

The PRESIDING OFFICER. All time is yielded back.

VOTE ON MOTION TO INSTRUCT

The question is on agreeing to the motion by the Senator from Florida.

The motion was agreed to.

VOTE ON MOTION TO INSTRUCT

The PRESIDING OFFICER. The question is on agreeing to the motion by the Senator from New Jersey.

Mr. BARRASSO. 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.

The senior assistant legislative clerk called the roll.

Mr. CORNYN. The following Senator is necessarily absent: the Senator from Tennessee (Mr. ALEXANDER).

Further, if present and voting, the Senator from Tennessee (Mr. ALEXANDER) would have voted "nay."

Mr. DURBIN. I announce that the Senator from Minnesota (Mr. FRANKEN) is necessarily absent.

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

The result was announced—yeas 47, nays 51, as follows:

[Rollcall Vote No. 309 Leg.]

YEAS—47

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

NAYS—51

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

NOT VOTING—2

Alexander	Franken
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The motion was rejected.

The PRESIDING OFFICER. The Senator from Michigan.

MORNING BUSINESS

Ms. STABENOW. 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.

CHIP AND COMMUNITY HEALTH CENTERS

Ms. STABENOW. Mr. President, I am coming to the floor again to focus on the fact that the clock is ticking for families in Michigan and across the country—men and women, children, older people, younger people who use the community health centers, as well as those who have their children covered under the Children's Health Insurance Program. The Federal funding for those programs stopped September 30—67 days ago. We have had votes. We have had bills. We have had nominations come before us. There have been divisiveness and controversy. It would be wonderful if we could stop for 1 day and do something that has bipartisan support.

The fact is that CHIP covers 9 million children, and 100,000 of those are in Michigan. We passed a bill out of the Finance Committee in September. I want to laud our chairman, Senator HATCH, and our ranking member, Senator WYDEN. It was a bipartisan bill. There was only one "no" vote. We reported it out. I assumed we would want to get this done before September 30, when the funding ran out.

Instead, here we wait, 67 days later. There are 9 million children at risk because of this inaction—100,000 children in Michigan.

The truth is that today, thanks to CHIP and thanks to a variety of healthcare efforts across the country, 97 percent of the children in our country have access to a doctor. In Michigan, it is actually higher; it is 97 percent of our children. So if a child has juvenile diabetes, if they have a cancer or asthma or just fall out of a tree and break their arm or have bronchitis or the flu, whatever it is that is happening to children, parents have the peace of mind under the MICHild Program to know that they can take their child to a doctor whom they have a relationship with and who knows their children, instead of going to the emergency room.

We also know that emergency rooms are the most expensive way to provide care. They are necessary. They are important for emergencies but not for the daily routines of life, when someone could be seeing a doctor. It costs more; uncompensated care costs more, and when someone uses the emergency room when they could be seeing a doctor, then everyone else pays for that with their insurance rates going up.

So MICHild in Michigan and the Children's Health Insurance Program across the country work. They save money. They save lives. In fact, as soon as January, in Michigan, families are going to start to get notices that the funding will go away, that the medical care will go away. It is not a great way to start the new year: Merry Christmas. Happy New Year. Your child is not going to be able to go see their doctor anymore. We don't have to have that happen because we have strong bipartisan support for this.

It is the same thing with community health centers. Twenty-five million people are able to see a doctor or a nurse and get the care they need through a community health center in their community. There are 300,000 veterans who are able to see a doctor through a community health center, and there are 7.5 million children as well.

In Michigan, our health centers are all over the State. We have some 260 different clinics around Michigan that serve 681,000 people and, again, almost 13,000 veterans. Starting in January, they are going to begin to lose funding at different times—some in February, some in March, some in April—because of local funding streams. But starting in January, in Michigan, health centers are not going to have the funding they need. The majority of their funding—70 percent of their funding—comes through the program that expired September 30, and we know that this also doesn't have to happen.

My friend Senator ROY BLUNT and I have put in legislation. We have a letter signed by 70 Members—not 7—70 Members of this body, over two-thirds of this body signing a letter supporting the continuation of community health centers. Yet we can't get that brought up either.

We thought the original plan was to bring up CHIP, the Children's Health Insurance Program, and include community health centers with it, and get that done before September 30. The clock is ticking every single day, and it has not been done. Folks may be trying to hold it hostage politically for some reason or trying to work on some deal at the end of the year. In the meantime, families are worrying, men and women are worrying, and veterans are worrying about what is going to happen, whether or not they are going to continue to get their healthcare.

Let me go back to where I started. Today is 67 days, and tomorrow it will be 68 days since the funding for two healthcare programs that have had broad bipartisan support over the years and broad bipartisan support today—67 days since that funding has stopped.

I would like to close with a story from a gentleman named Darin, whose life was changed by one of Michigan's community health centers. He shared his story with me.

Darin was an unemployed truck-driver when he moved to Jackson, MI, 4 years ago. He hadn't seen a doctor for a decade, and, in his words, he was "a complete mess." He had diabetes, congestive heart failure, and he had no energy. He needed an oxygen tank to walk. He started seeing Dr. Roy at the Center for Family Health, which is a great health clinic in Jackson. He told her he didn't want to just be stable; he wanted to get better. So they went to work so that he could get back on his feet and get back to work.

Darin got his diabetes under control. He improved his lung function, got rid of the oxygen tank, and quit his pain pills. Darin said: