

confer on President Trump the most basic rights of due process or, seemingly, alter Chairman SCHIFF's unfair process in the House Intelligence Committee in any way whatsoever.

Chairman SCHIFF can continue doing this behind closed doors without the President's participation, so long as he holds at least one public hearing at some point. He is not even required to make all the evidence he obtains public. He alone gets to decide what evidence goes in his report. And the resolution doesn't even give the President any rights in the public hearing that it requires Chairman SCHIFF to hold.

The resolution merely seems to contemplate that maybe—maybe—some day in the future, at some other phase of this, due process might—might—finally kick in, but only if the House Judiciary Committee feels like holding hearings and calling its own witnesses—in other words, no due process now, maybe some later, but only if we feel like it.

“No due process now, maybe some later, but only if we feel like it” is not even close to fair. “No due process now, maybe some later, but only if we feel like it” is not a standard that should ever be applied to any American, and it should not be applied here to the President of the United States.

I understand that many House Democrats made up their minds on impeachment years ago, but our basic norms of justice do not evaporate just because Washington Democrats have already made up their minds.

HEALTHCARE

Mr. MCCONNELL. Mr. President, on one final matter, our Democratic colleagues do apparently have time to push for show votes on messaging resolutions with no chance of becoming law. This week's installment is a Democratic effort to limit the flexibility that Governors of both parties have utilized to lighten the burdens of ObamaCare. States have jumped at the opportunity to use waivers to reduce the costs associated with ObamaCare's mandate. In the States that have taken advantage, premiums decreased significantly.

In 2018, the Trump administration expanded this policy with an even more flexible interpretation of this part of ObamaCare. The goal was to give States even more of what they had been asking for, even more latitude to preserve consumer choice and lower premiums. But notwithstanding all the evidence that says this is the right direction for the American people, our Democratic colleagues want to roll back the Trump administration guidance and limit States' flexibility.

Since this position is virtually impossible to explain on its merits, our Democratic colleagues have instead turned to a familiar talking point: the false claim that Republicans are trying to undercut protections for Americans with preexisting conditions. Sound familiar? But, of course, that is not true.

As Senate Republicans have said over and over and over again, we support protections for Americans with preexisting conditions. And the administration has made it very clear that this waiver program poses no threat—no threat—to those protections. The Administrator of the Centers for Medicare & Medicaid Services has stated that “a section 1332 waiver cannot”—cannot—“undermine coverage with people with pre-existing conditions.”

What is more, as the White House has already made clear, Democrats' resolution has zero chance of becoming law. This is just another political messaging exercise with no path to making an impact.

I urge my colleagues to reject this resolution, keep fighting to lower premiums for the American people, and protect those with preexisting conditions.

MEASURE PLACED ON THE CALENDAR—H.R. 4334

Mr. MCCONNELL. Mr. President, I understand there is a bill at the desk due for a second reading.

The PRESIDING OFFICER. The clerk will read the title of the bill for the second time.

The senior assistant legislative clerk read as follows:

A bill (H.R. 4334) to amend the Older Americans Act of 1965 to authorize appropriations for fiscal years 2020 through 2024, and for other purposes.

Mr. MCCONNELL. In order to place the bill on the calendar under the provisions of rule XIV, I would object to further proceeding.

The PRESIDING OFFICER. Objection having been heard, the bill will be placed on the calendar.

RESERVATION OF LEADER TIME

The PRESIDING OFFICER. Under the previous order, the leadership time is reserved.

CONCLUSION OF MORNING BUSINESS

The PRESIDING OFFICER. Morning business is closed.

PROVIDING FOR CONGRESSIONAL DISAPPROVAL UNDER CHAPTER 8 OF TITLE 5, UNITED STATES CODE, OF THE RULE SUBMITTED BY THE SECRETARY OF THE TREASURY AND THE SECRETARY OF HEALTH AND HUMAN SERVICES RELATING TO “STATE RELIEF AND EMPOWERMENT WAIVERS”—Resumed

The PRESIDING OFFICER. Under the previous order, the Senate will resume consideration of S.J. Res. 52, which the clerk will report.

The senior assistant legislative clerk read as follows:

A joint resolution (S.J. Res. 52) providing for congressional disapproval under chapter 8

of title 5, United States Code, of the rule submitted by the Secretary of the Treasury and the Secretary of Health and Human Services relating to “State Relief and Empowerment Waivers”.

There being no objection, the Senate proceeded to consider the resolution.

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

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

RECOGNITION OF THE MINORITY LEADER

The PRESIDING OFFICER. The Democratic leader is recognized.

APPROPRIATIONS

Mr. SCHUMER. Mr. President, even as we consider the package of appropriations on the floor this week, we must also think about how both parties can reach an agreement on all 12 bills we need to pass before Thanksgiving. It is way past time for Democratic and Republican appropriators to sit down and hammer out bipartisan agreement on allocations to the various agencies, known as 302(b)s. That is how we got this done in the past. Democrats and Republicans in Congress have successfully negotiated two budget deals. The key to those agreements was that the President allowed Congress to do its work and stayed off to the side. I believe that, again, if left to our own devices, Congress could work out an agreement to fund the government.

As everyone remembers, the President's meddling and erratic behavior caused the last government shutdown—the longest in our Nation's history. The best way to avoid another shutdown would be for the President to keep out of the appropriations process and for Republicans to stop the games and get serious about negotiating in a bipartisan way forward.

I believe there was a meeting yesterday, and there may be some progress. I think some progress was made. Let's continue moving in that direction, the four corners of the Appropriations Committee—House and Senate, Democrats and Republicans—and put together an agreement we can all support.

TRUMP ADMINISTRATION

Mr. President, on the whistleblower, as the House of Representatives continues its impeachment inquiry as to whether the President jeopardized national security by pressuring Ukraine to interfere with our 2020 elections, the White House, their allies in Congress, and the media have resorted to despicable tactics to falsely discredit individuals who have provided the House testimony.

Yesterday, LTC Alexander Vindman, an Active-Duty Army officer serving on a detail in the White House, testified before Congress. Since Lieutenant Colonel Vindman's testimony was announced and especially in the past 24

hours, he has been vilified by individuals in the media and elsewhere. Although he has served our country for more than 20 years, although he is a recipient of the Purple Heart after being wounded while serving in Iraq, he has been called derogatory terms, and some have even gone so far as to call him a spy and question his loyalty to the United States.

These attacks are outrageous. They are unacceptable, and they are not unlike the attacks the President and his allies have levied against the whistleblower whose account first alerted Congress to the President's misconduct with Ukraine. The President has publicly suggested the whistleblower is treasonous and a spy.

Separately, recent public reports suggest that a Republican member of the House Intelligence Committee is actively trying to expose and leak the whistleblower's identity. This is so, so wrong. Disclosing or causing to be disclosed the identity of a whistleblower is such a breach of faith of our whistleblower laws, which are designed to see that the truth gets out. Anyone seeking the release of the whistleblower's identity is frustrating the truth and is potentially in violation of Federal law. Not only that, the disclosure of the whistleblower's identity may result in reprisals and threats to their personal safety and the safety of their families.

Today, I am sending a letter to the Secretary and Chief of Staff of the Army asking them to provide us with what actions the Army is taking to ensure that Lieutenant Colonel Vindman is afforded appropriate protections. Lieutenant Colonel Vindman and whistleblowers like him are standing up for the Constitution they swore an oath to defend. Their lives and families must not be put in jeopardy by an outrageous attack or disclosure.

HEALTHCARE

Mr. President, now on healthcare, today the Senate will hold a vote on a resolution to repeal a Trump administration rule promoting junk health insurance plans, which offer a way around protections for Americans with preexisting conditions. The administration has worked to make it easier for States to use taxpayer dollars to subsidize these junk insurance plans, many of which don't cover essential benefits, like maternity care, preventive screening, and mental healthcare. These junk plans leave families vulnerable and are nothing but a boon to health insurance companies.

For nearly 3 years, Republicans in Congress and the Trump administration have sabotaged Americans' healthcare. Funding to sign up Americans for health insurance has been eliminated. Programs to help low-income Americans afford insurance has been canceled. President Trump's budgets have threatened deep cuts to Medicare and Medicaid. Now, the Trump administration is suing to repeal the entirety of the healthcare law.

Yesterday—just yesterday—new data showed that 400,000 fewer kids have

health insurance now, most of whom are under 6—innocents. When they have bad health, they need help. That breaks your heart. The effect of all this sabotage is very, very real.

Now, think about this issue, about protections for Americans with preexisting conditions. Think of a mom or dad who has a son or daughter and they discover that he or she has cancer. They go to the doctor, and the doctor says: Look, I have this very expensive medication or this expensive treatment that will help cure your child, but the insurance policy doesn't cover it.

The family doesn't have enough money to pay for it, and they watch their child suffer. That should not happen in America. We want to prevent it from happening.

That is why we hope our colleagues will join us in this CRA to overturn what the administration has done that would allow that terrible example to go forward.

Let me continue on healthcare for a minute. Despite making explicit promises to defend protections for Americans with preexisting conditions in campaign ads—I even heard some speak about it as recently as yesterday—Republicans have voted to undermine these protections in Congress on several occasions. There is no getting around the fact that junk insurance plans offer a way around these important protections and drive costs up for everyone else.

Do Republicans want to use taxpayer dollars to fund these junk plans and add to insurance company profits?

I hope not, but we will see today. Today, my Republican colleagues face a test. They can vote to defend healthcare protections for Americans who need it most or they can stand with President Trump and vote to allow these junk health insurance plans with so many devastating effects on so many families flood the market.

SYRIA

Mr. President, finally, on Syria, we were informed yesterday that after multiple requests, the Senate will finally receive an all-Member briefing by the administration on the situation in northern Syria this afternoon. I am glad the briefing is taking place, but it is regrettable that it has even taken this long.

Secretary Pompeo also will not participate, which is profoundly disappointing, given that we must hear from the Secretary of State at times and on issues such as this.

Nevertheless, those members of the administration who will be there today must answer several important questions. What is our strategy moving forward on northern Syria? How are we going to protect troops and our national interest? And, most importantly, exactly what is our plan to ensure the enduring defeat of ISIS and to make sure that those who are still imprisoned don't escape and those who have already escaped don't hurt us?

These urgent questions go to the heart of America's national security, and we need them answered today.

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

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

The majority whip is recognized.

DEATH OF ABU BAKR AL-BAGHDADI

Mr. THUNE. Mr. President, ISIS took a big hit over the weekend when U.S. forces raided ISIS leader Abu Bakr al-Baghdadi's compound in Syria. Al-Baghdadi died in the raid after he detonated a suicide vest in a final act of cowardice, killing three children with him. The second in command was confirmed killed in a second military strike hours later, leaving the organization temporarily leaderless.

Over the past few years, ISIS has spilled a river of blood across the Middle East. Its brutality has set it apart even among other terrorist organizations. Torture, rape, enslavement, crucifixions, beheadings, and the deliberate targeting of whole populations based on their religious beliefs—the list of crimes is long and often nearly unspeakable.

The world is a safer place today because of al-Baghdadi's death. This impact will only be temporary unless we dedicate ourselves to ensuring that ISIS is permanently defeated.

The successful raid on al-Baghdadi's compound is a reminder of the fact that our military may be called on at a moment's notice to head halfway around the world to fight evil. The men and women of the U.S. military stand on guard 24 hours a day, 365 days a year, ready to put themselves between us and danger.

This past weekend, I had the honor of helping to welcome home 112 South Dakota Army National Guard soldiers of the 147th Forward Support Company and Bravo Battery of the 147th Field Artillery Battalion. These citizen soldiers were in Europe for nearly a year working with our NATO allies and increasing unit readiness.

As Members of Congress, we have no more fundamental responsibility than ensuring that our men and women in uniform are prepared to meet any threat. We do that by providing timely and adequate funding for the current and future needs of our Armed Forces. That means funding the military through regular order appropriation bills—not through temporary funding measures that leave the military in doubt about funding levels and unable to start essential new projects.

Unfortunately, our efforts to fund the military in a timely fashion have been stymied by Democrats who blocked the Senate from passing the Defense appropriations bill in September before the end of the fiscal

year. We are now a month into the new fiscal year, and Democrats are still indicating that they intend to block this year's Defense appropriations bill.

Let me briefly review what Democrats are blocking. They are blocking funding to support a pay increase for our military men and women. They are blocking funding for weapons and equipment that our troops need right now. They are blocking investment in the equipment and technology that our military will need to defeat the threats of the future. They are blocking funding for missile defense, for research and development, for ships, planes, and combat vehicles to update our aging fleets, and they are blocking funding for our allies, including \$250 million in military assistance for Ukraine.

Let me just repeat that last point. Democrats, who are currently trying to impeach the President for allegedly delaying Ukraine funding, are currently blocking \$250 million in assistance for Ukraine. Now, I am pretty sure that is the definition, if you look it up, of both irony and hypocrisy.

Toward the end of the summer, it looked like Democrats might actually be willing to work with Republicans to pass this year's appropriations bills. Both Democrats and Republicans agreed to a bipartisan deal laying out funding levels for both defense and nondefense spending, but, apparently, that was as far as Senate Democrats were prepared to go. Now that it has come time to honor the spirit of that agreement and get this year's Defense appropriations bill done, Senate Democrats are balking.

Democrats would like us to believe they are serious about legislating; that their yearslong obsession with impeaching the President isn't distracting them from doing their job. Well, they are going to have a chance to prove that in the very near future.

If Democrats are actually serious about legislating, if they are serious about meeting their responsibilities, then they will work with Republicans to move forward on the Defense appropriations bill and to get this legislation to the President as soon as possible. I hope that is what they will choose to do.

As Chairman SHELBY noted on the floor last week, Congress's failure to do its job and fund our military is making the military's job more difficult, and that, as Chairman SHELBY noted, is unacceptable. It should be unacceptable to all of us. It is time to get our men and women in uniform the funding they need and the pay increase they deserve. It is time to get this year's Defense appropriations bill done. It is time for the Democrats to stop stalling and foot-dragging and blocking, and for them to work with us to make sure our men and women in uniform have what they need to protect Americans and keep us safe.

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. ALEXANDER. 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. ALEXANDER. Mr. President, at 12:15 p.m., the Senate will vote on a Democratic proposal to overturn a Trump administration guidance from the Department of Health and Human Services that would lower insurance rates all across America. Seems like a strange thing to do, but to justify that, the Democrats have come up with a scary fairytale that has no basis in truth, that suggests that somehow this effort to lower insurance rates would jeopardize the protection for pre-existing conditions that all Americans have according to the law. Of course, that can't happen because the law doesn't permit it. So I want to talk about that a little bit today.

What the Senate Democrats want to overturn is a Trump administration guidance regarding what is called a section 1332 waiver. Now, a 1332 waiver was part of the Affordable Care Act of 2010 that Democrats passed. No Republican voted for it. So you had the Affordable Care Act, which says, among other things, that every American who has a preexisting health condition is protected. That means that if I have a preexisting health condition, and I want to buy insurance, I have a right to buy it. I can't be charged any more for it because of my preexisting health condition, and I am covered if I get sick. That is what we mean by protection for preexisting conditions. That is in the Federal law. No American can be denied that protection.

In the very same law, the Affordable Care Act, Democrats wrote another provision to give States more flexibility in how they spend ObamaCare money with the hope that they might be able to lower rates for Americans who have health insurance. That would be a good thing because in Tennessee, and across the country, really, since ObamaCare passed, rates have gone up 163 percent. Those rate increases especially hurt people who make a little bit more than \$50,000—say a songwriter in Nashville or a farmer like Marty, whom I ran into in the Chick-fil-A outside Nashville, who said: I can't afford health insurance. I have to pay \$15,000 or \$20,000 because I don't get any ObamaCare subsidy.

States are trying to take advantage of this provision of the Affordable Care Act—ObamaCare—that says States may have some flexibility in how they spend ObamaCare money. The law also says states cannot jeopardize pre-existing conditions protections for anybody.

Now, the best evidence that what we are talking about is a scary fairytale is that 12 States already have used a 1332 waiver. Remember, this is the provision in the Federal law that was designed to give States more flexibility

in how they spend Federal dollars. Twelve States have already used that provision in law to lower rates. There are 12 waivers from States that have been approved by the Trump administration, and premiums have gone down in all 12 States as a result of this action. This is what the Democrats want to stop. They want to stop States from using this provision which the Democrats invented in 2010 to lower insurance rates. That is why it is a scary fairytale that only on Halloween anybody could imagine could come up with.

Now, 7 of the 12 waivers that were approved by the Trump administration were under an Obama definition of Section 1332, and 5 have been approved since the new guidance that is the subject of the vote today. For any State to get a 1332 waiver, the Centers for Medicare and Medicaid Services has to approve it. Seema Verma is the Administrator of that agency. She has made it very clear, No. 1, that none of the 12 waivers that have been approved jeopardize preexisting health condition protections for anybody. In other words, the waivers did lower rates for some people, but they didn't hurt anyone's ability to buy insurance who had a preexisting condition. Just because it helped some people didn't mean it hurt other people.

Seema Verma went on to say very clearly:

To be very clear, the 2018 guidance—

The one we are talking about today—

does nothing to erode ObamaCare's preexisting condition provisions, which cannot be waived under Section 1332.

In other words, the law the Democrats wrote in 2010 does not allow States to waive the preexisting condition. Seema Verma goes on to say:

"Section 1332 does not permit States to waive Public Health Services Act requirements such as guaranteed availability and renewability of health insurance, the prohibition on using health status to vary premiums, and the prohibition on preexisting conditions exclusions. Furthermore, a section 1332 waiver cannot be approved that might otherwise undermine these requirements. This administration stands committed to protecting people with preexisting conditions."

The bottom line is, 12 States have already used section 1332 waivers to reduce premiums. More States want to come up with other ideas to do the same. In none of the 12 States were preexisting condition protections jeopardized for one single person. Seema Verma says it cannot be, under the law, and if any of the other States have some sort of new proposal—she wouldn't approve it.

There is no doubt there is a good reason why so many Governors may want 1332 waivers. In fact, many of the States that have already been granted waivers have Democratic Senators as well as Democratic Governors. Many States are trying to reduce health insurance rates because ObamaCare has driven those rates so high. In the four

bipartisan Health Committee hearings I chaired in September of 2017, virtually, every witness told our committee that the process of applying for a 1332 waiver was too cumbersome, too inflexible, and expensive for States to use.

In the fall of 2017, provisions to improve that waiver application process were included in bipartisan legislation that was proposed by 12 Republican Senators and 12 Democratic Senators. At one point, the distinguished Senator from New York, the minority leader, Senator SCHUMER, said it was such good policy that every Democrat ought to vote for it.

In 2018, Senate Democrats blocked that bipartisan legislation, which would have, by the way, lowered insurance premiums by 40 percent over 3 years, and it became clear Democrats were refusing to change even a word of ObamaCare.

I encouraged Secretary Azar and the administration to take a look at the section 1332 waiver and, within the current law, do whatever they could to give States more flexibility. Fourteen Governors wrote the Secretary seeking help to make 1332 waivers work so they could start lowering premiums in their State.

In October of 2018, the Trump administration issued new guidance with much needed flexibility so States can use 1332 waivers. Democrats who vote at 12:15 to overturn this guidance are taking a tool away from their States, a tool that many States want, to lower health insurance rates and, in every single case, without jeopardizing protection for preexisting conditions.

That was the whole purpose of the 1332 waiver. That is why Democrats put it in the Affordable Care Act. That is why 13 States have approved those waivers and 12 have been approved just for one type of solution called reinsurance. That is when States take some money and put it in a reinsurance pool. A State can take the sickest people in that State and put them there. When the sickest people are out of the other pool, it lowers rates for the people who are left. States can do reinsurance with Obamacare money. States lower health insurance rates for these people in the pool. You make sure the people who are sickest have insurance, and you don't take away anyone's right to buy insurance who has a preexisting condition.

In each of the States, health insurance premiums have gone down as much as 43 percent in some cases. North Dakota has seen the average ObamaCare premium decrease 20 percent; Colorado, 16 percent; Delaware, 13 percent; Montana, 8 percent; Rhode Island, 6 percent. You want to overturn a guidance that attempts to give States more of that same kind of flexibility to lower insurance premiums without affecting the ability of any American to buy insurance with preexisting condition protections? There is no reason States shouldn't be able to have that flexibility.

Let me give you an example of what this guidance that we are talking about today would mean. In 2017, Iowa submitted a waiver application that would have restructured the premium subsidies. That is the money Iowa gets from Washington under ObamaCare. According to Iowa Governor Kim Reynolds, Iowa's waiver would have given 18,000 to 22,000 Iowans access to more affordable insurance. These were Iowans who made too much to qualify for Federal subsidies and were left behind by ObamaCare's skyrocketing profits. This might be a farmer in Iowa making \$55,000 a year and, with no subsidy, paying \$15,000 or \$20,000 for an insurance policy. The rates would be lower under Iowa's proposal.

Under the old guidance, Iowa's innovative waiver couldn't be approved. Now, with the new guidance—the one you seek to overturn today—Iowa can work with Administrator Verma to get the kind of creative waiver so 18,000–22,000 more Iowans can afford health insurance. To be clear—to emphasize—just as with the other 12 examples that have been approved, no new waiver can be approved that would take away the right of any Iowan who has a preexisting health condition to buy insurance at the same price as if that person didn't have a preexisting health condition and to keep insurance coverage when that Iowan gets sick.

It is simply a scary Halloween fairytale drummed up by the other side—for reasons I can't imagine since so many of their States are benefiting from 1332 waivers—to take away from States the ability to reduce health insurance costs. As I said earlier, any waiver that is approved—as 12 already have been—to help some people get lower cost health insurance cannot hurt another person in that State by taking away their right to buy insurance at the same price that covers their preexisting condition. States with 1332 waivers include these States with Democratic Senators who will be voting today: Hawaii, Maryland, Minnesota, New Jersey, Oregon, Wisconsin. Do they really want to take away from their State the ability to lower health insurance premiums in a way that doesn't jeopardize preexisting conditions? That is pretty strange. Then there is Colorado, Montana, Delaware, Rhode Island, Alaska, North Dakota—the same.

I think this just gets back to the point that Democrats have elevated ObamaCare to the 67th book of the Bible, and they can't change a word of it, even though they wrote the 1332 waiver in the Affordable Care Act to give States the flexibility to reduce healthcare premiums, which 12 States now have done. Democrats also wrote, in the Affordable Care Act, that you cannot take away from any American the right to buy insurance at the same price if you have a preexisting health condition. That has been reaffirmed by the Trump administration. It is in the law. To suggest otherwise, as I said

earlier, is a scary fairytale dreamed up for Halloween.

I hope that all Senators—especially from those States who have seen the 1332 waiver work so well—will vote not to overturn the guidance that gives more Americans a chance to pay lower healthcare premiums.

I yield the floor.

The PRESIDING OFFICER (Mr. SASSE). The Senator from Wisconsin.

UNANIMOUS CONSENT REQUEST—S. 1556

Ms. BALDWIN. Mr. President, I rise to join my colleague Senator MARK WARNER and the entire Senate Democratic caucus to force a vote on his resolution to protect Americans with preexisting health conditions and stop the Trump administration from using American taxpayer dollars to promote junk insurance plans that don't even have to cover people who have preexisting health conditions.

The difference between the two sides of the aisle here is really clear. The Senate Republicans have worked with President Trump to pass repeal plans that would take people's healthcare away and allow insurance companies to charge more for people with preexisting health conditions.

When their effort failed legislatively, instead of working in a bipartisan way to lower healthcare costs for working families, President Trump and his administration spent 2 years working to sabotage our healthcare system. The Trump administration's sabotage has made it harder for people to sign up for quality, affordable coverage, and there are more Americans who are uninsured today than when President Trump took office.

The Trump administration is even in court to support a lawsuit to overturn the Affordable Care Act completely, which will take away guaranteed health protections and raise costs for Americans with preexisting health conditions. If they succeed, insurance companies will again be able to deny coverage or charge higher premiums for nearly 130 million Americans who have preexisting health conditions.

Meanwhile, this administration has expanded what we call junk insurance plans. These are plans that can deny coverage to people with preexisting health conditions and don't have to cover essential services like prescription drugs, emergency room visits, and maternity care.

I ask my friends on the other side of the aisle to think about this for a moment. President Trump supports overturning the law that provides protections for people with preexisting health conditions while he expands these junk plans that don't provide those protections. This is what the Senate Republicans support. This is their plan.

Last year, we forced a vote on my legislation to block President Trump's expansion of junk insurance plans that don't have to cover people with preexisting health conditions. The final vote tally was 50 to 50, with the entire Senate Democratic Caucus and one

Senate Republican voting in support of my legislation. Those who say they support healthcare coverage for people with preexisting health conditions should support the No Junk Plans Act. Today, I want to take another vote.

Mr. President, I ask unanimous consent that the Committee on Health, Education, Labor, and Pensions be discharged from further consideration of S. 1556 and that the Senate proceed to its immediate consideration; that the bill be considered read a third time and passed; and that the motion to reconsider be considered made and laid upon the table with no intervening action or debate.

The PRESIDING OFFICER. Is there objection?

The Senator from Tennessee.

Mr. ALEXANDER. Mr. President, in reserving the right to object, the Senator from Wisconsin is exactly correct. Every Senate Democrat has voted to take away a low-cost insurance option from what the Urban Institute says is 1.7 million Americans. These people can't afford other kinds of insurance. That is what they want to take away, and she is attempting to do that once again. I have plenty of constituents who have a right to get their insurance but who can't afford it. This is the only kind of insurance they can buy.

This kind of insurance was good enough for the George W. Bush administration. It was good enough for the Clinton administration. It was good enough for the Obama administration right up until the last few days, and it should be good enough under the Trump administration.

According to the Urban Institute, all the Trump short term plan rule does is give 1.7 million Americans an opportunity to buy short-term insurance while they move from one job to another or while they look for a different situation. According to the Urban Institute, those 1.7 million Americans would otherwise go uninsured, and that is what the Democrats are for.

I object.

The PRESIDING OFFICER. Objection is heard.

The Senator from Wisconsin.

Ms. BALDWIN. Mr. President, obviously, I am disappointed with the objection.

I would point out that these junk plans are often called short-term plans, but the change that was made by this administration was to go from a 3-month sort of transition plan that, as my colleague indicates, could be used when one changes employment or other short-term use, and now they are available and renewable for up to 3 years. These plans do not preserve the protections under the Affordable Care Act to cover people with preexisting health conditions and essential health benefits.

You don't have to take my word for it. We can read directly from the fine print on the actual plans that are being debated.

One of these junk plans from Companion Life, which is currently avail-

able in my home State of Wisconsin, reads: "This plan has a pre-existing limitation provision that may prevent coverage from applying to medical conditions that existed prior to this plan effective date."

Another junk plan from Golden Rule says that the plan doesn't comply with the guaranteed essential benefits provided by the Affordable Care Act.

To quote directly from the plan, the description reads: "Even if you have had prior Golden Rule coverage and your preexisting conditions were covered under that plan, they will not be covered under this plan."

It is abundantly clear that these plans don't cover protections for people with preexisting conditions.

The people of Wisconsin did not send me to Washington to take away people's healthcare. I want to protect the guaranteed healthcare coverage that millions of Americans depend on. I want to help more families get the quality, affordable healthcare they need.

UNANIMOUS CONSENT REQUEST—S. 1905

Despite the sabotage that I have described from this administration against the Affordable Care Act, in Wisconsin this year, things are getting better with the new Governor. Thanks to strong leadership from Governor Evers and the investments his administration is making, Wisconsinites will have more choices and more affordable rates for quality health insurance plans this year. Wisconsinites in every corner of the State will be able to find healthcare plans this year that include essential benefits like prescription drug coverage, maternity care, emergency room visits, and mental healthcare at more affordable prices.

Governor Evers is providing funding for more health insurance navigators and is conducting awareness campaigns in the State so that families in Wisconsin will have the information they need to sign up for quality and comprehensive healthcare plans. That is why enrollment navigators are so important. We need to keep up the funding for navigator programs so that more people can find affordable healthcare plans that meet their needs. Navigators help millions of Americans, including those in rural communities, sign up for quality healthcare coverage.

The Governor of Wisconsin understands the importance of navigators, but Washington has failed to step up. Unfortunately, since President Trump took office, his administration has slashed Federal funding for the navigator program by 84 percent. Trusted navigator programs, like those in Wisconsin, have had their funding cut by nearly 75 percent since 2017, meaning fewer people in Wisconsin have received the support they need to obtain affordable coverage.

That is why I introduced the ENROLL Act this year with my good friend from Pennsylvania, Senator CASEY. This bill restores funding for

the navigator program and helps to ensure that Americans have better access to the affordable healthcare coverage that they need and want. The ENROLL Act passed the House of Representatives earlier this year. We should also pass it in the Senate so that Americans can more easily enroll in quality healthcare coverage.

Mr. President, I ask unanimous consent that the Committee on Health, Education, Labor, and Pensions be discharged from further consideration of S. 1905 and that the Senate proceed to its immediate consideration; that the bill be considered read a third time and passed; and that the motion to reconsider be considered made and laid upon the table with no intervening action or debate.

The PRESIDING OFFICER. Is there objection?

The Senator from Tennessee.

Mr. ALEXANDER. Mr. President, in reserving the right to object, in 2017, the Centers for Medicare and Medicaid Services found that navigators were not cost-effective in enrolling people in health insurance.

During the 2017 open enrollment period, navigators received over \$62.5 million in Federal grants while enrolling 81,426 individuals. That is less than 1 percent of those enrolled in the Federal exchanges, which comes out to a cost of \$767 per enrollee. In other words, the taxpayer is paying \$767 per enrollee for each person enrolled. The CMS also found that nearly 80 percent of the navigators failed to reach their enrollment goals.

I object.

The PRESIDING OFFICER. Objection is heard.

The Senator from Wisconsin.

Ms. BALDWIN. Mr. President, I am disappointed to see my Republican colleague again object to the legislation that will help more Americans access quality, private health insurance, Medicaid, or the Children's Health Insurance Program. This is especially harmful to families in rural communities who already lack access to in-person assistance for shopping and enrolling in quality, affordable health insurance coverage.

So let me lay plain for everyone what we are seeing here from the Republicans and this administration.

Today, the Republicans objected to passing my ENROLL Act, which would provide funding for healthcare enrollment assistance to help people find high-quality, affordable plans that would actually meet their healthcare needs.

Today, the Republicans objected to passing my legislation to stop the expansion of junk insurance plans that don't even have to cover people with preexisting health conditions.

The Republicans are working to make it harder for one to sign up for high-quality, affordable healthcare.

This administration is encouraging Americans to buy junk insurance plans that don't provide the health coverage

that they need and that can deny coverage to people who have preexisting health conditions.

Finally, the Republicans and the Trump administration are supporting a lawsuit that would overturn the entire Affordable Care Act and take healthcare away from literally millions of American families.

The choice for the American people could not be clearer. I am working with my Democratic colleagues to help make things better for the American people. Sadly, the Senate Republicans are helping the Trump administration make things worse. I will not give up this fight.

I yield the floor.

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

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

S.J. RES. 52

Mr. BRAUN. Mr. President, we are going to vote on a CRA later this afternoon, and this has been the issue dominating D.C. and did in my campaign: the cost of healthcare.

I am going to vote against the CRA, and I am not going to go into the particularities of it. I just want to tell you how it works on Main Street USA and kind of my perspective of how we really solve healthcare in a way that is going to be affordable and last for a long time.

I just finished visiting all 92 counties in Indiana talking to Hoosiers, young and old, small businesses to farms. Everyone is concerned about where is healthcare cost going in the future.

We don't seem to, here, have a real good plan for it. As a Main Street entrepreneur that took it on myself a few years ago to create a sustainable, affordable plan, most people think it absolutely can't happen using free market principles. I will go into a few details of how that works in my own business.

ObamaCare was addressing an issue that has been boiling up for a long time. I took on the insurance companies to fix it in my own company back in 2008—covered preexisting conditions, no caps on coverage.

But ObamaCare was a solution that was never going to work. It was Big Healthcare in cahoots with Big Government. Never have I seen that result in something less expensive and more effective.

I believe in free markets driving the solutions, and the healthcare industry is who I blame for being in this pickle. That sounds unusual coming from a free market guy that doesn't believe in government.

But not all markets are free. One of the most disappointing things is when my own Republican colleagues mistake the healthcare industry for being one

that is free and transparent. It has evolved over the years to where it has become as bloated and dysfunctional as the Federal Government that runs trillion-dollar deficits.

ObamaCare decisions are made by healthcare industry executives and Federal Government bureaucrats, instead of by patients, employees, and mostly employers who are the only ones that really have skin in the game when it comes to our healthcare system.

I believe the underlying principles of ObamaCare were right on. No one should go broke because they get sick or have a bad accident.

I believe that you cover preexisting conditions with no caps on coverage. Kids staying on the plan until they are 26? Fine. But it didn't work from the beginning, and it won't be an affordable—it was the Affordable Care Act. It turned into the un-Affordable Care Act, and it is not a solution in the long run.

The solution will be to get the industry out of the doldrums and to realize that when 80 Senators weigh in with an idea of how to fix your business, the cat is out of the bag. You have a problem. Sadly, in a place like this, which you can see can get sidetracked in so many different ways and then never really craft solutions that last in the long run, that is kind of what we are up against now.

The bills that have come through from three different committees—primarily Finance and the one I am on, Health, Education, Labor, and Pensions—do some good things. Senator GRASSLEY and I did an op-ed this week about negotiating drug prices in a way that is going to bring them down. These bills have real things that will work. I am disappointed that they are not aggressive enough, but we need to start somewhere.

The drug companies have been notoriously involved in—after they do such a good job coming up with a solution, a remedy, then hand it over to a broken distribution system that ends up—and I will tell a little story.

When I was uninsured, after I had to get off my great company's insurance that was based upon wellness, not remediation, and my employees and patients were encouraged on dollar one to shop around and find solutions—that worked. Here, the industry does everything it can to not make it work. This should have been a simple thing to do.

Luckily, I don't have many prescriptions. I knew it was a generic that should cost 15 to 20 bucks. I had six or seven places to choose from in my hometown. I went to the first one that would have been the most convenient and fumbled around for 2, 3, 4 minutes. They kept asking me what my insurance plan number was. I said: I have none. I am uninsured. I want your best deal.

It came back \$34.50.

I made another call to a place that I know has been on the leading edge. It took them 10 seconds, \$10, and they

said: By the way, we can have it ready in 10 minutes.

That is the way things worked in the real world.

Any of us that run businesses where you have transparency, competition—take LASIK surgery for instance. It is the only part of healthcare that actually works. Do you know why? Insurance companies aren't involved. Providers deal with patients, consumers. Ten, 12 years ago, \$2,000 to \$2,500 an eye, done with a scalpel. Now the technology is better, and you can get it done for \$250 to \$500 an eye. That is the way things should work.

The solution is not more of what we tried that has failed. It certainly isn't Medicaid for All. How can that work when, if you are honest about how much it is going to cost, it would nearly double the size of our Federal Government. Plus, why would you turn something like that over when we can't even get it right in the Veterans' Administration, where about 10 million patients are covered, not 330 million? That would be jumping from the frying pan into the fire. It would be a disaster. We can't afford it. Of course, no one around here ever asks the question about how you pay for anything.

We are going to completely exhaust the Medicare trust fund in 6 to 7 years. Employers and employees have been paying into that since the 1960s. That will probably be the first reality check this place has—maybe along with the fact that foreign countries and everyone else are not going to keep lending us money to finance trillion-dollar deficits—which, by the way, will hit \$1.5 trillion in 6 to 7 years, when the interest on the debt is going to be more than we are paying for defense.

In conclusion, our healthcare system needs radical change, but it needs to be changed in a way that takes the power from the industry and government and gives it back to the patient/consumer, like it works in the real world.

I will use this example: I know that in my hometown, if you are buying a big-screen TV—which, by the way, costs about one-fourth to one-third of what it did 10 years ago, kind of like LASIK surgery—I know people in my hometown would probably drive 50, 60 miles to save 50 bucks on a thousand-dollar purchase. We don't do that. The healthcare consumer has atrophied. They talk about they love employer-provided insurance. Well, that is because the consumer pays for very little of it.

I will give a few details of what can happen when you are innovative, when you incorporate the concepts of skin-in-the-game, doing more than asking others to pay for it. In our own plan, people enter their deductible less than they did 11 years ago because the incentives were put in place. But I found a way to do it uniquely, where most CEOs didn't want to take the risk.

I believe in insurance for everyone. I believe in access. You heard me earlier. In this day and age, preexisting conditions—that ship has sailed. I backed

that up with actions in my own business. But I don't believe that you can take more of what is proven never to work and try to get it to be where it is twice the size of our current government.

Republicans can lead on healthcare but only if we stop acting as apologists for a healthcare industry that is dysfunctional and broken to the core, and then you set yourself up, for politicians here—and a public that generally falls for it—that that is going to be the solution.

On our first foray into surrendering that right to the government through ObamaCare, it yielded what it was predicted to—higher costs and fewer options.

The only prescription for our ailing healthcare system is consumer-driven, transparent competition. I look forward to unveiling more of those ideas, and that is why I will vote against the CRA this afternoon.

I put the challenge and the onus on the back of the healthcare industry to get with it before you have a business partner that you are not going to like—the Federal Government.

I yield the floor.

The PRESIDING OFFICER. The Senator from Washington.

Mrs. MURRAY. Mr. President, I ask unanimous consent to speak as in morning business.

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

REMEMBERING KAY HAGAN

Mrs. MURRAY. Mr. President, while I am so sad to be here, I am always glad to have the opportunity to recognize Senator Kay Hagan.

There are certain people who carry with them a warmth and kindness that lift up others, even in places that are not always warm or kind and even when the going gets tough. Kay was exactly that kind of person and one of the best examples I can think of. She wasn't only that—not at all. As another mom in the Senate, I saw how deeply she was dedicated to her family—her husband, Chip, and her children, Jeannette, Tilden, and Carrie. Kay was smart, witty, and fierce, and she was an unwavering champion for North Carolina families and communities.

Nine years ago almost to this week, Kay came to the floor to advocate for health reform, and she did it as she always did—by putting North Carolinians first.

Kay came here and she shared the story of Tim and Marilyn, a family from Mooresville, NC. They had racked up tens of thousands of dollars in debt because Marilyn's preexisting condition meant her only option was a high-cost, high-deductible plan. Kay called powerfully for protections for preexisting conditions.

Nearly a decade has now passed since the Affordable Care Act became law, so not everyone remembers how, in that fight, every single Senate vote mattered, and there were certainly

some Senators who listened to the pun-dits and the naysayers at the time who wanted the bill to fail. Kay tuned out all of that and listened to people from her home State, like Tim and Marilyn, instead, and because she did, more than 4 million North Carolinians with preexisting conditions have protections in law today. They have the peace of mind Kay wanted so badly for Tim and Marilyn and every one of her constituents.

Democrats are going to be talking a lot about healthcare this week, and in particular, we are taking a very important vote on upholding those protections that Kay fought so hard for. So especially throughout this week, I will be thinking about Kay. I will be thinking about the difference her love for her State has made in the lives of people across North Carolina and our country. I will be grateful, as so many others are, for her amazing friendship, her wisdom, and her willingness to stand up for what is right.

I yield the floor.

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

The PRESIDING OFFICER (Mr. DAINES). Without objection, it is so ordered.

S.J. RES. 52

Mr. WARNER. Mr. President, it has been just over 2 years since the Senate voted down legislation that would have repealed the Affordable Care Act. If we had voted down the Affordable Care Act, that would have also erased the protections for Americans with preexisting medical conditions.

In the time since then, two things have happened. One, my colleagues from across the aisle have read the writing on the wall. They recognized that the American people support the protections for preexisting conditions on an overwhelmingly bipartisan basis; and, two, the Trump administration released the rule that we are discussing today—a rule that would allow taxpayer dollars to subsidize these short-term junk plans that actively undermine the insurance market and jeopardize the one very popular part of the ACA, protecting folks with preexisting conditions.

I know that my colleague, Senator BALDWIN, was here earlier, and Senator BROWN, Senator WYDEN, and Senator MURRAY. They have outlined in some detail the challenges around these junk plans, or some refer to them as short-term plans. The truth is, these plans don't have to cover things such as emergency room visits, maternity care, or other essential benefits, and they once again allow insurance companies to discriminate against Americans based on their medical history.

With all due respect to my Republican colleagues, you can't have it both

ways. If you support protections for preexisting conditions, you can't sit by and let this administration dismantle them. You have to stand up and defend these protections because, as you know, folks in Virginia are depending on them and constituents in your States are as well.

Very shortly, each Member of this body will have a chance to go on the record with this resolution of disapproval.

I fear some Members of this body have forgotten what it was like before the ACA, when an unexpected surgery or a diagnosis of a chronic illness could mean a one-way ticket out of the middle class.

Unfortunately, this is not a hypothetical. Earlier today, a group of us had a press conference where a young woman from my State came forward, and not only did her child have an enormous medical condition, but her husband was then diagnosed with lymphoma, and she was diagnosed with brain cancer.

Without the protections of the ACA, she testified she would not be able to afford healthcare coverage.

The PRESIDING OFFICER. The Senator's time is expired.

Mr. WARNER. Mr. President, I ask unanimous consent for an additional 3 minutes.

The PRESIDING OFFICER. Is there objection?

Without objection, it is so ordered.

Mr. WARNER. I will speed this up.

Let me also point out that, recently, one of my constituents, a man named Jesse, received a \$230,000 medical bill for his back surgery. Unbeknownst to him, he purchased one of these so-called short-term junk plans only to discover that he now fell into the category of having a preexisting condition, and this plan didn't cover his challenge.

Jesse is 1 of the more than 3 million Virginians with a preexisting medical condition. Nationwide, more than 130 million Americans have preexisting medical conditions like diabetes, asthma, or cancer.

Before the Affordable Care Act, an insurance company had every right to deny these individuals coverage, charge them unaffordable premiums, or terminate their plans. We cannot go back to those days.

Unfortunately, this administration has used every tool at its disposal to destabilize the market in the hopes that it will come crashing down so they can finally repeal the ACA.

The rule we are talking about here today is a perfect example, among many others, of what this administration has done. They have defunded cost-sharing payments that reduce premiums in the marketplace. They have shortened the enrollment period and cut the budget for outreach navigators—all folks who have helped Americans find a plan that works best for them.

Look at the recent case. The Texas v. United States lawsuit that could be decided this very week would, overall,

strike down the health insurance system as we know it, with no replacement plan in place.

The truth is, if these protections for people with preexisting conditions are going to survive, we have to have a stable insurance market.

We can and should have legitimate debates about 1332 waivers. Certain States have used those in a very productive way, but that is not what we are talking about today.

The Trump administration's rule is not a good-faith effort to bring down costs or drive innovation. It is a direct effort to undermine the stability of the insurance market and is an attack on the viability of protections for Americans with preexisting conditions.

Again, I know we are going to vote on this CRA action very shortly. I urge my Republican colleagues to support it so folks with preexisting conditions can go about their daily lives knowing they will be protected.

Thank you. I appreciate the courtesy of my colleagues giving me those extra couple of minutes.

With that, I yield the floor.

The PRESIDING OFFICER. The Senator from Tennessee.

Mr. ALEXANDER. Mr. President, I ask unanimous consent for 2 minutes.

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

Mr. ALEXANDER. Mr. President, I know it is Halloween, and it is time for trick or treat, but I urge my colleagues not to be tricked by this scary fairy-tale dreamed up by the Democrats that would suggest that the section 1332 waiver that give States more flexibility, which they wrote, somehow jeopardizes protections for people with preexisting health conditions, which they also wrote. Both are in the 2010 ObamaCare law.

Preexisting health conditions are protected. The law says so. The law does not allow any 1332 waiver, which is the subject of what we are voting on in a few minutes, to change that.

Twelve States have had their 1332 waivers approved by the Trump administration, and in no case did it affect preexisting conditions.

Seema Verma, who has to approve all of these waiver applications from the Department of Health and Human Services, says the law doesn't permit any change in preexisting condition protections, and if somehow a waiver asked for it, she would not approve it.

What my Democratic friends are voting for today is to take away a tool from States that has been used to reduce rates by 43 percent in Maryland, 20 percent in Minnesota, and 15 percent in New Jersey. It has been used in Hawaii, Wisconsin, Colorado, Minnesota, Delaware, Rhode Island, Alaska, and North Dakota.

Why would you take away a flexibility option that you wrote to give your own voters lower health insurance rates?

I know it is Halloween, but don't be tricked. Don't believe this scary fairy-

tale. Protection for preexisting conditions when you buy health insurance is the law. Nothing in the 1332 waiver guidance changes that.

I urge my colleagues to vote no.

Mr. LEAHY. Mr. President, today we will vote to reject yet another attempt by the Trump administration to sabotage the Affordable Care Act, ACA. The President has tried to do everything within his power to dismantle the law. He has tried to repeal it through Congress twice and failed both times. When that did not work, his administration joined Republican State attorneys general in a lawsuit that would strike down the ACA with no plan to replace it, one of the reasons Congress rejected his initial repeal efforts. Now, this President has decided to unravel the ACA through other means.

We have seen efforts to destabilize the health insurance market by not making cost-sharing payments, reducing funding to help enroll individuals in plans, or by allowing insurers to sell less comprehensive plans through short-term coverage or association health plans. This administration has also welcomed waivers from States that want to restrict Medicaid coverage by conditioning benefits on whether or not someone has a job.

Throughout its ongoing efforts to sabotage the ACA, the Trump administration issued its rule to allow States to discriminate against Americans with preexisting conditions. This rule gives States new options for pursuing a section 1332 "state innovation waiver" under the ACA. Section 1332 of the law gives states additional flexibility to implement State-specific improvements that expand coverage, reduce costs, and provide more comprehensive benefits. I am proud that Vermont was the first State to apply for a waiver when the application process first started in 2016.

Now this administration wants to significantly change the enforcement of the four important guardrails enacted by Congress that waiver proposals must meet in order to be approved. These guardrails ensure that the waivers must offer comprehensive plans at an affordable rate that protect patients with preexisting conditions and do not increase the Federal deficit. Under this rule, States can increase costs for vulnerable populations and reduce their quality of coverage. That is unacceptable, especially for this President who promised on the campaign trail that "everybody is going to be taken care of." The intent of the 1332 provision was to let States innovate, so long as they continue to cover the same number of people and maintain the consumer protections set forth in the law. Vermont's waiver is consistent with the ACA and seeks to *expand* coverage to improve healthcare outcomes for all Vermonters.

By allowing States to permit the sale of health insurance plans that do not cover essential health benefits such as maternity care, emergency room visits,

or mental healthcare, those that need comprehensive health insurance coverage will be forced into a high cost plan, or stuck with an insurance plan that can deny benefits for whatever reason. These consumer protections were at the heart of the ACA and are why Vermont and a number of other States have enacted State laws to maintain these critical protections for those with preexisting conditions.

Throughout their numerous attempts to sabotage the ACA, this administration has made dubious claims that they support protections for Americans with preexisting conditions. Certainly, their well-established record clearly and unequivocally refutes this claim. Today, Senate Republicans can show the American people that they do genuinely want to protect Americans with cancer, diabetes, arthritis, substance use disorders, behavioral health disorders, or any of the other preexisting conditions that States would not have to cover under this rule.

This vote is about the more than 130 million Americans with a preexisting condition who need strong protections. It is about who we are as a nation and how we care for our people. Congress must ensure that all Americans have access to comprehensive, high-quality health insurance plans that meet their needs at an affordable rate. The passage of Senator WARNER's the Protect Pre-Existing Conditions Congressional Review Act resolution would be a step in the right direction. We must not send our country back to the days when insurance companies could discriminate against people with preexisting conditions. We must not go backward.

The PRESIDING OFFICER. All time is expired.

The clerk will read the joint resolution for the third time.

The joint resolution was ordered to be engrossed for a third reading and was read the third time.

The PRESIDING OFFICER. The joint resolution having been read the third time, the question is, Shall the joint resolution pass?

Mr. ALEXANDER. 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. DURBIN. I announce that the Senator from Colorado (Mr. BENNET), the Senator from New Jersey (Mr. BOOKER), the Senator from California (Ms. HARRIS), the Senator from Vermont (Mr. SANDERS), and the Senator from Massachusetts (Ms. WARREN) are necessarily absent.

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

The result was announced—yeas 43, nays 52, as follows:

[Rollcall Vote No. 337 Leg.]

YEAS—43

Baldwin	Heinrich	Rosen
Blumenthal	Hirono	Schatz
Brown	Jones	Schumer
Cantwell	Kaine	Shaheen
Cardin	King	Sinema
Carper	Klobuchar	Smith
Casey	Leahy	Stabenow
Collins	Manchin	Tester
Coons	Markey	Udall
Cortez Masto	Menendez	Van Hollen
Duckworth	Merkley	Warner
Durbin	Murphy	Whitehouse
Feinstein	Murray	Wyden
Gillibrand	Peters	
Hassan	Reed	

NAYS—52

Alexander	Gardner	Portman
Barrasso	Graham	Risch
Blackburn	Grassley	Roberts
Blunt	Hawley	Romney
Boozman	Hoehn	Rounds
Braun	Hyde-Smith	Rubio
Burr	Inhofe	Sasse
Capito	Isakson	Scott (FL)
Cassidy	Johnson	Scott (SC)
Cornyn	Kennedy	Shelby
Cotton	Lankford	Sullivan
Cramer	Lee	Thune
Crapo	McConnell	Tillis
Cruz	McSally	Toomey
Daines	Moran	Wicker
Enzi	Murkowski	Young
Ernst	Paul	
Fischer	Perdue	

NOT VOTING—5

Bennet	Harris	Warren
Booker	Sanders	

The joint resolution (S.J. Res. 52) was rejected.

CLOTURE MOTION

The PRESIDING OFFICER. 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 amendment No. 948 to H.R. 3055, a bill making appropriations for the Departments of Commerce and Justice, Science, and Related Agencies for the fiscal year ending September 30, 2020, and for other purposes.

Richard C. Shelby, Mike Crapo, John Cornyn, Roy Blunt, Thom Tillis, Shelley Moore Capito, Roger F. Wicker, Lisa Murkowski, Mike Rounds, Pat Roberts, John Boozman, Marco Rubio, John Barrasso, Kevin Cramer, Richard Burr, James E. Risch, Mitch McConnell.

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 amendment No. 948, offered by the Senator from Alabama, Mr. SHELBY, to H.R. 3055, a bill making appropriations for the Departments of Commerce and Justice, Science, and Related Agencies for the fiscal year ending September 30, 2020, and for other purposes, shall be brought to a close?

The yeas and nays are mandatory under the rules.

The clerk will call the roll.

The legislative clerk called the roll.

Mr. THUNE. The following Senator is necessarily absent: the Senator from Louisiana (Mr. CASSIDY).

Mr. DURBIN. I announce that the Senator from Colorado (Mr. BENNET), the Senator from New Jersey (Mr. BOOKER), the Senator from California (Ms. HARRIS), the Senator from Minnesota (Ms. KLOBUCHAR), the Senator from Vermont (Mr. SANDERS), and the Senator from Massachusetts (Ms. WARREN) are necessarily absent.

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

The yeas and nays resulted—yeas 88, nays 5, as follows:

[Rollcall Vote No. 338 Leg.]

YEAS—88

Alexander	Graham	Reed
Baldwin	Grassley	Risch
Barrasso	Hassan	Roberts
Blumenthal	Hawley	Romney
Blunt	Heinrich	Rosen
Boozman	Hirono	Rounds
Braun	Hoehn	Rubio
Brown	Hyde-Smith	Sasse
Burr	Inhofe	Schatz
Cantwell	Isakson	Schumer
Capito	Johnson	Scott (SC)
Cardin	Jones	Shaheen
Carper	Kaine	Shelby
Casey	Kennedy	Sinema
Collins	King	Smith
Coons	Lankford	Stabenow
Cornyn	Leahy	Sullivan
Cortez Masto	Manchin	Tester
Cotton	Markey	Thune
Cramer	McConnell	Tillis
Crapo	McSally	Toomey
Daines	Menendez	Udall
Duckworth	Merkley	Van Hollen
Durbin	Moran	Warner
Enzi	Murkowski	Whitehouse
Ernst	Murphy	Wicker
Feinstein	Murray	Wyden
Fischer	Perdue	Young
Gardner	Peters	
Gillibrand	Portman	

NAYS—5

Blackburn	Lee	Scott (FL)
Cruz	Paul	

NOT VOTING—7

Bennet	Harris	Warren
Booker	Klobuchar	
Cassidy	Sanders	

The PRESIDING OFFICER. On this vote, the yeas are 88, the nays are 5.

Three-fifths of the Senators duly chosen and sworn having voted in the affirmative, the motion is agreed to.

COMMERCE, JUSTICE, SCIENCE, AGRICULTURE, RURAL DEVELOPMENT, FOOD AND DRUG ADMINISTRATION, INTERIOR, ENVIRONMENT, MILITARY CONSTRUCTION, VETERANS AFFAIRS, TRANSPORTATION, AND HOUSING AND URBAN DEVELOPMENT APPROPRIATIONS ACT, 2020

The PRESIDING OFFICER. The clerk will report the bill by title.

The legislative clerk read as follows:

A bill (H.R. 3055) making appropriations for the Departments of Commerce and Justice, Science, and Related Agencies for the fiscal year ending September 30, 2020, and for other purposes.

Pending:

Shelby amendment No. 948, in the nature of a substitute.

McConnell (for Shelby) amendment No. 950, to make a technical correction.

The PRESIDING OFFICER. The Senator from Texas.

HEALTHCARE

Mr. CORNYN. Mr. President, so far, the 116th Congress has been full of a number of dubious measures, as I might characterize them, by our friends across the aisle as it relates to our healthcare system.

For starters, our Democratic colleagues in the Senate and the House and on the Presidential campaign trail are hailing Medicare for All as the gold standard for healthcare in America.

I was here during the debates over the Affordable Care Act, and I remember President Obama's saying, if you like your policy, you can keep it and that if you like your doctor, you can keep your doctor. Neither one of those proved to be correct and true. Yet, here, our Democratic colleagues have simply given up all pretense and have embraced a Medicare for All Program that would outlaw some 180 million Americans' private health insurance policies. In other words, the policy you get through your employer as part of the fringe benefits of your employment would no longer be available under Medicare for All. This is, of course, socialized medicine, which ensures long waits for standard care.

Yes, it is true that I have heard some say: "Well, it is Medicare for All. Who would want it?" and others say: "No. I am for the public option." Both of these are slippery slopes into a single-payer, socialized medicine healthcare system that will deny consumers the choices they might prefer to make for themselves rather than to leave the government to make those choices for them. Not only would this trigger a lot of disruption, it would also lead to sharp increases in taxes to fund this, roughly, \$30 trillion pipedream.

Last month, Speaker PELOSI managed to take this debate on healthcare to the next level. It seems like controlling people's healthcare alone isn't enough. Now they want to run the drug industry too. Forget about choice. Forget about competition. Forget about innovation. One of the things that has characterized the American healthcare system is the lifesaving innovation of drugs. The Democrats want to now have the Federal Government determine what the formulary is, what drugs are available to you. They want to set the prices and ensure the bureaucrats rather than families are at the center of our healthcare system. They are churning out partisan healthcare bills, one after another, and taking their party further and further to the left with every move.

I would like to think, ultimately, cooler heads will prevail in the Senate, where we have been working on bipartisan bills to bring down healthcare costs. For example, the Senate's Judiciary, Finance, and HELP Committees have each passed bipartisan packages of bills to end surprise billing so as to