older, he will only need more and more help, more medical services and equipment, and more financial support for his family to enable that kind of care. He will need a loving and compassionate healthcare system that will protect 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 to them 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 temporary funds my colleagues 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 reassured.

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.