

## 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 the nomination of Katharine MacGregor, of Pennsylvania, to be Deputy Secretary of the Interior.

Mitch McConnell, John Boozman, John Cornyn, Mike Crapo, Kevin Cramer, Tim Scott, Mike Rounds, James E. Risch, Roger F. Wicker, Steve Daines, John Barrasso, John Hoeven, Todd Young, Pat Roberts, John Thune, David Perdue, Lisa Murkowski.

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 Katharine MacGregor, of Pennsylvania, to be Deputy Secretary of the Interior, shall be brought to a close?

The yeas and nays are mandatory under the rule.

The clerk will call the roll.

The senior assistant 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. Are there any other Senators in the Chamber desiring to vote or change their vote?

The yeas and nays resulted—yeas 59, nays 38, as follows:

[Rollcall Vote No. 56 Ex.]

## YEAS—59

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

## NAYS—38

Baldwin	Feinstein	Rosen
Bennet	Gillibrand	Schatz
Blumenthal	Harris	Schumer
Booker	Hassan	Shaheen
Brown	Hirono	Smith
Cantwell	Kaine	Stabenow
Cardin	Leahy	Tester
Carper	Markey	Udall
Casey	Menendez	Van Hollen
Coons	Merkley	Warner
Cortez Masto	Murray	Whitehouse
Duckworth	Peters	Wyden
Durbin	Reed	

## NOT VOTING—3

Klobuchar Sanders Warren

The PRESIDING OFFICER. On this vote, the yeas are 59, the nays are 38.

The motion is agreed to.

## EXECUTIVE CALENDAR

The PRESIDING OFFICER. The clerk will report the nomination.

The senior assistant legislative clerk read the nomination of Katharine MacGregor, of Pennsylvania, to be Deputy Secretary of the Interior.

## RECESS

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

Thereupon, the Senate, at 12:59 p.m., recessed until 2:15 p.m. and reassembled when called to order by the Presiding Officer (Mrs. BLACKBURN).

## LEGISLATIVE SESSION

## PAIN-CAPABLE UNBORN CHILD PROTECTION ACT—MOTION TO PROCEED

The PRESIDING OFFICER. Under the previous order, the Senate will resume legislative session to consider the motion to proceed to S. 3275, which the clerk will report.

The senior assistant legislative clerk read as follows:

Motion to proceed to Calendar No. 420, S. 3275, to amend title 18, United States Code, to protect pain-capable unborn children, and for other purposes.

The PRESIDING OFFICER. Under the previous order, the time until 3:30 p.m. will be equally divided between the two leaders or their designees.

The Senator from Alaska.

## NOMINATION OF KATHARINE MACGREGOR

Ms. MURKOWSKI. Madam President, very briefly, here this afternoon, beginning at 3:30, we will have a series of votes that include the nomination of Katharine MacGregor to be the Deputy Secretary of the Department of the Interior. I would like to provide my support for this nomination.

I want to thank my colleagues on the Energy and Natural Resources Committee for working with me to report then re-report Ms. MacGregor's nomination, which moved out on a bipartisan basis.

I thank the majority leader for filing cloture on her nomination before the recess so we could confirm her this week.

She has a lot of work to do at Interior, and we need her on the job. She did very well at her confirmation hearing last year. She has significant experience on the issues she will face as Deputy Secretary, having worked here on Capitol Hill for 10 years, as the principal deputy and Assistant Secretary for Land and Minerals Management, as well as the Department's Deputy Chief

of Staff, and, most recently, exercising the authority of the Deputy Secretary.

Ms. MacGregor's nomination has drawn the support of dozens of groups, including some in my State: Alaska Federation of Natives, Arctic Slope Regional Association, Doyon Limited, American Wind Energy Association, Congressional Sportsmen's Foundation, Theodore Roosevelt Conservation Partnership, National Cattlemen's Beef Association, Public Lands Council, and many others.

I personally share those groups' confidence that Ms. MacGregor will do a good job as Deputy Secretary. I think she is well qualified. She has the right experience to succeed in this role. I think she will be a fine asset for Secretary Bernhardt and the rest of the Interior team. I would urge my colleagues to support her full confirmation.

I yield the floor.

The PRESIDING OFFICER. The Senator from Illinois.

## UNANIMOUS CONSENT REQUEST—S. 916

Mr. DURBIN. Madam President, later this afternoon, we are going to have two votes on motions to proceed. They are procedural votes to go forward on two pieces of legislation relative to the issue of abortion. Those of us in public life know full well that this is a very controversial issue. There are people who feel very strongly on one side and very strongly on the other.

These votes this afternoon will not resolve that conflict. They don't try to. What the Republican majority under Senator MCCONNELL has decided to do is to bring back for a vote two items we already voted on. We know the outcome. We can virtually predict within one or two votes what it is going to be.

At the end of the day, Republicans will turn to a special interest group and say: We told you we could call this every year. We did it.

We will have Members who will vote their conscience on both sides of the aisle, but the net result of that is not going to be to change anything for the better in the United States, when it comes to the issues that challenge us.

What I would like to do is to come to this floor with a radical idea. I have an idea how we can come together, regardless of our position on that issue, and do something constructive for this country. Let me tell you what I have in mind. The United States currently ranks 32 out of 35 industrial nations when it comes to infant mortality. That is right—32 out of 35 when it comes to the survival of babies in the United States once born.

A 2018 report published in Health Affairs by Global Health characterized the United States of America as "the most dangerous of wealthy nations for a child to be born into." What they found was that U.S. babies—babies born in the United States—are three times as likely to die of premature birth and more than twice as likely to die of SIDS than babies in comparably rich countries. Every year, more than

23,000 infants die in the United States, largely due to factors that in many cases could have been prevented: low birth weight, maternal health complications, prematurity.

Babies of color are particularly at risk. Black infants are twice as likely to die in America as White infants, a disparity that is greater than it was in the year 1850 in this country.

We are not only losing babies, we are losing mothers, as well. Listen to this statistic. The United States is one of only 13 countries in the world where the rate of maternal mortality—mothers dying during the birth process, related to pregnancy or childbirth, for up to a year postpartum—is worse than it was 25 years ago. We haven't moved forward. We have moved backward when it comes to mothers surviving child birth.

Nationwide, more than 700 women die every year as a result of pregnancy and more than 70,000 suffer near-fatal complications. More than 660 percent of these deaths are preventable.

Sadly, much like with babies, the tragedy of maternal mortality is even more pronounced when you look at communities of color. In the United States of America, women of color are three to four times more likely than White women to die as a result of pregnancy. If you think it has something to do with poverty and wealth—that is what I thought—there is no correlation. The only correlation is race.

In my State of Illinois, I am sorry to report that if you are an African-American woman, you are six times more likely than a White woman to die in childbirth. That is why Congressional Representative ROBIN KELLY, in the House, and my colleague Senator TAMMY DUCKWORTH and I, in the Senate, have joined in introducing the MOMMA's Act.

First and foremost, more than anything, this bill would expand the length of time that a new mother can keep her Medicaid health coverage. Currently, Medicaid only has to cover women for 2 months after the child is born. Our bill would expand that to a full year. The Medicaid Program pays for 50 percent of all births nationwide—44 percent in Illinois. It is a big part of the treatment of women who are giving birth to children. This program is vital for new moms and babies, and it makes no sense that a new mom's health coverage is terminated 2 months after she has given birth. Why don't we stick with her so she can live? Why don't we do something affirmative to say that we are committed to mothers and children on a bipartisan basis, regardless of our position on any other issue?

The MOMMA's Act would also provide access to doulas, as well as improve implicit bias and cultural competency training among healthcare providers. Too often Black women are ignored or not taken seriously by healthcare providers. Doulas can help provide education advocacy and support for women whose voices today are

being ignored. Our bill would establish national obstetric emergency protocols and ensure dissemination of the best practices for healthcare providers dealing with moms and babies. Finally, it would help to standardize maternal and infant health data collection reporting so we have a better idea of what is happening and why.

Our bill is supported by the American Medical Association, Families USA, the March of Dimes, the American College of Obstetricians and Gynecologists, the Society for Maternal-Fetal Medicine, and the Black Mamas Matter Alliance. Our bill is supported by these and many other public health and provider organizations because it would save the lives and improve the lives of moms and babies.

We can debate the issue of abortion back and forth all day. We know how the votes are going to turn out, and we know nothing is going to occur. Why don't we come together on something bipartisan that says we are all dedicated to reducing the incidence of infant mortality and maternal mortality in this country? Isn't that one thing we can agree on? That is my challenge to this Senate Chamber.

Leader MCCONNELL has made it clear that he has no intention of allowing the Senate to debate and pass legislation that will actually help families in need. I hope he is wrong. Instead, he wants us only to vote on controversial judicial nominees and politically charged anti-choice legislation that has no chance of passing. If he is serious about wanting to save the lives of babies and their mothers, I hope that he will make an exception for the MOMMA's Act.

I would like to make a unanimous consent request.

I ask unanimous consent that the Finance Committee be discharged from further consideration of S. 916, the Mothers and Offspring Mortality and Morbidity Awareness Act, also known as the MOMMA's Act; 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 Nebraska.

Mr. SASSE. Madam President, reserving the right to object, I would like to address Senator DURBIN's comments and his unanimous consent request through the Chair.

First, I am glad the Senator from Illinois wants to reduce infant mortality rates and wants to reduce maternal mortality rates. I agree on both of these goals.

On the subject of infant mortality, the Senate is going to vote on one infant mortality bill in about an hour. The senior Senator from Illinois said a moment ago that there are two anti-choice pieces of legislation this afternoon. For reporters and the public pay-

ing attention, LINDSEY GRAHAM's bill is about abortion. I support Senator GRAHAM's bill. I don't exactly agree with the characterization of it as leading with the anti-choice language, but it is an abortion bill.

The second piece of legislation we are considering today is not in any way an abortion bill. The anti-choice legislation rhetoric that you are using doesn't have anything to do with the actual legislation that we are considering this afternoon.

Yet I hope that you would consider on the Born-Alive Abortion Survivors Protection Act the fact that it is addressing some cases of mortality by making sure babies who have survived abortion get care. These are babies who are already born and outside the mother.

The Senator's passionate speech about infant mortality suggests that either we are doing more cynical posturing around here or that folks plan to actually support this bipartisan piece of legislation. I hope it is the latter. I sincerely hope that the Senator would vote in accord with the positions he took earlier in his career and that we would vote in favor getting important stuff done on this legislation.

In addition, as for the comments he made on the subject of maternal mortality rates, I agree with him. Many of these tragedies are preventable and, I believe, despite being the second or third or fourth most conservative Member of the Senate by my voting record and believing in small government, I agree we underfund a lot of these pieces of public health investment, and I would like us to do more to address preventable maternal tragedies as well.

Therefore, in a moment, I am going to ask if the senior Senator from Illinois would agree to modify his unanimous consent request to include the Grassley amendment. I will use all of the appropriate parliamentary language at the end but, for public understanding, this amendment, the Grassley amendment, would give States \$2.5 billion new dollars to address maternal health and at-risk communities. In addition, this amendment would give \$200 million to address maternal mortality under the Maternal and Child Health Services Block Grant Program. We are talking about more funding, fully offset, for at-risk moms—no politics, no gimmicks. It is in line with the policies that the senior Senator from Illinois was just advancing.

It is my belief the pro-life position is pro-baby, pro-mom, and pro-science. If the Senator from Illinois wants to spend another \$2.7 billion to help moms, I am aligned with him. It would be great if we could get that done forever. If, however, we are trying to change the subject from the Born-Alive Abortion Survivors Protection Act and that means we can't advance a deal to protect these moms and babies, that would be disappointing.

I ask unanimous consent that the Senator modify his request to include

the Grassley substitute amendment, which is No. 1240. I ask unanimous consent that the Finance Committee be discharged from its consideration and that the amendment be considered agreed to; that the bill, as amended, be considered read a third time and passed; and that the motions to reconsider be considered made and laid upon the table.

The PRESIDING OFFICER. Is there objection?

Mr. DURBIN. Reserving the right to object.

The PRESIDING OFFICER. The Senator from Illinois.

Mr. DURBIN. I do not question the sincerity of my colleague. I know you come to this issue with a sincere heart. I don't question that at all. What I am saying to you is that you and I could spend the rest of this day and the next on this floor debating the issue of abortion, and we are not going to resolve it—not in this Chamber, not in this country.

What I am asking you to do is look beyond the current issues that are coming to the floor this afternoon and try to find some common ground—Republicans and Democrats—on the issue of maternal mortality.

You have to be shocked, as I am, to read these numbers about the babies and mothers who are dying, particularly babies and mothers of color. If we can do something as a nation to show we truly do care about this, even though we have differences on this issue of abortion, wouldn't that be a breakthrough for this Chamber? I think the people across this country would applaud us and say: They finally did something. They finally came to an agreement.

What I propose is the MOMMA's Act, which is a good bill and is one that I think should pass. The Senator has proposed an alternative. Here is an idea. Listen to this radical idea: What if we bring the MOMMA's Act to the floor and agree that we will debate an amendment—any amendment one would want to offer? Do you know what it would be? It would be like the U.S. Senate. It would be the Senate. Think of it. The Senator as a Republican and I as a Democrat would actually be debating an issue that would make a difference in America. We would be putting our best ideas up for a vote on the Senate floor. How about that for a motion?

We are not going to get anywhere with the Senator's proposal this afternoon, because we have passed it before. We know the outcome. We know the final vote. I would say the Senator's alternative proposal, which was once offered by Senator GRASSLEY on the floor when I tried this before, is just inadequate. The resources aren't there to deal with the scope and gravity of the problem.

So why don't we do this? Why don't we act like Senators? Why don't we do something on a bipartisan basis and bring an issue to the floor that truly

counts and that people care about? It would be a breakthrough. It might make a headline. It might even make a tweet somewhere. This is not the way to do it—that it is the Senator's way or my way.

What I would suggest to the Senator, though, is to bring it to the floor and to join me in doing it on a bipartisan basis. Appeal to Senator MCCONNELL to finally let the Senate be the Senate. The Senator knows we have people who come to the Galleries here who look down at these desks and say: You know, I think there used to be Senators who sat at those desks who actually legislated, who actually debated, who actually had amendments. Last year, under Senator MCCONNELL, we had 22 amendments on the floor of the Senate. Why not more than 22?

That is it. We are not talking about anything else. If the Senator truly wants to join me on this floor in a bipartisan debate on this issue of infant and maternal mortality, let's do it. For the time being, I have to object to what the Senator has proposed. Please, I didn't question the Senator's sincerity in bringing up this issue, and I hope he won't question mine in suggesting we ought to be the Senate and debate this issue.

I object.

The PRESIDING OFFICER. Objection is heard.

Is there an objection to the original request?

The Senator from Nebraska.

Mr. SASSE. Madam President, in reserving the right to object and in turning this all the way around, we have an objection to an objection to an objection, but let me just agree to the last point my colleague from Illinois made.

I think it would be great if this Chamber had 80 or 90 or 95 or 100 people in it instead of how it is now. We are at three today, which is a high-water mark. Usually, there are one or two people in here. Senator BARRASSO is here. We have four. We are setting a record.

I don't think a lot of us think that the month we all spent here was ideal. Last month, during the impeachment, there was one thing that was new in that a lot of Senators spent time talking to each other. So, to the Senator's grand point of wishing we were debating, we are aligned.

I do want to say one more thing before I object, which is the Senator said he is not questioning my sincerity. I appreciate that. The Senator asked that I not question his sincerity, and I am not. I am questioning his logic, though, because he summarized it as if there were two issues at play. He said anti-abortion legislation and maternal health funding. Yet there are three issues at play on the floor today.

One of them is LINDSEY GRAHAM's pain-capable bill, which is a pro-life piece of legislation. One of them is Senator DURBIN's funding request about maternal delivery health. Those things are true, but there is a third

thing which, again, he obscured by saying the debate here is that of funding maternal health or of having anti-abortion legislation. The piece of legislation we are voting on today—the Born-Alive Abortion Survivors Protection Act—is not about abortion. I am pro-life, and I am going to support LINDSEY GRAHAM's bill. Yet the bill we are voting on does not change anyone's access to abortion. It doesn't have anything to do with Roe v. Wade. It is about babies who are already born. This morning on TV, those on CNN made up this insane phrase. They said it was a fetus that had been born. What the heck is that? It is another way of saying they don't want to debate the actual debate we are having on the floor today.

We are going to vote once on LINDSEY GRAHAM's pro-life legislation, and I am going to support it. We are also going to vote on a piece of legislation called the Born-Alive Abortion Survivors Protection Act. These are about babies who are born, who are outside their mothers. What is actually happening is that the senior Senator from Illinois is wanting to obscure the debate because he wants to use euphemisms about choice so that we don't have to admit to the American public that what is actually happening on the floor today is probably going to be like it was last year—with 44 Democrats filibustering an anti-infanticide bill.

There is nothing in the bill that is about abortion—nothing. It is about infanticide. That is the actual legislation. We have 44 people over there who want to hide from it and talk in euphemisms about abortion because they don't want to defend the indefensible because they can't defend the indefensible. We are talking about killing babies who are born. That is the actual legislation we are voting on today in the Senate. That is what the Born-Alive Abortion Survivors Protection Act is. Is it OK in the eyes of the U.S. Senate for us to say: "Well, you can't actively kill the little baby. You can't take a pillow and put it over her face and smother her to death, but you can back away and kill her that way"?

That is what Ralph Northam—the disgraced Governor of Virginia—was talking about when he said: Well, once the baby is born, if she survives an abortion—and we wish that it would not happen—then we will figure out a way to keep her calm for a little while, while the doctors debate what they want to do. What he means is, kill the baby, and that is the legislation we are voting on today.

There are three buckets. LINDSEY GRAHAM's Pain-Capable Unborn Child Protection Act is a bill about abortion. There is another bill that is about babies who have already been born.

News flash, CNN: If you are a baby and if you have been born and if you are outside of Mama, nobody calls that a fetus. You just want to call it a fetus because you don't want to cover the actual story that is being voted on in the Senate today.

Then there is a third piece of legislation, which is Senator DURBIN's counterproposal about maternal preventable deaths and investments in that category. I am interested in that category as well, but the Senator from Illinois doesn't actually want to talk about the legislation that is on the floor, so he is changing the subject.

Therefore, I object.

The PRESIDING OFFICER. Objection is heard.

The Senator from Illinois.

Mr. DURBIN. Madam President, infanticide should be a crime, and it is. That is what the Senator from Nebraska will not concede. He thinks he has come up with a novel idea—that you shouldn't be able to kill a baby with impunity in America. It is not novel. It has been in Federal law for over a decade, and it is in State laws all across the United States. If one has any doubt about it, be prepared to write down a name—the name of Kermit Gosnell. Thirteen years ago, I believe it was, this physician was convicted of infanticide. He is now serving life without parole, plus 30 years. To argue that the Senator has some novel idea that infanticide should be a crime and that we don't cover it now under the law is just not accurate, and it is not factual. That is why I think the Senator's bill is unnecessary.

This bill is necessary. Mothers are dying and babies are dying, and we can do something about it. It doesn't matter whether one goes to a pro-life or to a pro-choice rally; we all agree that this is something we can do on a bipartisan basis.

The PRESIDING OFFICER. The Senator from Nebraska.

Mr. SASSE. Madam President, just for the record and just so we all have it clear, the Senator talks about infanticide, and he is right. Active infanticide is illegal under Federal law as there are no crimes for it in half of the States.

More fundamentally, what the Senate is considering today is passive infanticide. Whether they are born in glistening NICUs at fancy hospitals, with a lot of rich cars in the parking lots, or whether the babies are born in the unfortunate circumstances of abortion clinics in strip malls, whether they are 1 day old or 5 days old, it turns out that they die if you wander away from them and deny them care. If you don't give them warmth and if you don't give them food, they die. Passive killing, passive infanticide, is not illegal under Federal law.

The Senator said infanticide is illegal, and he is half right. Active infanticide is illegal under Federal law. You cannot take a pillow and smother a newborn baby to death. What you can do and what does happen in abortion clinics across America—and it is why we held a Judiciary Committee hearing on this 2 weeks ago so as to hear from medical and legal community experts who know what the practice looks like—is the taking of that vulnerable,

innocent, little, tiny fetus, putting her on a cart, walking her down the hall, putting that cart in a closet, and leaving her to die by exposure. That is what we should prevent, and that is what this legislation is about.

I thank the Presiding Officer.

The PRESIDING OFFICER. The Senator from Wyoming.

Mr. BARRASSO. Madam President, I come to the floor to support the two pro-life bills being considered this week and to stand with my friend and colleague from Nebraska in his efforts to promote the legislation that is before us, for both of these bills promote respect for innocent human life.

Senator LINDSEY GRAHAM's Pain-Capable Unborn Child Protection Act would ban nearly all abortions at 20 weeks of pregnancy. As a doctor, I know that it is medically proven that babies do feel pain at 20 weeks. Americans overwhelmingly oppose these third-trimester abortions. Yet the United States remains one of only seven countries in the world to allow abortions after 5 months. This group includes China, and it includes North Korea. We need to do much better. The Graham bill puts us on higher ground with the rest of the world. It says, at 5 months, which is 20 weeks, abortion on demand must stop. It includes exceptions for rape, for incest, and for the life of the mother. I strongly support this effort by Senator GRAHAM, and I applaud him for his tremendous work on this issue.

I also stand here on the floor to say I strongly support what Senator SASSE has been saying about his specific bill, the Born-Alive Abortion Survivors Protection Act. Senator SASSE is another champion on life issues. The Sasse bill affirms that infanticide is illegal. It upholds the right of all U.S.-born babies to full medical care. Every baby born in this country deserves every chance to live. All doctors must do everything in their power to save babies who survive abortions.

Both the Graham and the Sasse bills fully protect mothers from either prosecution or penalty. Both measures demonstrate character, and they demonstrate courage. These are bills that care for our children, and they do what is medically right.

Thanks to all of those who work to protect innocent human life, we are here on the floor, debating, promoting, and asking for a vote to pass this legislation. I urge all Senators to support these life-affirming bills.

I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The senior assistant bill clerk proceeded to call the roll.

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

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

Mrs. LOEFFLER. Madam President, at the heart of this debate is life. When

I reflect on the importance of protecting innocent life, the story of Ellie Schneider comes to mind. She is a child who was born at just 21 weeks 6 days in Kansas City. Ellie is one of the youngest babies to survive, in the United States, a premature birth. She was born so early that most hospitals in Missouri would not treat her, except for the faith-based hospital St. Luke's.

She weighed only slightly more than a can of soda and was about as long as a piece of paper. She weighed just 14 ounces. At 21 weeks, the odds were stacked against her, but she is a fighter. Through the power of prayer and an incredible medical team, Ellie is now a healthy, happy 2-year-old girl. She brings endless joy to her family.

Her inclusion in the President's State of the Union Address is a powerful testament to life. Ellie is an example that every child is a blessing worthy of protection, and we have a moral obligation to defend the born and unborn.

In today's political climate, it is easy to forget that there are both Democrats and Republicans, liberals and conservatives, and people from every religious affiliation who believe in protecting the human rights of the unborn. I am proud to be a cosponsor S. 311, the Born-Alive Survivors Protection Act. It sends a clear message by establishing the real consequences for those who kill or abandon innocent children after they are outside the mother's womb. We should all be able to agree that once born, each baby deserves the right to proper access to medical care.

I also proudly support S. 3275, the Pain-Capable Unborn Protection Act, which places much needed restrictions on elective abortions on children at 20 weeks post-conception. It is unconscionable that America is one of only seven countries that does not have a 20-week abortion ban. These countries include China, North Korea, and Vietnam.

While it is disheartening that this type of horrific practice needs congressional action, I am glad there are commonsense pieces of legislation that can address the atrocities of late-term abortion and severely punishes those in the business of taking the lives of our youngest human beings.

I pray that the American people will recognize that lives hang in the balance, will stand with us to get our Nation back on the right track, and will fight for the born and the unborn. Being a voice for the voiceless requires us to take important steps, like passing the Born-Alive Abortion Survivors Protection Act and the Pain-Capable Unborn Protection Act.

I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The senior assistant bill clerk proceeded to call the roll.

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

The PRESIDING OFFICER (Mrs. CAPITO). Without objection, it is so ordered.

Ms. CORTEZ MASTO. Madam President, I rise today to oppose my colleagues' legislation that would limit women's healthcare choices. These bills that are being introduced are part of a wave of efforts to turn back the clock on women's healthcare.

In my home State of Nevada, with the only majority-women legislature in the Nation, we are moving in the opposite direction. We have been fighting to protect a woman's right to choose for decades. I am inspired by women like Sue Wagner, the first woman elected as Nevada's Lieutenant Governor, whose grit and leadership sparked a movement in the 1990s to enshrine women's reproductive freedom in the State's constitution.

Just this year, with women at the helm of the Nevada legislature, the Trust Nevada Women Act was signed into law to remove undue burdens on reproductive rights. Nevadans understand that reproductive rights are part and parcel not just of women's health but of their economic security. When women can't control whether and when they have children, they are more likely to struggle financially. Eighty-three percent of Nevadans are pro-choice, and I stand with them.

I am going to continue to fight for what the American people want: comprehensive healthcare and reproductive justice. Bills to protect women's health are what we should be voting on, like the bipartisan legislation to cover pre-existing conditions, to reduce prescription drug prices, to prevent violence against women, and many more that are languishing, unfortunately, on Leader MCCONNELL's desk. That includes pushing for meaningful legislation to protect mothers and babies at a critical time in their lives, like the Healthy MOM Act to expand healthcare coverage for pregnant and postpartum women.

Leader MCCONNELL is more focused on passing an extreme political agenda than on protecting women's health in Nevada and across this country. You know, we really have to stop the assault on women's right to choose and their reproductive healthcare. The rights of American women to make their own health decisions should not be up for debate. These are our fundamental rights, and they are worth fighting for and protecting.

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

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

Mr. SASSE. Madam President, this afternoon, we are going to vote on the simplest bill in the history of the U.S.

Senate. It is the simplest bill we have ever considered here. It says that if a newborn baby survives an abortion, she deserves medical care. That is the bill. That is it.

Sadly, a lot of Senators are going to come to the floor, and they are going to read or they are planning to read—I hope they will reconsider—but they are planning to read talking points that were written for them by Planned Parenthood, and they are going to talk about a whole bunch of stuff that doesn't have anything to do with the bill we actually have before us.

Senators are going to muddy the issue, and, sadly, too many in the press are going to report with headlines like "Abortion Restrictions" and with anti-science jargon like "A Fetus That Was Born." That was an actual portion of the headline this morning: "A Fetus That Was Born."

Sadly, a lot of folks seem determined to look the other way. Looking the other way from the issue that we are considering today in this body shouldn't be an option, so let's start with four straight, undeniable facts—four simple facts.

First, Federal law does not criminalize the denial of care to newborn babies who survive abortions. Federal law doesn't criminalize the denial of care to babies who survive abortions.

Second, we know that babies sometimes survive abortions, and the data backs that up. If Senators don't like this inconvenient fact, they can take it up with the CDC and the States that have mandatory reporting about babies who survive abortions.

Third, this bill, the Born-Alive Abortion Survivors Protection Act, simply says that if a baby survives an abortion, she should get the same degree of medical care that any other baby would get at that same gestational stage. It is really important—same care that would be provided to any other baby at the same gestational stage.

It is a short bill. I know my colleagues are busy, but all of them could read the bill. So instead of coming to the floor and reciting prepackaged talking points that Planned Parenthood wrote for you, take a few minutes and actually read the bill, and you will find that the talking points don't actually match up with the actual bill you are called on to vote on today. Those are the facts.

Finally, this is not about abortion. My colleague, the senior Senator from South Carolina, the chairman of the Judiciary Committee, has a really important piece of legislation that he is going to speak on in a moment, and I am going to support his legislation. It is a really important pro-life piece of legislation. I am in favor of it.

But my legislation, the Born-Alive Abortion Survivors Protection Act, is not actually about abortion. It is about babies who have already survived a botched abortion. My legislation is not about *Roe v. Wade*. It is about what

happens after a baby is already born when an abortion failed to accomplish the purpose it had—the sad purpose, in my view—the purpose it had to terminate that pregnancy. This is about the babies who have already been born. This is about whether that baby who has survived the abortion and is now lying on the abortion table or on the medical table—whether or not that cold, naked baby alone has a right to medical care.

We all know the answer. The answer is, of course she does. Every baby dies if you leave her to passively die of exposure. Whether she was born in a gold-plated hospital with a lot of fancy, expensive cars in the parking lot outside that NICU unit or whether she was born in the unfortunate circumstances of an abortion clinic in a strip mall, every little baby who has already been born—they will die if you deny care to them. So, of course, we shouldn't do that. Of course, the U.S. Senate should stand up and defend those babies.

We all know that denying care to the most vulnerable among us is barbaric, and this body ought to be able to stand 100 to 0 against that barbarism. It is inhumane, and it is passive infanticide, and the Senate should today condemn and prohibit that practice. Is that practice what my colleagues really want to defend? I can't believe they do.

The 44 who filibustered this legislation a year ago this week, when you talk to them one to one, they get really uncomfortable, and they try to change the subject to all sorts of other culture war debates because they don't want to have a conversation about the actual legislation and the actual babies we are considering today. Why? Because they are scared to death of Planned Parenthood's army of lobbyists, that is why. It is not because any of them really want to defend the morally reprehensible and the morally indefensible practice that is passive infanticide. None of them want to defend it. They are just scared.

Last year, 44 Senators filibustered this legislation. They said that it was OK to look the other way while newborns were discarded. They said that Federal law should not ensure that these babies are treated with care. They seem to have a hard time saying that human beings outside the womb have the same right to life as you and I ought to have and that we get care; we need care. They need care, and they should get care.

Put down your talking points. Please read the bill before you vote today. Read the expert testimony that the chairman of the Judiciary Committee allowed us to hold in his committee room 2 weeks ago, where we brought in both medical and legal experts to talk about what happens in these abortion clinics.

For those in this body who are not on the Judiciary Committee or who didn't do the preparation for today's vote, I want to summarize the testimony of one of the people who came before our

Judiciary Committee—Jill Stanek, who now works for the Susan B. Anthony List. She was at an Illinois hospital in the 1990s and early 2000s. Here is a quote from her:

Of 16 babies Christ Hospital aborted during the calendar year 2000, four that I knew of [were born alive, and they] were aborted alive.

That is 25 percent—4 out of the 16 abortions at that hospital.

She continues:

Each of those babies—[there were] two boys and two girls—lived [somewhere] between 1½ and 3 hours. One baby was 28 weeks' gestation [age]—7 months old—and weighed two pounds, seven ounces.

Numbers from the CDC and the States that report data on abortion survivors—that is about 8 of the 50 States that do some reporting and data collection on this—tell a story of babies who were breathing, whose hearts were beating, who stretched their arms, wiggled their fingers, and kicked their legs. This is the actual data. You want to talk about being pro-science—being pro-science is pro-baby.

What happened to the babies? Medical practitioners have testified before Congress about walking into rooms where living babies were lying naked and alone on countertops, where they would be left to expire by themselves—alone, cold, naked, and denied care.

Opponents of this bill don't want to deal with the facts. They prefer to stick to talking points and claim that this never happens. If they will not listen to the medical experts, perhaps they will take the word of the Governor of Virginia, Ralph Northam.

In January of last year, disgraced Governor Northam was explicit during a radio interview in which he said that a baby born alive during an abortion "would be kept comfortable. . . . then a discussion would ensue" about whether that baby should be left to die. That is actually what Governor Northam was talking about on the radio in Virginia.

What he did is make the terrible faux pas of saying in public the true stuff about this procedure and this practice of walking away and backing away from these babies and letting them die. He just decided to talk in public about the reality of what happens in some of these abortion clinics.

Governor Northam is not an outlier. Just 3 weeks ago, one of the Democratic candidates for President was asked point blank on national television about infanticide: Would he be comfortable if a mother invoked infanticide to kill her now already born-alive child? Mayor Buttigieg's response: "I don't know what I'd tell them."

Really? Somebody asks you if you can kill a baby who has already been born, and you say you don't know what to say?

Every one of us, especially somebody running for the highest office in the land to uphold the laws—laws that promise to protect the right to life—

should be able to say without any hesitation that leaving babies to die is unacceptable.

This isn't horrid stuff, people. There are actually some horrid debates we have in this Chamber. This isn't one of them. This is about babies who have been born alive and whether you can decide to kill them. There is really no debate to be had here, which is why so many people who were planning to speak on the other side decided not to speak this afternoon, because you can't defend the morally reprehensible procedure that is backing away, that is passive infanticide.

There are no exceptions. There are no special circumstances. We should protect every human being, no matter how small they are, no matter how weak they are. And if the Senate says that it is OK to ignore born-alive babies, what we are really saying is that we are OK with a society where some people count more than other people. We would be saying that we want a society where some people can be pushed aside if other people decide those folks are inconvenient, a society where we can dispose of you if you happen to come into the world a certain way.

It is unbelievably telling that Planned Parenthood, NARAL, which is the extremist abortion lobby and their armies of lawyers and slick public relations teams and influence peddlers, cannot draw this line. It is pretty amazing.

This bill is not about abortion. Again, I want to be clear. We are voting on two things today. One of them is a piece of legislation about abortion. It is the pain-capable bill. LINDSEY GRAHAM, the chairman of the Judiciary Committee, is going to speak in favor of it in a minute. I am an original co-sponsor of his legislation. I support it, and I am going to wholeheartedly vote for it.

But the other piece of legislation we are going to vote on today isn't actually even about abortion. This should be 100-to-0 no-brainer. This bill is not about *Roe v. Wade*. This bill will not change one word of abortion law in the United States. My colleagues can vote up or down, but they can't pretend that they don't know the stakes of what we are talking about.

America is a country built on the beautiful principle of equality, and the terms of the Born-Alive Abortion Survivors Protection Act are intended to reflect that. A child born alive during a botched abortion should be given the same level of care that would be provided to any other baby born at that same gestational stage, which is just to say that a born-alive baby is a human being with fundamental human dignity, which is undeniable. They should receive the care and affection due to every other human being.

Today, we have a chance to advance our commitment to human dignity. We can protect those babies who come into the world under the worst of conditions. We can welcome them into a

world with love and hope and help and care.

My colleagues, please do not turn your backs on those babies.

I yield the floor.

Mr. INHOFE. Madam President, today, we will be voting on two very important bills: the Pain-Capable Unborn Child Protection Act and the Born-Alive Abortion Survivors Protection Act. I would like to thank my colleagues Senator GRAHAM and Senator SASSE for their leadership on these bills, and I would like to thank Senator MCCONNELL, for his efforts to bring these bills to the floor for a vote.

First, I want to talk about Senator Sasse's Born-Alive Abortion Survivors Protection Act, a bill which I have co-sponsored that would ensure that a baby who survives an abortion will receive the same treatment as any child naturally born at the same age, without prescribing any particular form of treatment.

That is just morally right, and I don't see why there would be any disagreement about it. This bill is not even about abortion; it is about infanticide.

Twenty-eight years ago, I came down here to tell the story of Ana Rosa Rodriguez. Here is what I said:

Mr. Chairman, there is a big misconception regarding abortion and the issue of women and their right to protect their bodies. It is not that right that I object to, but the right that is given them to kill an unborn fetus—an unborn child.

I want to share with you a story that my colleague, Chris Smith told some time ago on this very floor. Ana Rosa Rodriguez is an abortion survivor. At birth she was a healthy 3 pound baby girl except for her injury—she was missing an arm.

Ana survived a botched abortion. Her mother attempted to get an abortion in her 32nd week of pregnancy when she was perfectly healthy—8 weeks past what New York State law legally allows. In the unsuccessful abortion attempt the baby's right arm was ripped off, however they failed to kill Ana Rosa. She lived.

Pro-life supporters agreed that nightmare situations like the Rodriguez case are probably not common, but abortion related deaths and serious injuries occur more frequently than most people are aware.

It is amazing that we can pay so much attention to issues such as human rights abroad and can allow the violent destruction of over 26 million children here at home. We are fortunate that Ana was not one of those children—she survived.

That was in 1992. But today, we still don't have explicit Federal protections for the babies who survive the brutal abortion process. As I said, this issue is not about abortion but about caring for a baby outside the womb.

The need for these protections has become even clearer as we see States like New York and Illinois allow abortion for virtually any reason up until the point of birth and support infanticide by removing protections for infants born alive after a failed abortion.

Just a few years after that speech, in 1997, I was on the floor with my good friend former Senator Rick Santorum to try to pass the partial-birth abortion ban and end the horrific practice

of late-term abortions. Fortunately, we won the battle against partial-birth abortions and finally ended that practice in 2003. That ban was upheld by the Supreme Court in 2007.

But we have yet to pass legislation banning late term abortion.

Only seven countries allow abortion after 20 weeks, including the United States and North Korea. That is horrific. The U.S. is supposed to be an example in regards to global human rights; yet we are on par with North Korea when it comes to protecting the unborn.

Senator GRAHAM's Pain Capable Unborn Child Protection Act would help roll back this horrific practice by prohibiting abortion after 20 weeks post-fertilization, when we know babies can feel pain.

This is another commonsense bill that should not divide us along partisan lines; a baby is a baby whether in or outside of the womb, and each baby deserves a chance to live as an individual created in the image of God.

There still much more we need to do to end the abortion on demand culture, but thankfully, we have the most pro-life President in history.

This January, President Trump became the first sitting President to attend the annual March for Life rally in Washington. Hundreds of pro-life Oklahomans joined the President and tens of thousands of Americans to march. I had the chance to meet many of these Oklahomans, many of them extremely young—as young as high school. They asked me how to respond when the radical left attacks their views. I told them to be kind, but not to be afraid to voice their opinions—after all, they are right.

Under President Trump's leadership, we have protected the Hyde amendment, reinstated and expanded the Mexico City policy, and stripped abortion providers like Planned Parenthood from using title X funding for abortions.

The need to stand up for our babies is as important today as it was in 1992 and 1997. I am looking forward to building on our successes under President Trump to end the practice of abortion on demand and to ensure that we protect babies who survive abortions.

We will overcome evil with good by upholding and affirming the dignity and inherent worth of every human being. We will keep fighting.

Mr. MARKEY. Madam President, I rise in opposition to S. 3275, the Pain-Capable Unborn Child Protection Act, and S. 311, the Born-Alive Abortion Protection Act. These two dangerous bills infringe on the doctor-patient relationship and hinder women's constitutionally protected right to choose. Make no mistake, these bills are nothing more than a reminder that Republican discrimination toward women knows no boundaries. President Trump, his administration, and Senate Republicans think reproductive freedom is still up for discussion. It is not.

I am here to set the record straight for Leader MITCH MCCONNELL and my Republican colleagues. Women's reproductive health decisions should be left to women and their healthcare providers. That is it.

This time last year, the Born-Alive Abortion Protection Act failed to advance on the Senate floor. I was proud to vote against this bill then, and I hope more of my colleagues will join me in voting no on this bill now. Doing so will safeguard the right for an individual to make their own health choices, without interference from the Federal Government.

The Senate floor is not the only battleground for reproductive rights. Anti-Choice State legislators are continuing to assault reproductive freedom through the enactment of State laws restricting choice. Cases challenging these laws are working their way through the judicial system, including to the U.S. Supreme Court. There, the laws' supporters hope that the conservative justices will not only uphold these damaging laws but will go further and overturn *Roe v. Wade*, effectively ending this bedrock decision that ensures equality, privacy, and reproductive freedom.

Women across the Nation are facing imminent threats to their constitutional rights, to their personal liberty, and to economic freedom. Now more than ever, we must do everything in our power to raise our voices against this extreme, rightwing agenda of discrimination. This is more than a debate about access to safe abortion services. This is about fighting for gender equality. This is about continuing to ensure access to the opportunity that comes from quality, affordable healthcare. And this is about making sure that access to reproductive healthcare is never restricted.

Women's rights are not negotiable. Republicans may intend to continue advancing their radical anti-choice agenda, but I will never back away from the fight against it.

The PRESIDING OFFICER. The Senator from South Carolina.

Mr. GRAHAM. Madam President, before Senator SASSE leaves, I say to the Senator, I just can't thank you enough for the passion and the persuasion you bring to these issues. You speak from the heart. You speak with reason. You make a lot of sense, and over time, you will prevail. Just stick with it. Your day will come.

What he is saying is, if you try to abort a child, and the child survives the abortion, shouldn't the doctor and the nurses and everybody involved treat the child the same as if they came into the world some other way? I think the answer is yes.

Really, these two pieces of legislation are about us as a nation. This is 2020. Who are we as Americans? To me it is odd that we even need to have a discussion about this. I am just perplexed that this is even a problem.

Abortion is legal in the United States. There are certain restrictions

on it, but I just can't believe we can't rally around the idea that if a baby survives the procedure and is alive and breathing and functioning, medical science doesn't kick in to save the baby. It is just—I don't know. I don't know what happened. What happened to our country that we are even talking about this? It is 2020, for God's sake. It is not 1020.

Anyway, just hang in there, Ben. Your day will come.

My legislation—I have been doing this for a few years now. We are one of seven nations in the world that allow abortion on demand at 20 weeks, along with North Korea, Vietnam, China, Singapore, the Netherlands, and Canada. What would this legislation do at 20 weeks? This is about the fifth month in the birthing process.

The bill is called the Pain-Capable Unborn Child Protection Act. Why do we call it that? Medical science has determined that a child at 20 weeks is capable of feeling excruciating pain. So if there is an operation to save a child's life or to repair a medical defect at 20 weeks, they provide anesthesia to the child because, during the surgery, the child feels pain. You can see that when a child is poked, they actually repel against the poking.

The bottom line is, I find it odd that medical science requires anesthesia to save the baby's life, but during that same period, you can dismember the child. That is what we are talking about here.

What kind of Nation are we if, at the fifth month—this is 20 weeks into the birthing process—we are one of seven nations that allow abortion on demand? There are exceptions for the life of the mother—that hard decision if the mother's life is impacted by the child, and we will leave that up to the family—and if the pregnancy is as a result of rape or incest. But beyond that, we want to eliminate abortion on demand at the 20-week period because, I would argue, that doesn't make us a better nation. It doesn't advance anybody's cause.

The bottom line is, based on medical science, we know that this child has nerve endings intact. Medical encyclopedias encourage young parents to sing to their unborn child during this period of development because they can begin to associate their voice and recognize who they are. I find it odd that we would encourage young parents to sing to their unborn child at 20 weeks; we require anesthesia to save the child's life; but we are also a country that allows the child to be dismembered. It makes no sense to me. They have exceptions that make sense: life of the mother, the result of rape or incest where there is no choice at all.

The bottom line is that these two pieces of legislation are going to continue to be advanced until they pass. It takes a while for America to kind of get focused on what we are saying here because abortion is an uncomfortable topic to talk about, particularly in the

early stages of the pregnancy. But what Senator SASSE is saying is that in the case of the child surviving an abortion, there is really not much to talk about. We should protect the life that is now a being. The baby survived. I don't know why the baby survived. I don't know how the baby survived. I just know that decent people would want to come to the child's aid once she does survive.

Just imagine what it must be like, after the baby survives the abortion, to be left unattended for 1½ to 3 hours. That says a lot about us as a nation. I just think we are better than that.

It is kind of odd that we even have to have this debate, but apparently we do because this happens more than you would ever think. Babies actually survive abortion, and the rules in this country are that you just let it die. There is no longer required care. That, to me, as Senator SASSE said, is barbaric. It doesn't make us a better people, and it really doesn't affect the abortion debate because the baby survived.

My legislation is about us as a nation too. How does abortion on demand in the fifth month advance the cause of America? I don't think it does.

We have exceptions in those instances where it is a tragic choice between the life of the mother and the unborn child and in the cases of rape or incest, which are tragic and criminal, but generally speaking, we would like to get ourselves out of a club of seven nations that allow abortion on demand at a time when the parents are encouraged to sing to the child and you have to provide anesthesia to save the child's life because you would not want to operate on a baby in a fashion to hurt the child.

I dare say that if you are a doctor and you try to save the baby's life at 20 weeks through surgery and you don't provide anesthesia, you are going to wind up getting yourself in trouble. I find it odd that the law would allow the dismemberment of the child even with anesthesia, but that is where we are.

To Senator SASSE, I say that you are an articulate spokesman for your legislation. One day, we will prevail. It took 15 years to pass the late-term abortion ban. It is going to take a while, but our day will come.

At the end of the day, the sooner America can get this right, the better off we will be.

With that, I yield the floor.

#### 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 bill 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 motion to proceed to Calendar No. 420, S. 3275, an act to amend title 18, United States Code,

to protect pain-capable unborn children, and for other purposes.

Mitch McConnell, Tim Scott, Joni Ernst, Roy Blunt, Tom Cotton, Kevin Cramer, Cindy Hyde-Smith, Chuck Grassley, Marsha Blackburn, Richard Burr, Mike Rounds, Mike Lee, John Hoeven, Shelley Moore Capito, Mike Braun, Steve Daines, Lindsey Graham.

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 motion to proceed to S. 3275, a bill to amend title 18, United States Code, to protect pain-capable unborn children, and for other purposes, 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 or change their vote?

The yeas and nays resulted—yeas 53, nays 44, as follows:

[Rollcall Vote No. 57 Leg.]

#### YEAS—53

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

#### NAYS—44

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

#### NOT VOTING—3

Klobuchar Sanders Warren

The PRESIDING OFFICER. On this vote, the yeas are 53, the nays are 44.

Three-fifths of the Senators duly chosen and sworn not having voted in the affirmative, the motion is not agreed to.

The Senator from Florida.

Mr. SCOTT of Florida. Madam President, I ask unanimous consent the remaining votes in this series be 10 minutes in length.

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

#### 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 bill 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 motion to proceed to Calendar No. 17, S. 311, an act to amend title 18, United States Code, to prohibit a health care practitioner from failing to exercise the proper degree of care in the case of a child who survives an abortion or attempted abortion.

Ben Sasse, John Boozman, Cindy Hyde-Smith, David Perdue, Tim Scott, Joni Ernst, Lindsey Graham, John Cornyn, James Lankford, Mike Rounds, John Hoeven, Mike Crapo, Thom Tillis, Roger F. Wicker, John Thune, Mike Braun, 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 the motion to proceed to S. 311, a bill to amend title 18, United States Code, to prohibit a health care practitioner from failing to exercise the proper degree of care in the case of a child who survives an abortion or attempted abortion, shall be brought to a close?

The yeas and nays are mandatory under the rule.

The clerk will call the roll.

The senior assistant 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 (Mr. CASSIDY). Are there any other Senators in the Chamber desiring to vote?

The yeas and nays resulted—yeas 56, nays 41, as follows:

[Rollcall Vote No. 58 Leg.]

#### YEAS—56

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

#### NAYS—41

Baldwin	Cortez Masto	Kaine
Bennet	Duckworth	King
Blumenthal	Durbin	Leahy
Booker	Feinstein	Markey
Brown	Gillibrand	Menendez
Cantwell	Harris	Merkley
Cardin	Hassan	Murphy
Carper	Heinrich	Murray
Coons	Hirono	Peters