

be able to agree that children who are born deserve protection. Surely, that much cannot be controversial.

There is currently no Federal mandate that children who are delivered alive following an attempted abortion should receive medical care. There is no clear guarantee that every child born alive in the United States, whether they were intended to be or not, is entitled to the same life-giving medical attention.

The Kentuckians whom I speak with cannot comprehend why this could be some hotly debated proposition. It almost defies belief that an entire political party can find cause to object to this basic protection for babies. Yet, today, we will see if our Democratic colleagues will even permit the Senate to proceed to this legislation. We will see whether even something this simple and this morally straightforward is a bridge too far for the far left.

I would urge all of my colleagues: Let's advance these bills. Let's take these modest steps. Let's have the courage to say that the right to life must not exclude the most vulnerable among us.

TRIBUTE TO JAY KHOSLA

Mr. McCONNELL. Madam President, on a totally different matter, I have a duty this morning that somehow ranks among my most favorite activities and least favorite activities simultaneously. The good news is that I get to recognize a key member of my staff whom I have come to know and admire a great deal. The bad news is the occasion. This week, after 15 years of outstanding service, he is bidding farewell to the Senate. So I am unhappy with the circumstances, but I could not be more happy to talk about Jay Khosla.

For just shy of 2 years, Jay has served as my chief economic policy counsel. Trade, taxes, banking, and financial services; pensions and retirement; housing—for 2 years, any answer I needed on any of these subjects was one phone call, one email, or one quick meeting away. You can go a long way in this town if you master either the policy details of big issues or the politics surrounding those issues. Jay has mastered both.

When you have a lot of talent and intelligence, major projects tend to find their way to your desk. So consider the fact that Jay has been at the center of practically every major economic policy achievement over the past decade-plus.

Jay arrived as a young healthcare staffer for then-Majority Leader Bill Frist. Talk about an opening act—not just working for a majority leader, but one who is also an M.D. and who is focused on healthcare. The bar was set high, but Jay, of course, exceeded it.

He moved to the Budget Committee and then crafted policy for Senator McCain's Presidential campaign. Then, he returned to work for Senator Hatch and the Finance Committee. Before

long, Jay was Senator Hatch's secret weapon. As he rose through the ranks to policy director and then to staff director, he rapidly became a not-so-secret weapon. He was an invaluable asset to the chairman, to the committee, and, really, to our entire conference.

His relationships extended across the aisle as well. Our Democratic colleagues respect him greatly. His colleagues on the committee remember that, even when it might have been easier to pull back behind party lines and just try to craft a bill within the majority, Jay stayed stubbornly dedicated to the bipartisan process as long as possible.

A team player, an honest broker, Jay doesn't want to just get big things done, he wants to get them done the right way. From trade promotion authority in 2015 and historic tax reform in 2017, to USMCA this past year, these huge accomplishments and many more, like fighting the opioid epidemic and fixing the dysfunctional sustainable growth rate that has plagued Medicare—all of these issues had this staff leader right at the center. In many cases, his work started months or years in advance, meeting with leaders, pouring the foundation for new policy, and staying on the case right through to the finish line.

Needless to say, this is a resume that, basically, anyone in Washington would kill for, but effectiveness is only part of Jay's magic. The colleagues whom Jay supervised at the Finance Committee remember a boss who was kind, generous, patient, and unflappable, even as he guided them through legislation of the highest consequence.

More recently, we in the majority leader's office have relished his laugh-out-loud punch lines, his deadpan sarcasm, and his creative nicknames. Jay is willing to take everyone down a peg when they need it, including himself.

I have worked with all kinds of talented staff, but I have to say that the demeanor that Jay brings to work is somewhat unique. Despite being so knowledgeable, connected, and hard-working, Jay seems to flow through all the challenges with a confidence and calmness that almost borders on relaxation. If you didn't know better, you would almost be suspicious. Somehow, you never see Jay sweat—well, at least not in the office, anyway.

Jay's colleagues like to rib him about the personal training regimen he maintains, along with the ultra-healthy diet and other enviable aspects of work-life balance that he somehow manages to carve out in this place that is so notorious for none of that. It is all part of the unique Jay Khosla magic.

This is someone who has been known to reply to serious email inquiries with a funny photo of a cat dangling from a tree branch, captioned "Hang In There!"

Jay is someone who frequently concludes his answers to pressing ques-

tions, including from Senators, with a smile and this catchphrase: "I have a feeling it's all going to work out."

Somebody less accomplished would never get away with this. From someone with less mastery of the details, you would scoff and find someone else to talk with, but when it is Jay, you know everything will actually work out because he is the one on the case. Jay helps make everyone around him as calm, confident, and cheerful as he is. It is not just because of his charisma. It is because he is so good at what he does. So, look, it is never fun to bid farewell to someone who is a big part of the brains of your operation, and it is never fun to say goodbye to someone who is a big part of the heart of your team either, and it is really no fun to say goodbye to somebody who has managed to be both.

Jay has only formally worked for me for a couple of years, but he has been a trusted advisor and an honorary part of my team for a lot longer. He has been a big part of the Senate for more than a decade.

When I say that Jay knows how to prioritize, I mean it, and his real bottom line is family. He and his beloved wife Lisa have two boys, Shya and Asher. They form a tight-knit unit together with Jay's parents, Vijay and Suman, and his sister Anchal and beyond. Jay may have made it look suspiciously easy all these years, but jobs like this are never easy, least of all on your family. It turns out that the Khosla clan would like to see a little more of this guy, and Jay doesn't mind the sound of a new chapter and some new challenges either.

We are really going to miss him. We thank him for everything. We feel certain his next chapters will bring new happiness all their own. As a wise man once told me, "I have a feeling it's all going to work out."

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.

EXECUTIVE SESSION

EXECUTIVE CALENDAR

The PRESIDING OFFICER. Under the previous order, the Senate will proceed to executive session to resume consideration of the following nomination, which the clerk will report.

The senior assistant legislative clerk read the nomination of Robert Anthony Molloy, of the Virgin Islands, to be Judge for the District Court of the Virgin Islands for a term of ten years.

Mr. McCONNELL. Madam President, 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. Madam 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.

CORONAVIRUS

Mr. SCHUMER. Madam President, the coronavirus has already spread to 30 countries, including South Korea, Italy, Iran, and 53 confirmed cases here in the United States. Officials at the World Health Organization are now warning world governments to begin preparing for a pandemic—a pandemic.

Here in the United States, the Trump administration has been caught flat-footed. The administration has no plan to deal with the coronavirus—no plan—and seemingly no urgency to develop one. Even now, after the virus has already become a worldwide health crisis, with rapidly growing economic risks, the Trump administration is scrambling to respond. We have a crisis, and the Trump administration is trying to build an airplane while already in midflight. The harsh fact of the matter is, the Trump administration has shown towering and dangerous incompetence when it comes to the coronavirus.

Coronavirus testing kits have not been widely distributed to our hospitals and public health labs. Those without these kits must send samples all the way to Atlanta rather than testing them on site, wasting precious time as the virus spreads.

The administration has eliminated—eliminated—the global health security teams. That is global health security, just what we need now. They have eliminated the teams from both the National Security Council and the Department of Homeland Security. And thanks to years of cuts to the global health division at the Centers for Disease Control by the Trump administration, the CDC has been forced to reduce the number of countries it operates in from 49 to 10.

These are our frontlines. If we can deal with these diseases before they get to the United States, we are a lot safer, and the administration has mercilessly and thoughtlessly cut, cut, cut these teams. And then, only a month ago, even as we began to hear about the coronavirus in China, the administration sent us a budget that proposed cutting the CDC budget by 16 percent. The CDC is the agency on the frontlines that keeps us safe, keeps us healthy, and prevents American lives from being lost.

Four words describe the administration's response to the coronavirus: towering and dangerous incompetence. When officials at the CDC rec-

ommended that infected passengers from a cruise ship not be flown to the United States alongside the non-infected passengers, the State Department overruled them. Shockingly, they put infected and noninfected on the same plane. Was this because of politics? Did somebody call President Trump or someone else? There are rumors to that effect. We don't know if they are true. They should be checked out.

Typical of the administration, though, or certainly typical in so many different instances, decisions were made based on politics and optics rather than on the informed opinion of our scientists and doctors. It is like the Soviet apparatchiks overruling the nuclear scientists at Chernobyl to avoid embarrassment to the regime.

Federal agencies have been so hollowed out that one of the key figures in responding to the coronavirus in our government is Ken Cuccinelli, an immigration hard-liner ideologue with no public health expertise. Yesterday, Mr. Cuccinelli posted a tweet actually asking for information about the spread of the coronavirus. The one person the administration can come up with to help deal with the issue then emails and asks for information. This is, of course, because he has no knowledge. He is not a scientist. He is not a disease preventer. This is towering and dangerous incompetence.

President Trump, meanwhile, has said that the coronavirus might "miraculously" fade once the weather gets warmer—towering and dangerous incompetence. With no plan to deal with this potential health crisis, the administration last night issued an emergency budget request. It was too little and too late. It asked Congress to reprogram funding dedicated to fighting Ebola—still considered an epidemic in the Democratic Republic of the Congo—to deal with coronavirus. That is robbing Peter to pay Paul. It is further evidence that the administration is not taking the coronavirus as seriously as it should. I said as much last night here on the floor.

The President seemed upset about my criticism of the budget proposal this morning. I am glad he has noticed. Maybe he will start taking this issue more seriously. Now that I have gotten the President's attention, I want to lay out five things the Trump administration must do to get a handle on the coronavirus.

The administration must, at a minimum, restore the cuts to the CDC budget. Trump's cuts to the CDC budget have had dramatic effects, shrinking the agency's footprint abroad to help combat pandemics. The administration must commit now to reverse it.

The Trump administration must appoint a point person—a czar—to implement a real plan to manage the coronavirus: an independent, non-partisan, global health expert with real expertise, not a political appointee like Cuccinelli—somebody who is a sci-

entist who knows these issues and can coordinate the myriad Federal agencies to fight the fight and prevent American lives from being lost.

The administration must increase its emergency budget request to at least \$3.1 billion with no cuts—no cuts—for Ebola funding, which is still raging in Africa. The \$3.1 billion is the amount our public health organizations say is necessary. The funding must also include a commitment to reimburse States and localities for all expenses related to addressing the outbreak.

The Trump administration must expedite delivery of diagnostic testing kits to all 50 States and public health laboratories so the tests don't have to be sent—these samples don't have to be sent to Atlanta and people wait, wait, and wait for a result as the disease spreads.

And finally, the administration must stop the proliferation of junk insurance plans that do not even cover coronavirus tests and other related healthcare services. This is typical of why we have opposed these junk plans. They cover hardly anything. Now that we have this crisis—the coronavirus—so many people who have these junk plans will not get tested because they can't afford it and because their plans don't cover it, a glaring example of why junk health plans—the administration's solution, it seems, to the health crisis—are totally inadequate and dangerous.

These are five basic steps that any competent administration would have already taken in preparation for the pandemic. There may be others as well, but this is what happens when you have an administration and a President so skeptical of science, so contemptuous of expertise, so practiced in obscuring inconvenient facts, and so disdainful of organization and preparation.

Madam President, you need to get your act together now. This is a crisis. We need you to act. We need this administration to finally do the right thing after weeks of dithering and exhibiting towering and dangerous incompetence.

WOMEN'S HEALTHCARE

Madam President, on another matter also related to healthcare, today Leader McCONNELL and Senate Republicans have scheduled votes on two divisive, anti-choice, anti-women, and anti-family bills. The Senate has voted them down before; it will again.

After weeks of complaining that the impeachment trial of President Trump was preventing the Senate from doing the people's business, this is what the Senate Republicans have proposed: fake, dishonest, and extreme legislation that has nothing to do with improving the lives of ordinary Americans. I say "fake" because these bills pretend we don't already have laws on the books that protect infants. Additional legislation is completely unnecessary, irrational, a show with no positive effect on the women of America who need healthcare. Healthcare, Mr.

President. Healthcare, Republican Senators. Healthcare. That is what women want, not these show bills that appeal to an extreme view. The American people know it. The American women know it.

Additional legislation such as proposed today is at best unnecessary and irrational. But it is dishonest because these bills are not intended to fix real problems faced by real Americans; they are intended to provoke fear and misunderstanding about a very difficult issue so Republicans can score political points with their far-right base. Any Senator who thinks this is going to appeal to the mainstream of their constituents—women throughout their States—is missing the point.

I say “extreme” because these bills would, in effect, criminalize women’s reproductive care and intimidate healthcare providers—another example of the Senate Republicans’ war on *Roe v. Wade* and a woman’s constitutionally protected right to make her own private healthcare decisions and to not have politicians tell a woman what to do.

Putting these already defeated bills up for a show vote is not a good-faith attempt to improve the lives of everyday Americans—particularly everyday American women—as Republicans claim they want to desperately do. Every single Senate Republican knows these bills cannot and will not pass, but they are putting them on the floor anyway to pander to the hard right and to cover up the fact that they will not provide good healthcare for women, that they are voting day in and day out to take away the right to healthcare of women throughout America and letting the administration, led by President Trump, do just that.

If Republicans were serious about getting back to the people’s business, there is no shortage of bipartisan legislation we could consider. Nearly 400 bills have passed the House, hundreds of them on a bipartisan basis, and they have collected dust in this Chamber. They have gone into Leader McConnell’s legislative trash can. On healthcare alone, we have legislation to protect Americans with preexisting conditions, legislation that would eliminate junk insurance plans, and legislation to reduce maternal and infant mortality rates, which my colleague from Illinois will talk about, I believe, shortly. All of these bills have languished in Leader McConnell’s legislative junkyard.

When Leader McConnell or any Republican says “Oh, impeachment stopped us from doing things,” look at what we are not doing today—not only what we are doing, which is meaningless to women, but what we are not doing—protecting their healthcare, protecting *Roe v. Wade*, which two-thirds of American women want protected.

Any of the proposals that are in McConnell’s legislative graveyard would be better than this anti-choice, anti-

women, and anti-family legislation, but, typical of Leader McConnell, Republicans have chosen once again to play politics on the Senate floor.

Leader McConnell should stop wasting the few votes he does schedule with these shameless political stunts and instead bring legislation to the floor that would actually improve the healthcare of the American people and of American women in particular.

I yield the floor.

The PRESIDING OFFICER (Mrs. LOEFFLER). The Democratic whip is recognized.

CORONAVIRUS

Mr. DURBIN. Madam President, I would like to note that this morning at 8 a.m., an unusual meeting took place in this Capitol Building. It was in the area of the building that is reserved for top-secret classified briefings. All Members of the Senate were invited. The issue at that briefing was the coronavirus.

I sat through the major part of that briefing before I had to leave for another meeting. There wasn’t anything in there that should have been classified or top secret. If there were ever a time when we need to be open, honest, and complete in telling the whole story to the American people, it is this moment when we face the coronavirus, which started, we believe, in China and is now spreading across the world.

I back up what the Democratic leader said earlier because the request was made at this meeting for some \$2 billion in the United States to respond to this coronavirus threat. When we questioned the administration as to why that number and what they were going to do with it, the answers were limited. In fact, when it came to the source of the money, they had no answer at all.

Remember, this is an administration which has consistently asked to cut the funding for the Centers for Disease Control. It has been a low priority of the Trump administration until we faced this threat, and now they have suddenly awakened. It turns out that even in the next fiscal year, which begins on October 1, the Trump administration has asked to cut the money for the Centers for Disease Control again.

You ask yourself, who is in charge over there? Who is making the basic decisions? Well, it could be the person who has decided that every available dollar needs to be put into a wall on the Mexican border.

Think of this for a moment: Ten billion dollars currently sits in an account for the building of this wall—unspent. They can’t spend it. Yet the President recently asked for \$3.8 billion more for building his almighty wall—which I thought Mexico was going to pay for—and now comes at the last minute asking for some \$2 billion for the coronavirus.

As one Senator said in the meeting this morning, when it comes down to it, if our business is to protect the American people, isn’t the highest priority to stop the spread of this virus in

the United States? Of course it is, and that is why it should be a higher priority. No wall is going to stop that virus from coming into the United States. The President ought to wake up to that reality.

When you look at the efforts that are being made here in the United States and around the world, we can and should do more. I support this request for a dramatic increase in funding for this purpose now—now, before it spreads across the United States, which God forbid it ever does. We don’t want it to. We want to make sure we have done everything in our power to stop it, and that means empowering those in charge with the knowledge, with the expertise, and with the authority to protect our families. First and foremost, protect American families. That is a much higher priority than any campaign promise this President made about a wall on our southern border.

I support the effort by Senator Schumer asking for some top doc or some individual with management authority, management experience, and the knowledge of the public health threat we face with this coronavirus, to be put in charge to coordinate the myriad agencies that will be touched by this campaign to protect America. Now is the time to do it. The time to do it—at least now, but it should have been much earlier, with more money dedicated to this purpose rather than cutting back on these key agencies.

WOMEN’S HEALTHCARE

Madam President, on a related topic, related to health, this morning Senator Mitch McConnell came to the floor and said that today, this afternoon, we are likely to take up two votes on motions to proceed. This is so typical now of what we do in the Senate. Instead of bringing a measure to the floor with an understanding of an amendment process so that we can discuss it fully, vote on it in many different aspects, and then come to a conclusion with a majority vote in this body, Senator McConnell comes to the floor with another drive-by political hit on the issue of women’s reproductive health.

We know what this issue is all about. Many of us who have served for years know there is a fundamental difference among those of us here in the Senate, and we know what the outcome of this vote will be because at least one of these votes was cast last year on exactly the same topic. So why would Senator McConnell bring it back? It is to get that drive-by shooting when it comes to this political issue. To me, that is unfortunate, and I would like to suggest there is a better alternative.

BLACK HISTORY MONTH

Madam President, this is Black History Month, and I want to take the time to celebrate a person who made history when it came to healthcare.

Helen Octavia Dickens was born in Dayton, OH, in 1909, a daughter of a former slave. She attended Crane Junior College in Chicago, now Malcolm X

College. In 1934, she graduated from the University of Illinois College of Medicine, Chicago, as the only African-American woman in her class of 137 students. She was the university's first Black woman physician graduate.

Dr. Dickens became a specialist in obstetrics, eventually moving to Philadelphia to work in a birthing center, where she provided care for the poor. While there, she broke barriers by becoming the first African-American woman to be admitted into the American College of Surgeons, receive board certification in obstetrics and gynecology, and practice medicine in Philadelphia.

Her work to help heal and guide women of all ages was nothing short of inspiring and her efforts to shine light on the troubling issue of health disparities in the United States that continues to this day. Let me be specific.

America has a long history of medical inequality. Sadly, we know that history has not ended. From premature births to premature deaths, people of color disproportionately bear the brunt of America's troubled healthcare system. On average, they live sicker, die sooner, and go without needed medical care more often. Communities of color suffer disproportionately from HIV, heart disease, stroke, diabetes, kidney failure, prostate cancer, and other medical conditions.

President Obama signed the Affordable Care Act into law nearly 10 years ago. It is still one of my proudest votes. Thanks to that law, 20 million Americans gained health insurance—more than 1 million in my home State of Illinois.

I am proud to say that law has taken strong steps to address racial inequalities in healthcare across America. A report last month found that the Affordable Care Act helped narrow racial and ethnic disparities in healthcare access and coverage, especially in States like mine—Illinois—that expanded the reach of Medicaid. Yet we know that better is not nearly good enough when it comes to healthcare. Nearly half of Black Americans—46 percent—live in the 15 States that did not expand Medicaid coverage after the Affordable Care Act was passed.

Another area of racial disparity is maternal and infant health. I raise this issue because instead of these drive-by issue votes, which Senator McCONNELL insists on without debate and without amendment, we should be addressing an issue that should have bipartisan support. Let me be specific about what I mean.

The United States ranks 32nd out of the 35 wealthiest nations when it comes to infant death, infant mortality. Let me repeat that. Our Nation ranks 32nd out of the 35 wealthiest nations when it comes to infant mortality, and babies of color are the hardest hit.

If you are an African-American infant born in America today, you are twice as likely to die in the first year of birth compared to White infants.

And the mother giving birth? In the United States, African-American women are three to four times more likely to die giving birth than other women in this country. In Illinois, sadly, they are six times more likely to die.

The United States is one of only 13 countries in the world where the maternal mortality rate is worse now than it was 25 years ago. Instead of impaling ourselves politically on the issues that divide us, can we come together on an issue that could unite us: that we are going to do something in America to reduce the infant and maternal mortality, particularly among African Americans.

I have given a lot of thought to what we can do to try to bridge this racial divide to help women and babies of color. For the past two Congresses, I have introduced a bill with Illinois Congresswoman ROBIN KELLY called the MOMMA Act. The bill would expand Medicaid coverage for new moms from 60 days after birth to a full year postpartum to ensure adequate care after the child is delivered. The bill would also ensure implicit bias and cultural competency training for healthcare providers to help address health disparities in communities of color and increase access to doulas.

We are simply not doing enough to correct this injustice and save the lives of new moms and babies across the country. Instead, Senate Republicans are pushing two anti-choice bills this day that will do nothing—nothing—to help improve maternal and infant outcomes in America nor to help address racial disparities that currently exist. If they actually wanted to save and improve the lives of new moms and babies, they should consider passing legislation like the MOMMA Act, which I have just described. I am going to try to call this to the floor this afternoon. Wouldn't it be a breath of fresh air in the U.S. Senate if, on a bipartisan basis, we could agree to do something about this public health crisis affecting infants and mothers across America?

The fact that we rank so low in the world standings of safety when it comes to delivering a baby among African-American parents in this country is just unacceptable and unforgivable. Can we muster the courage to stop the political shootings here on the floor, this drive-by shooting of political issues, and instead address an issue which truly is a life-and-death matter that we all should agree on? The Republicans have a choice this afternoon to join me in this effort.

I am proud to stand here today and to honor Helen Dickens, the African-American doctor I described earlier who passed away in 2001. Her fierce advancement in the medical field helped pave the way for future doctors, particularly women of color, and led to important discoveries in women's health.

Today, much of what we know about the importance and effectiveness of an-

nual OB/GYN visits was influenced by Dr. Dickens' work. With a grant from the National Institutes of Health, she helped train general practitioners to give women the exams they need to note early detection of cervical and uterine cancer. In 1982, the University of Illinois honored Dr. Dickens with the Distinguished Alumni Award.

While the United States has a troubled past in addressing racial inequality, we need to learn from the mistakes of the past to ensure that all Americans receive the healthcare they deserve in the future.

Dr. Helen Dickens and many other African-American pioneers give me hope for a brighter future.

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

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

ABORTION

Mr. THUNE. Madam President, today we will vote on two pro-life bills: the Born-Alive Abortion Survivors Protection Act and the Pain-Capable Unborn Child Protection Act.

These bills should be completely uncontroversial. Every one of us in this Chamber ought to be able to agree that infants who are born alive during an abortion procedure should receive the same care that a baby born alive in a hospital would receive.

Every one of us ought to agree that, at the very least, we should not be aborting babies after the point that they can feel pain, but unfortunately the abortion extremism in the Democratic Party is such that it is unlikely that these two bills will even get a chance to be debated.

We shouldn't even need the Born-Alive Abortion Survivors Protection Act. It should be obvious that any baby born alive, wherever he or she is born, ought to receive care, but with more than one leading Democrat over the past year refusing to rule out infanticide, it has become clear that we need to underscore that being born alive in an abortion clinic instead of a hospital doesn't eliminate a baby's right to medical care.

Like the Born-Alive Abortion Survivors Protection Act, the Pain-Capable Unborn Child Protection Act should be a no-brainer. This legislation would ban abortions beginning in the sixth month of pregnancy, a point at which science has clearly demonstrated that the unborn child is able to feel pain—and not only able to feel pain. By this point in a pregnancy, approximately 20 weeks, babies are almost able to survive outside of their mothers. Babies have survived after being born at 25 weeks, at 24 weeks, at 23 weeks, and, like Ellie Schneider, who attended the State of the Union Address with her mom, at 21 weeks.

It is unthinkable that we are killing babies who are so far advanced that it is possible for them to survive outside of their mothers, but we are. In 2016, somewhere around 11,000 babies were aborted at or after the 21-week mark in pregnancy—11,000 in one year.

Democrats like to point to European countries to support their push for government-run healthcare and other socialist policies, but they never mention—they never mention—that almost every European country has more limits on abortion than we have here in the United States. In fact, the United States is one of just seven countries in the entire world that allow elective abortions after 20 weeks of pregnancy. Among the other countries are China and North Korea—not exactly the kind of company we want to be in when it comes to keeping and protecting human rights because—make no mistake—that is what we are talking about with abortion: human rights.

Abortion denies unique, individual human beings, with their own fingerprints and their own DNA, the most basic of human rights: the right to life. It is happening on a massive scale. Every year, in the United States alone, hundreds of thousands of irreplaceable human beings are killed by abortion. That is not some number that the pro-life movement has cooked up. That is straight. That is straight from the pro-abortion Guttmacher Institute, formerly affiliated with Planned Parenthood, which reports, “Approximately 862,320 abortions were performed in 2017”—862,320. Most of us can’t even fathom a number that big.

To put it in perspective, 862,000 is roughly equivalent to the population of the entire State of South Dakota, my home State. That is right. Think about that. In 2017 alone, the number of babies killed by abortion was roughly equivalent to the population of the entire State of South Dakota.

We can do better. Americans are better than this. Our country was founded to safeguard human rights, not to take them away. While we haven’t always lived up to that promise, we have never stopped trying. It is time for us, as a country, to stand up and to start protecting the rights of unborn human beings. The Born-Alive Abortion Survivors Protection Act and the Pain-Capable Unborn Child Protection Act will not stop all, or even most, abortions, but they are an important step, a chance for us, as Americans, to draw a line in the sand and to start standing up for the rights of babies who are able or nearly able to survive outside of their mothers. It is time for us to join the vast majority of the global community in prohibiting elective abortions past 20 weeks. It is time for us to make it clear that, no matter what some extreme Democrats may say, Americans believe that all children, whether born alive in a hospital or in an abortion clinic, deserve protection and basic medical care.

I hope my colleagues across the aisle will take a stand for human rights and

for human decency and allow debate to move forward on these two important pro-life bills.

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.

Mrs. FISCHER. Madam President, I ask unanimous consent that the order for the quorum call be rescinded.

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

VOTE ON MOLLOY NOMINATION

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

Mrs. FISCHER. Madam 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 legislative clerk called the roll.

Mr. DURBIN. I announce that 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. CRUZ). Are there any other Senators in the Chamber desiring to vote?

The result was announced—yeas 97, nays 0, as follows:

[Rollcall Vote No. 54 Ex.]

YEAS—97

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

NOT VOTING—3

Klobuchar Sanders Warren

The nomination was confirmed.

The PRESIDING OFFICER. Under the previous order, the motion to reconsider is considered made and laid upon the table, and the President will be immediately notified of the Senate’s action.

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 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 Silvia Carreno-Coll, of Puerto Rico, to be United States District Judge for the District of Puerto Rico.

Mitch McConnell, Mike Crapo, Thom Tillis, Mike Rounds, Lamar Alexander, John Hoeven, Roger F. Wicker, Rob Portman, John Thune, Cindy Hyde-Smith, John Boozman, Tom Cotton, Chuck Grassley, Kevin Cramer, Steve Daines, Todd Young, John Cornyn.

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 Silvia Carreno-Coll, of Puerto Rico, to be United States District Judge for the District of Puerto Rico, 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. DURBIN. I announce that 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. Are there any other Senators in the Chamber desiring to vote?

The yeas and nays resulted—yeas 96, nays 1, as follows:

[Rollcall Vote No. 55 Ex.]

YEAS—96

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

NAYS—1

Hirono

NOT VOTING—3

Klobuchar Sanders Warren

The PRESIDING OFFICER. On this vote, the yeas are 96, the nays are 1.

The motion is agreed to.