move to bring to a close debate on the nomination of William Francis Hagerty IV, of Tennessee, to be Ambassador Extraordinary and Plenipotentiary of the United States of America to Japan.


The PRESIDING OFFICER (Mr. Tillis). By unanimous consent, the mandatory quorum call has been waived.

The question is, Is it the sense of the Senate that debate on the nomination of William Francis Hagerty IV of Tennessee, to be Ambassador Extraordinary and Plenipotentiary of the United States of America to Japan, shall be brought to a close?

The yeas and nays are mandatory under the rule.

The clerk will call the roll.

The assistant bill clerk called the roll.

The yeas and nays resulted—yeas 89, nays 11, as follows:

[Rollcall Vote No. 159 Ex.]

YEAS—89

Alexander
Baldwin
Barrasso
Benning
Blumenthal
Blunt
Boozman
Brown
Burr
Cassidy
Cervantes
Corker
Coons
Collins
Cortez Masto
Cowan
Cory
Corker
Cormyn
Cortez Masto
Cotchin
Crow
Crapo
Daines
Donnelly
Duckworth
Durbin
Enzi
Ernst

The PRESIDING OFFICER. The motion is agreed to.

EXECUTIVE CALENDAR

The PRESIDING OFFICER. The clerk will report the nomination.

The bill clerk read the nomination of William Francis Hagerty IV, of Tennessee, to be Ambassador Extraordinary and Plenipotentiary of the United States of America to Japan.

The PRESIDING OFFICER. The Senator from Wisconsin.

HEALTHCARE LEGISLATION

Mr. BARRASSO. Mr. President, I come to the floor today to talk about what I saw happen over the Fourth of July in Wyoming while visiting with people, visiting with patients, doctors, and nurses. What I am seeing is that the pain of ObamaCare continues to worsen. The healthcare crisis we are seeing across this country continues to worsen. The choices are disappearing and the American people are desperate for Congress to step in and do something to help rescue them from the rising costs and collapsing choices of the Obama healthcare law.

It is interesting. When the Democrats passed ObamaCare, the Democratic leader at the time, Harry Reid, said that we would all get an “earful of wonderment and happiness.” Those were his words about how great the law was. Well, every weekend at home in Wyoming and I am sure in the Presiding Officer’s State of North Carolina, we get an earful, too, and it is not about wonderment and happiness over ObamaCare. We hear from patients, doctors, and nurses at home is that ObamaCare is hurting them, hurting our communities, hurting our State. I hear about the rise in premiums. I hear about the declining number of options, the collapse of choices we have. There is only one choice in Wyoming. We used to have two. Both lost money in spite of very high premiums. What we saw is that one ended up going out of business, and the one we have in business—the only one we have—is still losing money.

We are fortunate because we have at least one provider providing coverage. There are now 40 counties across America where no one will be selling ObamaCare insurance next year—no one, not a single company will be selling ObamaCare insurance.

In Nevada, where prior Senator Harry Reid is from, only three counties are going to have anyone selling on the ObamaCare marketplaces. Only three of the counties in the entire State, the State that Harry Reid represented in the Senate for many years. People living everywhere else in his home State will have I think one choice, maybe more, but in terms of these counties, no one is selling ObamaCare insurance at all. The State health insurance exchange put out a statement in his home State that said that the people living in the rest of the State face what they described as a healthcare crisis.

Democrats predicted wonderment and happiness about ObamaCare, but there is a healthcare crisis all across the country. People in that State are going to have no access to the insurance plans the Democrats promised them under ObamaCare. A lot of Americans are not much better off or in better shape right now.

There was a headline in the Independence Day edition of USA TODAY that said “1,370-plus counties have only one ACA insurer.” The article was about a study that was done by the Robert Wood Johnson Foundation. They found that people living in 1,300 counties have no choice when it comes to the ObamaCare plan; there is just one company offering the mandated coverage. Washington says you have to buy it; not many people want to sell it. Washington doesn’t seem to care.

Democrats don’t seem to care about the fact that what they promised was a marketplace and what we have ended up with is a monopoly. Remember when Democrats promised there would be more competition? Essentially there is none. When there is none, we end up with states competing generally with higher prices, which is what people across the country are seeing.

Prices have essentially doubled in ObamaCare marketplaces over the last 4 years. That is why a lot of people are finding out that while they may still have access to coverage, it is so expensive, they can’t afford to buy it—because they are down to one choice.

Health insurance companies keep releasing information about how much they expect to lose next year, which continues to be a problem. I have seen the headlines. “Another ObamaCare Rate Shock.”

Look at what is happening in Tennessee. Earlier this year, Asta and Hugh both said they were dropping out of ObamaCare exchanges completely. Cigna is one of the last big companies that are still willing to sell these plans. Well, they say they are going to have to raise premiums by 42 percent next year.

Look at what is happening in Georgia, just across the border from Tennessee. Blue Cross Blue Shield is asking for an average rate hike of 41 percent in Georgia. The Atlanta Journal-Constitution had an article about it just last week. They said Blue Cross might charge as much as 75 percent more for one plan next year. That is ObamaCare.

Remember President Obama saying that if you like your plan, you can keep your plan? Those plans are gone.

Remember President Obama saying that rates would drop by $2,500 a year for people? That is not what we saw. What we are seeing is what is continuing today.

The Atlanta Journal-Constitution is saying that Blue Cross Blue Shield may charge as much as 75 percent more next year. They quoted one man as saying: “That’s a breath taker.” Another woman quoted in the article responded to these price increases by saying simply “Yikes!” That is what people are facing all across the country.

I remember President Obama, leaving office, forcefully defending it and being proud. There is very little to be proud of here. People all across America are having the exact same reaction as they see how much their own insurance companies are raising their rates all across the country. That is not the wonderment and happiness the Democrats said we would be hearing about when this was passed. The high prices are a big...
reason so many people are dropping their insurance coverage. They can’t afford it. The people most likely to drop out, we find out, are, of course, the young people.

Gallup came out with the results of a recent survey on Monday, just 2 days ago, with big headlines all across the country. What they found is that 2 million fewer Americans, under ObamaCare, have insurance today than they did last year, just 6 months ago. There have been 2 million fewer over the last 6 months.

So, in just 6 months, 2 million people have gone off insurance. Most of them are young, and according to the survey by Gallup, they basically say they dropped it because it was just too expensive. They do not feel that they are getting value for their money. These 2 million people are not talking about the wonderment and happiness of ObamaCare. They are just leaving it behind.

Democrats said people would love ObamaCare. They said ObamaCare would bring down prices. It has not. They said insurance premiums would increase competition, but they did not get that one right either. None of this is happening. Now the Democrats are starting to say that having Washington-mandated health insurance is not enough. They say we need health insurance to be run entirely by Washington. Apparently, they did not learn the lesson that said that the Washington-mandated insurance—having to buy a Washington product—would be good enough. Now they say that that is not good enough. They are saying that we need Washington in charge of all of it.

They call it single-payer healthcare, but let’s talk about what it is. It is government-controlled healthcare—government-mandated, government-controlled, government-run, one-size-fits-all healthcare. It is a single payer, with the American taxpayers paying the bill.

We see what happened in California when its legislature passed a similar thing in the State senate. They asked: What is the cost? $400 billion. What is the budget of the entire State of California? $190 billion. So what they proposed in the State senate has passed in the State of California and costs twice what the entire budget is in the State of California. To give what the people of California have been promised by the State senate, they are going to have to increase the budget in California by almost $200 billion and then you will get the rationing of care and the lines and the waiting time. It is what happens around the world with government-mandated, government-run insurance. We see that in Canada, and we heard in England.

I was practicing medicine prior to coming here to the Senate. I was an orthopedic surgeon in Wyoming. I knew we needed to do healthcare reform, but ObamaCare was the very wrong reform. Democrats were wrong then, and all of the talk about government-run healthcare is wrong today—wrong today for the people of this country.

Look, we understand that we need a better solution than ObamaCare. That is what I hear about every weekend in Wyoming. We need to put patients in charge, not the government. With the Democrats and the speeches they are giving and the bills that have been co-sponsored by a majority of the Democrats, they want to put the government solely in charge of healthcare in this country.

We need to have people at home making their own decisions, and not have Washington, DC, imposing its one-size-fits-all approach. We need to give people options, not mandates. People deserve choices. That is what the American people want. That is what Democrats promised years ago, but they never delivered. That is what Republicans are committed to giving the American people today—doing it now so that patients can get the healthcare they need from doctors whom they choose and at lower costs. We have taken the decisions, not Washington. That is where we are today as we continue to debate and discuss healthcare in this country at this time.

Just coming back from Wyoming, I visited my own district—many former patients, a number of doctors whom I had worked with over the years, and nurses. I was at several hospitals. I just heard, unilaterally, across the State of Wyoming that ObamaCare continues to be a burden to the State. They want freedom, They want choice. They want flexibility. They want to make decisions for themselves, not have Washington dictate to them and, certainly, not have government controlling healthcare in this country.

I yield the floor.

The PRESIDING OFFICER. The Senator from Connecticut.

Mr. MURPHY. Mr. President, I have had the good fortune of being in both the House and the Senate during the period of passage and implementation of the Affordable Care Act and now the debate over repeal, and I have heard consistently from my Republican colleagues two things. One is that they did not think the Affordable Care Act was the right approach to fixing the problems of America’s healthcare system. There were 60-some odd times that the House or the Senate voted to repeal all or parts of the Affordable Care Act. That I heard consistently over that period of time, dating from 2009, is that the Republicans were prepared to offer a replacement to the Affordable Care Act that would be better, that would be an improvement over the Affordable Care Act. Indeed, over the status of the American healthcare system when the Affordable Care Act was passed. The ground has shifted mightily since then.

The Congressional Budget Office tells us that, under the Republican plan either in the House or in the Senate, a humanitarian catastrophe will result in this country. Tens of millions of people would lose their healthcare.

That is not what Republicans said their replacement would do. They said their replacement would be better than the Affordable Care Act.

The CBO says that rates will go up immediately by 20 percent on almost everybody. Then, if you are young and healthy, rates will probably go up, but for everybody else, the amount of money you have to pay in premiums, copays, and deductibles will go up. There is nothing in the Republicans’ bill about cost—nothing that addresses the underlying issues with an American healthcare system that, procedure by procedure, costs twice as much as in most other countries—and nothing about quality. There is not a single provision in the bill that encourages higher quality.

As we get ready for Republican repeal bill 3.0 or 4.0—whatever this next version will be that will be released secretly to Republicans tomorrow—I think it is just worth reminding everybody what Republicans said would happen. I will just use our President’s words. I understand that many of my Republican colleagues here do not ascribe to all of the beliefs and statements of our President, but he is the leader of the Republican Party. All of my colleagues did support him, and they stood with him in the House of Representatives, arm in arm, when they passed the Republican House’s repeal and replacement bill.

President Trump wrote this:

I was the first and only potential GOP candidate to state there will be no cuts to Social Security, Medicare, and Medicaid. Huckabee copied me.

So no cuts to Medicaid was the promise. Yet the bill that the President has endorsed and is trying to help Leader MCCONNELL push through the Senate involves debilitating cuts to Medicaid—$700 billion to $800 billion worth of cuts to Medicaid—resulting in millions of people being dropped off of that benefit. The cut to the State of Connecticut would be $3 billion. We are a tiny State. Our Medicaid Program is somewhere in the neighborhood of $3 billion. We would lose $3 billion of that.

The promise was that we would not cut Medicaid. This bill cuts Medicaid. President Trump wrote:

If our healthcare plan is approved, you will see real healthcare, and premiums will start tumbling down. ObamaCare is in a death spiral.

There is always one long sentence and then one very short sentence. Here are the two claims: “Premiums will start tumbling down.” That has been the promise, and that has been a consistent promise—that costs will go down if the Affordable Care Act is repealed and replaced with a Republican plan. The CBO debunks this from beginning to end. It says that premiums will go up. They will start tumbling upwards immediately at rates of 20 percent. Then, after that, if you have any history of preexisting conditions, your premiums will continue to go up.

The danger, of course, is in thinking
that the only thing that you pay in the healthcare system is premiums. I could pretty easily construct a healthcare reform proposal in which your premium would go dramatically down. How would I do that? I would just shift all of the payments onto deductibles, onto copayments, and give you the freedom to access care with regard to the actuarial benefit of the plan. It is easy to get premiums to go down if you do not care about what you are actually covering and the size of your deductibles and the size of your copayments.

Then, “ObamaCare is in a death spiral!” The CBO debunks that as well. The CBO says that, if you leave the Affordable Care Act in place over the course of the next 10 years, 2 or 3 million people will lose healthcare insurance. If you pass the Republicans’ healthcare bill, that is where the death spiral occurs. There are 23 million people who will lose insurance if you pass the Republicans’ bill, but 2 to 3 million people will lose insurance if you do not pass it.

Again, President Trump writes:

Healthcare plan is on its way. Will have much lower premiums and deductibles—

Here, he is making a commitment on deductibles. Once again, the Congressional Budget Office says that premiums will go up and deductibles will go up, especially for individuals who are older or individuals with preexisting conditions—while at the same time taking care of preexisting conditions.

This bill does not take care of people with preexisting conditions. Why? Because it allows for any State to allow insurance companies to get out from the minimum benefits requirement. If you have cancer, technically, the Senate Republicans’ bill says that you cannot be charged more, but you may not be able to find a plan that covers cancer treatments. So that is not protecting people with preexisting conditions. The CBO says this specifically. It says that, especially for people with preexisting mental illness and preexisting addiction, they will be priced out of the marketplace because they will not find plans that cover their illnesses. You cannot just protect people with preexisting conditions by saying that insurance plans have to cover them. You actually have to require insurance plans to offer the medical benefits they need.

Once again:

Our healthcare plan will lower premiums and deductibles—and be great healthcare! Insurance companies are fleeing ObamaCare—it is dead!

I have already covered the part about premiums and deductibles, but let’s remember that insurance companies were not fleeing ObamaCare until President Trump was sworn into office. The period of open enrollment covered a period prior to his inauguration and a period of open enrollment after the inauguration. Under President Trump’s inauguration, open enrollment was on pace to enroll a record number of Americans in exchange plans and Medicaid plans—record enrollment. Enrollment fell off a cliff after President Trump was sworn into office and signed an Executive order that told all of his agencies to unwind the Affordable Care Act. People listened to President Trump, who said that he was going to kill the whole Affordable Care Act, and they stopped signing up for those plans.

It got worse when he refused to pay insurance companies. Right now, the President will not commit to paying the insurance companies more than 30 days ahead of time. He stopped enforcing the individual mandate, and it is no surprise that insurance companies are saying they do not want to participate in these exchanges because the President is trying to kill them. He has made it very clear from day one.

I have had the benefit of being on the floor a number of times with Senator BARRASSO, who often came down to the floor a number of times with Senator LUCAS. Senator LUCAS and I talked about the fact that there will be freedom for Americans to have or not to have insurance if this piece of legislation is passed. It is a wonderful idea that people will be free to not be able to afford insurance. The reality is that, yes, some individuals buy insurance today because they are compelled to by the individual mandate, but there is a reason for that. If you do not compel people to do something, who are healthy, then you cannot protect people who are sick.

I sat where the President is sitting. He is Senator CRUZ’s 24-hour filibuster in the middle of that filibuster, he said exactly that. Senator CRUZ, in the middle of the his filibuster, said that we all understand that you have to have the individual mandate in order to prohibit companies from charging higher premiums for people who are sick, or if they recognize that their colleagues know that because they kept the individual mandate in their bill.

So this nonsense about no one’s being required to buy insurance is belied by the text of the legislation we are considering. There is a mandate in this bill. There is a penalty in this bill. It is just a far meaner and crueler penalty than was included in the Affordable Care Act.

What do I mean by that? So the Affordable Care Act doesn’t mandate that you buy insurance in the sense that if you don’t buy it, you will be locked up in jail; it says that if you don’t buy insurance, you will pay a penalty on your income tax. If you don’t buy insurance, there will be a penalty.

That is exactly what the Republican Senate bill says. It says that if you don’t buy insurance, you will incur a penalty. In their bill, the penalty is even worse because you will be locked out of buying insurance for 6 months. If you are sick, or even, frankly, if you are healthy and you need to go see a doctor for something, you will have to pay for that out of your pocket for those 6 months. If you are sick, and you have a serious condition and you are legally refused healthcare because of this legislation, the consequences could be dire, but whatever the scope of the consequences, it is something like there was a penalty in the bill that the Democrats supported and passed in 2009 and 2010.

So it is just not true to say that now Americans have the freedom not to have the healthcare. You don’t because you are going to be penalized if you let your health insurance lapse. If you don’t make payments for a couple months, you are locked out of the insurance market. This is just a different kind of penalty than the one that is in our bill.

The truth is that while I admit there are some people who buy insurance today because they fear that penalty, it is necessary, as Republicans realize, in order to make markets work. Markets don’t spiral out of control, because if you say that you can’t charge people with preexisting conditions more and you don’t require healthy people to buy insurance, then why would any healthy person buy insurance? They might just wait until they are sick because they know that once they are sick and need very expensive care, they can’t be charged any more for it.

The nature of insurance is that people who have the fortune to be healthy or to be free of accident or natural disaster subsidize individuals who are not so fortunate—who are sick, who do have an accident occur to their home or who are subject to a natural disaster. That is how insurance works.

Republicans realize that because they put a penalty in their bill, but for as many people who buy insurance because they are forced to, most people buy insurance because they want it because they recognize it is better to cause they recognize it is better to cause they recognize it is better to cause they recognize it is better to cause they recognize it is better to cause they recognize it is better to have insurance in the case that they or a loved one gets sick, and that is whom we are talking about here. Of the 23 million who lose insurance, according to CBO, under the Republican bill, millions and millions of those are those people who want insurance but will not be able to get it because they are priced out by the Republican bill. I can see there will be some people who will make that choice, but there will be millions more who had insurance today who will not be able to get it moving forward.

As Republicans finish up this latest round of secret negotiations, I just want to make sure we are on the same page about what this bill does. It mandates that you buy insurance, just in a different way. It has a penalty just like the Affordable Care Act has a penalty.

I want to make sure we remember what Republicans stated as their goals for this replacement. The goals were that the system would be better, but by every single metric, this proposal will result in worse healthcare for people. Less people will have insurance. Rates
will go up for everyone except for young, healthy people. Costs will continue to spiral out of control, and no additional measures will be taken to make quality better. Every single problem that Republicans address in the existing healthcare system will be made worse.

Senator BARRASSO complained mercilessly about these exchanges. CBO says the exchanges will shed even more people. The costs will go even higher. Senator CORNYN regularly tweets out that the Affordable Care Act still left 26 million Americans uninsured, but this bill you are debating will double the number of people who don’t have insurance.

For all of my Republican colleagues who rightly come to the floor and talk about the fact that the cost is too high for individuals in our system, there is not a single provision in this bill that deals with the actual cost of the service, of the procedure, of the visit, of the surgery.

I am deeply worried that this next version of the Republican repeal and replace bill will result in premiums going up by 15 percent and only 17 million Americans losing healthcare and it will be declared a victory, but that is not what Republicans promised. They promised the Affordable Care Act and replace it with something that is better, not something that is less bad than the original version of the replacement plan they introduced.

I think the reason that to many people it appears this bill is falling apart is because when my colleagues went home this weekend, they heard an earful from their constituents—from real folks who will be affected by this piece of legislation.

Alison is 28 years old. She is from Milford, CT. She was in my office this week. She came to DC this week, she and her boyfriend, I think—I don’t want to ascribe an engagement to them that is not true; I think her boyfriend. They were here this weekend, they were supposed to be on vacation this week, and they decided to spend some of their vacation coming to Washington so Alison could tell her story to Members of Congress.

When she was 9 years old, she was diagnosed with a rare liver disease. At the time, she and her family were told that they would need to find a liver transplant in roughly 10 years or she wouldn’t survive.

At the start of her sophomore year at Sacred Heart University in Connecticut, she was starting to have symptoms of a condition that results from a buildup of ammonia in her brain. She was having a hard time concentrating, abdominal pain, nosebleeds, vomiting, and joint pain. Her doctor said it was time for her to get that transplant, that she was at that critical moment when she needed it.

Unfortunately, none of her family or 8 other candidates—friends, I think, of the family—were a match. So in desperation, her parents wrote an email and just sent it out to people who lived in Trumbull and in the Sacred Heart University community. From that email, an anonymous young man stepped forward. He was tested and determined to be a match. The surgery was a success. When she walked on stage to receive her diploma from Sacred Heart University, she joined the school by that anonymous donor, and her fellow graduates gave her a standing ovation.

Now, her family was lucky because she had insurance through her father. She is, because of the Affordable Care Act, allowed to do that, at the time being under 26 years old. Her insurance paid for virtually everything that was necessary, but, she says, had my dad not had the healthcare benefits he did, I know my family would not be in the place we are today because my parents would have lost everything they worked so hard for. There was no way we could have afforded to pay for all of those burdens.

Today she worries that if this bill is passed, she, as a young woman with a preexisting condition, will be destined to a life of discrimination because she may not be able to find a plan that covers her condition because of the withdrawal of protection. What if we sit down and fixed the things that aren’t working, kept the things that are working, and held hands together and said that we are going to jointly own the American healthcare system?

It would leave plenty of things to fight over. There would still be no shortage of disagreements that we could run elections on. Whether it be immigration or taxes or minimum wage, there will still be lots of things we could disagree on, but for as long as I have been in politics, this issue has been thrown back and forth, to hurt Democrats, to hurt Republicans. In the process, we have injected so much uncertainty into the healthcare system and into the economy at large, that we make it impossible for private sector reform to take hold.

Hospitals and healthcare providers have been doing some innovative things since the Affordable Care Act went into effect because they got a signal from the Federal Government that we wanted them to start building big coordinated systems of care, that we were going to reward outcomes rather than volume. So they started making all of these big changes, and then, about a year ago, they stopped because Republicans said they were going to blow up that model and pass something new. We frustrated innovation because we said that model is just going to ping-pong back and forth between left and right. We hurt ourselves politically, we frustrate the
private sector innovation, and get no benefit to us on the economy.

My offer, and I think the offer from most of my colleagues, is sincere. If my Republican friends do choose to throw away this piece of legislation because it doesn’t comport with the goals that Republicans said they had at the heart of their effort to repeal this bill, there is an important bipartisan conversation about keeping what is working in our healthcare system and admitting together that there are big things we aren’t working and fixing them together.

I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The bill clerk proceeded to call the roll.

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

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

Mr. MERKLEY. Mr. President, the most important three words in our Constitution are the first three words: “We the People.”

Our Founders chose to write those words in supersized font so that we could, from some distance away, know exactly what the mission statement was. Their goal wasn’t to write a structure that government that would repeat the governments of, by, and for the powerful of Europe but to pursue differently a vision in which the will of the people would be enacted; that government would work not just for the benefit of the citizens at large but also empowered by the citizens at large.

This is a vision we have been very concerned about as we see the influence of the concentration of money in American politics.

Indeed, we have five members of the Supreme Court who don’t understand the basic, fundamental nature of the first three words of our Constitution. They adopted a court case, Citizens United, which was the opposite of the vision of our Constitution. That vision was articulated by Thomas Jefferson, who said that the will of the people will be enacted only if each and every citizen has an equal voice. But Citizens United gives a dramatic, stadium-sized megaphone to the individuals who are the most powerful in the country, at odds with that fundamental vision that Lincoln so well summarized as government of, by, and for the people.

We have certainly seen the case of government by and for the powerful in the context of the recent TrumpCare bill—the Senate version thereof—crafted in secret by 13 of my colleagues from across the aisle, hiding from the press, hiding from the healthcare stakeholders and experts, hiding from their constituents. In fact, during this last break, of the 52 Members of the Republican caucus, apparently—reportedly—only a couple had townhalls because they were terrified of what their constituents would say about the bill they have been crafting in secret—the secret 13.

This bill is also known as the zero, zero, zero bill—zero committee meetings, zero amendments considered, zero months of opportunity for Senators to go back and consult with their constituents back in their home States.

Then what do we find as a result of this secret process of government by and for the powerful? A bill to rip healthcare from 22 million Americans in order to deliver hundreds of billions of dollars to the richest Americans. In fact, if you want to summarize it, you can say that this bill gives $33 billion—not $25 billion, not $23 billion but $33 billion—to the richest 400 Americans while ripping healthcare away from 700,000. That is the number who could be funded by that same $33 billion. That would cover all of the Medicaid recipients in Florida, Arkansas, and West Virginia and Nevada. This has incredibly grave consequences for the peace of mind and the quality of life for these millions of Americans. It rips $772 billion out of Medicaid.

We know the Medicaid expansion in Oregon has enabled 400,000 people to acquire healthcare in my home State—400,000. If they were holding hands, they would stretch from the Pacific Ocean to the State of Idaho, across the entire east-west breadth of my State.

Think about how much of an impact this has on rural Americans. One out of three Oregonians in rural Oregon are on the Oregon Health Plan, Oregon’s Medicaid Program. It has a big impact on our seniors—our seniors in long-term care.

Oregon is a leader in helping families, helping individuals stay in their homes as their healthcare deteriorates. But when they can no longer stay in their homes because of the extensive nature of their care, many then are, through Medicaid, able to go and get care—long-term care—in a nursing home. That long-term care, paid for by the Oregon Health Plan, covers about 60 percent of the individuals in long-term care, but in rural Oregon, it is much higher.

I was in Klamath Falls at a nursing home. I was citing the national statistic, 60 percent, and the head of the nursing home said: Senator, here, it is one woman in three. 60 percent, and the head of the nursing home. I was citing the national statistic, 60 percent, and the head of the nursing home said: Senator, here, it is one woman in three.

I looked at those residents down that long hallway who needed intensive nursing healthcare, and one woman asked why I was there. Her name was Deborah. When I explained it, she said: I am paid for by Medicaid. If Medicaid goes away, I am out on the street. That is a problem because I can’t walk.

It is not just a problem for Deborah. It is a problem for all of our residents in long-term care who need extensive nursing healthcare is a real challenge. It is a real challenge. It is a real problem for our mothers. One out of three women in maternity care are paid for by Medicaid. Don’t we want our children to get a good, strong start in life? Don’t we want maternity care from the moment a woman knows she is expecting a child? Don’t we want that? Then why do so many of my colleagues support a bill to tear that away from our expectant mothers?

It is a problem for our older Americans, our older Americans whose rates would go way up. For example, a man who is 60 years old, earning $20,000 a year, who currently pays about $80 a month for healthcare—any affordable policy. Under the Republican TrumpCare bill, that would go to $570 a month.

I challenge my colleagues, find me someone earning $20,000 a year who can pay $570 a month for healthcare. Find that individual and defend your plan on the floor of the Senate as to why that isn’t equivalent to just taking healthcare away from that individual.

Then, of course, we have the issue of preexisting conditions. People sometimes have an injury in high school football or maybe it is in softball or gymnastics or in wrestling that they carry with them their entire lives. Maybe it is something that develops further on in life. Maybe it is asthma, diabetes, or an episode of cancer. Now they have a preexisting condition.

Under our old healthcare system, prior to 2009, 2010, they couldn’t acquire insurance unless they were fortunate enough to get it through that job, which millions of Americans do not get it through their workplace. They were out in the cold, out on the ice.

Now we have this Republican TrumpCare bill. They want to throw those citizens back on the ice who have preexisting conditions, not their friends who are wealthy enough to buy healthcare on their own or heads of corporations who get big benefit packages—not them, no, just the struggling working Americans.

Don’t we care about struggling working Americans? Aren’t we a “we the people” nation, not a “we the privileged” nation? I encourage my colleagues to read up on the first three words of our Constitution and what it means.

Then we have the plan my colleague from Texas has presented. It is referred to as the Cruz amendment. The Cruz amendment—Cruz amendment for fake insurance. It works like this. It says, if an insurance company provides one policy with extensive benefits—that is, benefits essential to ordinary healthcare like maternity care and the ability to go to a hospital, the ability to get a broken bone repaired, the ability to get affordable drugs, just the basics of healthcare—they have one policy with these essential benefits. They can offer policies that cover virtually nothing. These are known as fake insurance.

We have a President who likes to talk about fake news virtually every day. Why do we have a President who
hates fake news but loves fake insurance? Why do I have 52 colleagues here who apparently love fake insurance?

Here is what it does. It means the young and the healthy get those policies because they cost very little, and they don't get hurt and they are not going to get sick. That means that those who are older and those who have pre-existing conditions have to go for the policy that has those essential benefits, but now because only the older individuals and the sicker individuals are getting that policy, it is way beyond reach.

Earlier I described how a 60-year-old at $20,000 has a policy that increases seven times, from $80 a month to $570 a month. The Cruz amendment would make that much worse. It makes fake insurance for the young or the wealthy and unaffordable policies for those who are older and have pre-existing conditions.

Our President said the House bill is mean, but the Senate bill is meaner. The House bill would knock 14 million people out of healthcare within a single year. The Senate bill, that is 15 million people.

The American Medical Association has long operated under the precept of, first, do no harm. Wouldn’t that be a good principle for legislation on healthcare? Is it any wonder that the USA TODAY poll says only one out of eight Americans likes this Republican TrumpCare bill. We can turn to the PBS NewsHour poll, 17 percent. That is quite a small number of Americans who understand that ripping healthcare from 22 million people in order to give hundreds of billions of dollars to the richest Americans is one of the biggest takings this country has ever seen proposed and one that so deeply and profoundly damages the quality of life for these Americans.

Our bipartisan—Republican and Democratic—over time have understood this. President Eisenhower said:

Because the strength of our nation is in its people, their good health is a proper national concern; healthy Americans live more rewarding, more productive and happier lives.

He continued:

Fortunately, the nation continues its advance in bettering the health of all its people.

Today, on the floor of the Senate, we have a different philosophy, not the Eisenhower strategy of advancing the bettering of the health of all of our people but in fact the Trump policy echoed by so many of my colleagues that is about destroying the healthcare for millions of people, taking us back in time to a place where people of mind was missing for millions of Americans because they couldn’t either afford healthcare or because their policies didn’t cover anything. Other Presidents over time have weighed in with very similar sentiments to that which President Eisenhower put forward.

Let’s hear it from the citizens back home. Kathryn, from Springfield, has battled cancer three times over the last 12 years. Kathryn says that during her last two bouts with cancer, in 2010 and 2011, she was “blessed enough to have qualified for the Oregon Health Plan” and that without it she would not have been able to get sick.

Indeed, healthcare coverage has been a blessing to so many. Let’s not rip those blessings away.

Let’s go to Beth in Bend and her 34-year-old son who is living with a rare genetic condition and relies on the Oregon Health Plan to survive. In 2012, doctors found tumors along his spine and areas of concern in his brain and his lungs. They are benign now but could turn into cancer at any time. Beth’s son’s life depends on regular, expensive MRIs to monitor him. He is only able to afford those MRIs because of the Oregon health plan.

As Beth says, “If the ACA is repealed and replaced with TrumpCare, my son will most likely lose his current health insurance. Without affordable insurance is a potential death sentence for my son.”

Medical professionals like Caitlin, a nurse in Portland, tell us how significant this is, and she wrote:

With the passing of ObamaCare, I saw people were finally able to come and be seen by our medical teams. Often their disease processes were so advanced that we would have to take very extreme measures to try to halt or reverse these disease processes.

But as time has passed, we’re able to catch things sooner and people can actually go to primary care to monitor until it’s a matter of life or death and having to be seen in the Emergency Department.

I am struck by Liz from Enterprise, who works at a clinic and told me that the clinic has expanded in this very small, remote town in Northeast Oregon from 20-something employees to 50-something employees. It has doubled in size, which means an incredible improvement in healthcare. She went on to say that by 2012 she was able to take on mental health as well, which they never were able to do before. Why could they afford to do this? Because the uncompensated care dropped so dramatically that their finances improved, and they were able to hire more staff.

Let’s ask about John in Sherwood. John wrote about his grandmother. He lost his grandfather to Alzheimer’s a few months ago, but thanks to the Oregon Health Plan, his grandmother was able to live in a nursing home and get the care she needed. He recently had been able to take on mental health as well, which they never were able to do before. Why could they afford to do this? Because the uncompensated care dropped so dramatically that their finances improved, and they were able to hire more staff.

As John says, “I’m forever thankful for the work of President Obama and Congress for passing the ACA. If they wouldn’t have passed this bill, my grandmother wouldn’t have gotten the care she needed from those great men and women at the nursing home.”

These stories go on forever. Over this last weekend, I did a series of townhalls in rural Oregon, parts of Oregon that would be painted red on a political map. I held those townhalls and then went to a series of other Main Street walks with mayors and small incorporated cities. What I heard everywhere I went—inviting the entire community to come to the townhall and talk—was enormous anxiety, enormous anxiety and disappointment that the leaders they are counting on here to make our healthcare system work better care more about giving more American tax dollars away to the richest Americans than they do about fundamental healthcare for struggling working families across our Nation.

As I mentioned, it has been reported that only a couple of my Republican colleagues held a townhall, even though this bill would affect them so profoundly. Still, their voices are echoing through this building, through the emails, through the phone calls, through the individuals who are coming in this Nation. We need to listen to these individuals. I know most of my colleagues didn’t go home and listen to their constituents.

That means we have to take an oak stick and pound it through the heart of TrumpCare and bury it 6 feet under and then work together in a bipartisan fashion. Think of all we could do. We know that when you strip away insurance, you destroy the market for insurance companies to go into new areas and compete. Let’s restore that insurance.

We know that when the President holds on to the cost-share payments and will not say whether he is releasing them, our companies don’t know how to price their policies, and they are dropping out of the exchanges across this Nation. County after county health insurance companies are fleeing because the President will not tell them whether he is releasing these cost-share payments. We can fix that.

We know we have an opioid epidemic across this country. I have heard my colleagues on both sides say we have to take this on in a more courageous, more substantial fashion. We passed authorizing legislation, but let’s put funds behind that. Let’s do that, and let’s take on the high cost of pharmaceuticals.

These four things we can do together.

The country would love to see Democrats and Republicans working together to make our system work better. That is exactly what we should be doing in representing the citizens of the United States of America in a “we the people” democratic republic.

The PRESIDING OFFICER. The Senator from Utah.

TAX REFORM

Mr. HATCH. Mr. President, I rise to once again discuss the ongoing effort to reform our Nation’s Tax Code. Over the past several years, I have come to the floor often to make the case for tax reform by highlighting the many shortcomings of our current tax system and
discussing the benefits we could reap by making the necessary changes.

Over the last years while I have been serving as chairman or the lead Republican on the Senate tax-writing committee—both as ranking member and as chairman—I have made tax reform my top priority, and right now, I believe there is more momentum in favor of tax reform than we have seen in decades.

To capitalize on that momentum, reform advocates like myself need to continue to make the case for updating and fixing our broken tax system. Toward that end, I intend to come to the floor often in the coming weeks and months to discuss various aspects of our tax system and make the case for reform. In my view, we need to go back to the drawing board and fundamentally rethink our entire tax system. This includes both the individual, as well as the business side of the tax ledger.

Today, I want to talk specifically about our Nation’s business tax system, with a particular focus on the corporate tax.

Let’s get the obvious out of the way first: The United States has the highest statutory corporate tax rate in the industrialized world. Looking at the effective corporate tax rates tells an equally gloomy story of the lack of American competitiveness. I will have more to say on that in a minute.

I know how much our corporate America and claim they aren’t paying their fair share, but the facts tell a different story. Companies doing business in the United States are saddled with statutory tax rates that are higher than any other industrialized country. This isn’t just a Republican talking point: Members and commentators from both parties and across the ideological spectrum have acknowledged that this is the problem.

For example, just last year, former President Bill Clinton argued for a reduction in corporate tax rates, noting that he had urged for the corporate tax to be raised to 35 percent when he was President because “it was precisely in the middle of OECD countries. It isn’t anymore.”

Early in his Presidency, President Obama said: “Our current corporate tax system is outdated, unfair, and inefficient.” He also said that our corporate citizens “hit companies that choose to stay in America with one of the highest tax rates in the world.” I might add, he did nothing about it, though.

In addition, my counterpart on the Senate Finance Committee, Senator Wyden, has introduced legislation that would reduce corporate tax rates by more than 10 percent.

In a Finance Committee report in 2015 on international tax reform, put out by a working group cochaired by my friends and colleagues Senators PORTMAN and SCHUMER, it was clearly stated that “no matter what jurisdiction a U.S. multinational company is competing in, it is at a competitive disadvantage.”

There are plenty of other examples of prominent Democrats who recognized the impact of our obnoxiously high corporate tax rate.

I want to come back to Bill Clinton’s point, though, because it is an important one. We must always remember that businesses are, by and large, rational actors, making decisions based on what will help grow their business and what will cause their businesses to stagnate or move backward. Such decisions inevitably include where a company will do business and where it will be incorporated.

According to the Organization for Economic Cooperation and Development, or OECD, businesses contemplating investment and other similar matters—especially incorporation in the United States—must first come to terms with the largest combined corporate tax rate among OECD member countries, which is currently at 30.1 percent.

Some of my friends on the other side of the aisle like to count these inconvenient facts by acknowledging the difference between effective tax rates, which are rates after accounting for deductions and credits, and statutory tax rates. Of course, even when taking those differences into account and focusing solely on effective rates, the United States only falls from the highest to the fourth highest corporate rate among countries in the G20—and that is according to 2012 data that doesn’t yet capture recent tax reforms in the UK and elsewhere.

In other words, whether we are talking about effective rates or statutory rates in the United States, we are talking about some of the highest corporate tax rates in the world, and, as the working group cochaired by Senators PORTMAN and SCHUMER made clear, companies—both American companies constantly being put at a competitive disadvantage. It doesn’t take a Ph.D. in economics to recognize that this has had a major, negative impact on our economy and the ability of the American job creators to compete on the world stage.

As a result of the astronomically high corporate tax rates in our country, we have seen companies—that keep in mind, have duties to their shareholders, taxes, share repurchases, inversions, earnings stripping, and profit shifting, all of which erode our tax base and drive away American ingenuity and innovation. These types of activities ship earnings offshore, rather than keeping them right here in America. The primary driver behind most of these practices—practices that have been decried in the harshest rhetoric by some of our friends here in the Senate—is the desire to avoid or at the very least mitigate the impact of the U.S. corporate tax.

While I am no fan of inversions or foreign takeovers or aggressive tax-planning techniques that shift profits around the globe in search of low taxes, and I don’t want to see any unnecessary erosion of the U.S. tax base, I can hardly fault any company for simply responding to the incentives created by our current tax system to compete with the competitive actions of other countries that have been lowering their corporate tax rates.

Unfortunately, instead of recognizing the perverse incentives of our current tax system, combined with companies’ duties to their shareholders, many of my Democratic friends—most notably, prominent officials in the previous administration—have derided the executives and board members making these decisions, claiming that they lack, in the words of our previous U.S. Treasury Secretary, “economic patriotism.”

The truth is that when it comes to our business tax system, some of our friends have buried their heads in the sand.

Let’s take a quick stroll through recent history. In the 20 years between 1983 and 2003, there were just 29 corporate inversions in the United States. In the 11 years between 2004 and 2014—a period spanning both Democratic and Republican Presidencies—there were 47 tax inversions—nearly double the number in half the amount of time. A quick review of changes in other industrialized nations’ tax schemes will show that while the United States has stubbornly maintained the same corporate tax rate for more than three decades, other countries have nimbly adapted to the growing competition in the global marketplace.

I have spoken at length about inversions before, so I will not belabor the issue now. What I do want to say is that when I talk to board members and CEOs of some of the largest companies in this country, they are unequivocally when asked why they feel pressure to invert. Almost uniformly, their answer is our outrageously high corporate tax rate.

Personally, I think this is one of the reasons why my friends and colleagues who sit on committees that regularly engage in these topics have come to recognize the level of our corporate tax rate as the major problem that it is.

When I talk to constituents in Utah and Americans across the country, I hear of stagnant growth in wages and income, concerns over lack of opportunities and jobs, and worries about whether their employers will continue to operate here in the United States of America.

Of course, the problem with our corporate tax system isn’t just that it incentivizes companies to move offshore or discourages businesses from forming here in the United States in the first place; the problems actually run much deeper.

Since 1947, the average growth of inflation-adjusted GDP in the United States has been 3.2 percent. Unfortunately, in the 8 years of the Obama administration, the growth rate was an anemic 1.8 percent.
I know that several of my colleagues would, in response to those data points, argue that much of that is due to the great recession that took place at the initial stages of President Obama’s time in office; however, a quick review of the quarterly growth rates since 1947 will show there are many periods of growth following recessions as the economy rebounds and the values of assets normalize again. In the case of the great recession of 2008 to 2009, that normal rebound did not occur, and a big part of the downward pressure imposed by our outdated tax scheme. Let’s remember that the recession ended in June 2009—more than 8 years ago.

Others still might argue that this is all academic. They might even be brazen enough to claim that when we talk about the corporate tax rate, we are talking about the problems of the rich and not the middle class. Again, anyone making such an argument would simply be misinformed. It has a negative effect on the middle class and on lower income workers. That effect comes in the form of fewer jobs, less investment in America, and sluggish growth and productivity that fuels wage and income growth.

Since 1953, median family income in the United States—meaning that half of the country earned more and half of the country earned less—has grown at an average rate of 1.3 percent. Under the Obama administration, that same indicator—one of the best indicators of the true status of the middle class—grew at approximately half that rate, or 0.7 percent. The growth of the average hourly earnings of production and nonsupervisory workers, in fact, under the Obama administration was half of the historic long-run average. What is more, labor force participation was set firmly on a downward trajectory throughout the Obama administration and has yet to recover.

As you can see, there is clear evidence that the economy is not working well for many American workers and middle-class families. Anyone arguing that our current tax system is a benefit to the middle class is, in my view, sadly mistaken or being deliberately misleading.

Over the years, I have seen many of my friends on the other side come to the Senate floor demanding new stand-alone legislation. I hope they will want to work with us to make the United States an inviting place to locate a business, invest, hire workers, and create new ideas and products, but that will not be the case so long as we cling to our punitive corporate tax system. Now, of course, when it comes to tax reform, our focus needs to move beyond the corporate tax rates. We need to talk about making the individual tax system simpler and fairer and offer tax relief to the middle class and small, passthrough businesses. We need to talk more about fixing our international system to further improve the competitiveness of American job creators and prevent further erosion of our tax base. And we need to remove burdens on savings and investment that keep middle-class Americans from generating and accumulating wealth for the future.

I am going to talk more about all of these topics and others in the coming weeks and months.

All of the improvements that we can make on these tax issues will become key elements of an effective tax reform package. In these areas, and in all areas where Republicans and Democrats can find agreement if we are all committed to the same goal—growing our economy to benefit the middle class.

As I have said here on the floor many times, tax reform does not have to be another partisan exercise. I hope my Democratic colleagues will opt to join Republicans in this effort. As they have acknowledged the problems with our current tax system, I sincerely hope they will want to work with us to find a way to fix that tax system.

As I said, I will have more to say in the near future, but these issues—our outdated business tax system and the fantastically high corporate tax rate—will not simply go away. I personally am committed to fixing these problems and will work with anyone who is willing to join the effort in good faith.

Mr. President, I yield the floor.

The senior assistant legislative clerk proceeded to call the roll.

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

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

NET NEUTRALITY

Ms. CANTWELL. Mr. President, I come to the floor this afternoon with my colleague, the Senator from Hawaii, who has been leading our efforts to coordinate a loud and resounding voice on trying to stop the FCC from running over an open internet, and I thank him for his organization for today. I know we will be joined by our colleague Senator Wyden from Oregon—and perhaps the other Senator from Oregon and several others—to talk about this important issue.

We are here today to try to draw attention to one of those important economic issues before us: the need to preserve an open internet with strong net neutrality laws.

We are facing a pivotal moment in the fight to preserve an open and fair internet. A strong and open internet is, without question, one of the great innovations of our time and one of the great job creators of our time. Yet the Trump administration stands poised to undo the bedrock principle of net neutrality in the face of evidence it would undermine our economy and undermine future job growth.

The FCC has announced its intention to go against the demands of 5 million American consumers and reverse what is an existing rule so that big cable companies and telecom providers can erect toll lanes; that is, if you want fast internet speed, you have to pay more. This would threaten the fundamental nature of our internet and the innovation economy.

Last week, FCC Commissioner Clyburn and I held a town hall on net neutrality in Seattle. More than 300 people attended, and not one was in favor of paying higher prices to their cable company for worse or inhibited internet services.

Many people shared their personal stories about how an internet with toll lanes would affect them negatively. We heard from many small businesses and startups that they were afraid of losing business because they might have to charge higher prices to their customers if these important protections were reversed.

I heard from people with health problems and their concerns about health emergencies while away from home. The absence of net neutrality rules would mean that a doctor in their small hometown could not get critical information to the medical practitioners who are dealing with a patient in an emergency so that they could get important lifesaving treatments. We are hearing from parents who are caring for a patient via telemedicine or in an emergency room in Seattle or a student in a rural community trying to access the
The internet economy is dynamic and supercharged in creating job growth. This phenomenon of economic growth trajectory would not be possible without the internet as a platform for economic activity. This is why it is so important that the FCC not, in the dark of night, put down a rule without public comment to try to stop and change this direction that has already been protected by past FCC Commission action and is here today on a date when everybody is trying to raise awareness—because the FCC could act as early as August 18 to try to change these rules. It is important that we oppose any new restrictions trying to dismantle an open internet. We need to make sure we are talking about the harm to consumers, the harm to innovation, and the fact that internet speeds for American consumers are important and consumers shouldn’t be burdened by a cable company holding you at ransom to pay more just to get faster speeds.

Consumers are already struggling with high prices. Cable bills rose 39 percent from 2011 to 2015, eight times the rate of inflation. In 2015, the average consumer cable TV bill was $99 a month; just a year later, the average consumer cable bill had risen by 4 percent to over $103. My guess is a lot of people listening to this now are probably thinking, boy, where are we today?

One of the most popular arguments by the enemies of an open internet is that it suppresses investment and leaves consumers with poor broadband infrastructure. That is a false claim. Data shows that investment by publicly traded cable companies and big telephone companies was 5 percent higher during the 2-year period following our protection of an open internet. Clearly, people are continuing to make investment.

I want to make sure people understand that we do not want to see a change in this policy. We do not want to see American consumers run over by the enemies of an open internet. As technology advances, incredible opportunities without net neutrality for American consumers are important and consumers shouldn’t be burdened by a cable company holding you at ransom to pay more just to get faster speeds.

I would like to amend one thing she said. She said that we got about 5 million comments in favor of net neutrality on this question. It is true. Yesterday we had 5 million and change, but I just checked, and we are at 6.728 million, and more and more people are weighing in on this.

As of today, it is important to point out that net neutrality is the law of the land. We are not asking for a change in the way that the internet operates. We are asking for the internet, as we know it, to be used as we know it.

What does that really mean? It means you have an arrangement with your ISP. You pay your internet service provider for access to the internet, and you get the whole internet. Your provider does not get to decide what you access. You do. Whether it is NBC or ABC, Hulu or Netflix or Breitbart or Google or Yahoo or Facebook or the New York Times or RedState or HotAir or whatever you want, you get to go there. If we don’t like it, we can go to somebody else. Without net neutrality, that arrangement could change.

The free and open internet, as we understand it, is a premise of the way we use the internet. It is a premise of the internet economy. It is a premise of Silicon Valley. It has now become a premise of car companies and real estate companies and anybody who does business online. If, for instance, you wouldn’t have to pay money to an ISP to make sure your website loads fast enough so that consumers can see it. But that freedom, that free and open internet, really is in danger.

Here is what is happening: The FCC, the Federal Communications Commission, is trying to change the internet by ending the net neutrality rules that were put in place. If they succeed, your ISP will have the power to stop you from accessing certain content. They will be the ones that get to make decisions about what you can access and how fast—not you. It is a foundational change in the way the internet operates.

Now, some people—including the internet company lobbyists and their CEOs—will say: Look, the companies aren’t going to change the internet even if the law goes away. In fact, we are committing to voluntary net neutrality. That is what they say. I want you to think about how likely it is that a publicly traded company will not at least explore the possibility of different business models, and here is the problem: There may be opportunities without net neutrality for them to make more money.

Right now I have basic cable in my apartment. I don’t have HBO. Back in Hawaii I have HBO and the whole deal, but in my apartment here I have more basic cable. I pay for a certain number of channels. I don’t get access to the entire TV universe. I pay for packages. There is no reason under the law, should they repeal net neutrality, that...
an ISP couldn’t give the liberal package, which you could pay $75 for, or the conservative package, which you could pay $75 for, or the NBC-related families package, which you could pay $120 for—or maybe it is free because it is part of a vertical, which is included in your ISP.

The whole idea is that there is nothing preventing them—except these net neutrality laws—from deciding whom you get, where you get to visit, and how fast the downloads come. This is especially important, of course, in the entertainment space, when we are all streaming TV, news, movies, and even gaming online so the relationship between the person who creates the content and you is going to be intermediated by an ISP.

If you have a great app idea, right now you just have to have a great app idea. If you have a great website, people can log on to your website and you are in business. If you have the next greatest website, you have a home on Craigslist or Amazon, but it is post-net neutrality and the FCC goes through with this, you will not need a bunch of engineers but a bunch of lawyers and business sharks to try to negotiate with in order to get in the door.

Students could have less access to online resources, including online classes. Realtors would be stopped from using online tools to sell their homes. Patients might not able to use the internet to communicate with their doctors or monitor their health. Musicians, photographers, entrepreneurs will use the tools everybody depends on to make a living or share their art online.

I was talking to somebody I know in the tech community, and they were saying that this is a parade of horribles. None of this is going to come true.

I asked: Why do you think that is true? Why do you think this is just some apocryphal scenario I am describing? If you were an ISP, why wouldn’t you slice up the internet and sell it for more? If you are the one controlling the access to it and you are a publicly traded company, you have no duty to a free and open internet. You have a duty to maximize shareholder profits.

If your board of directors comes to you and says: You know what, this whole “you pay a flat fee and you get the whole internet,” that is not the right business model. Look at these areas where ISPs are the only provider in many communities. The idea that the consumer has a choice in lots of rural communities, you have only one broadband provider in the first place.

Why wouldn’t a broadband provider slice and dice up the internet and charge you a la carte? They can get more money for this. It is not that they are bad people. It is that they are duty bound to maximize profits.

Today, July 12, is the day of action. The internet is pushing back. Today we stand up to the FCC so the internet remains free and open. As we speak—I mean literally as we speak—thousands and thousands of people across the country by the minute are logging on to the FCC website to express themselves.

I have to say, this has become a Democratic fight, which has become a progressive issue, but it wasn’t so long ago that people in the Conservative movement were worried about media consolidation and the conservative movement was saying: Hey, listen, I don’t know who is going to own my media. How am I going to get to my websites to get my content at whatever rate it comes down. Don’t tell me what information I get to have access to.

Everybody uses the internet. Many people are spending dozens of hours a week on the internet via their phones, via their television, via their broadband connection at home, and the innovation economy that underlies our economic growth is really in jeopardy. We need to make a living, we need to share our art. I know it is an arcane process. I know we have to fight to keep the internet open. If you have a great app idea, right now you just have to have a great app idea.

Consider that today essentially every company is an internet company. In 2016, almost half of the venture capital funds invested in the United States went toward internet-specific and software companies. That is $25 billion worth of venture capital funding in our country. Half of all venture capital went into that sector, this innovation sector that continues to transform not only our own economy but the whole world’s economy. At the same time, to meet America’s insatiable demand for broadband internet, U.S. broadband and telecommunications industry companies invested more than $87 billion in capital expenditures in 2015. That is the highest rate of annual investment in the last 10 years by the broadband companies.

We have hit a sweet spot. Investment in broadband and wireless technologies is huge. Job creation is high. Venture capital investment in online startups is high. That is what we want. We want both the broadband companies and all of these smaller companies—which makes economic sense because there are tens of thousands of them—to have a chance to coexist and have the innovation continue, even as the large companies continue to invest in broadband expansion.
It is the free and open internet that has allowed us to enter a new phase of the digital revolution—the internet of things era—where our devices, our appliances, and everyday machines now connect with one another.

The digital revolution is a global economic engine and net neutrality is its best fuel. Taking these rules off the books makes no sense. With these net neutrality protections in place, there is no problem that needs fixing. It is working right now perfectly.

In 2014, Ajit Pai and the Republican FCC voted to begin a proceeding that will effectively eliminate net neutrality protections, allowing a handful of broadband providers to control the internet. Chairman Pai’s proposal would declare the open internet order and the net neutrality rules that are protecting the free flow of ideas, commerce, and communications in our country.

Now the big broadband barons and their Republican allies say we need a light-touch regulatory framework. Let’s be honest. When the broadband behemoths say “light touch,” what they really mean is “hands off”—hands off their ability to choose online winners and losers.

We are not fooled when AT&T engages in alternative facts and says they support net neutrality and today’s day of action. They don’t support title II, and they don’t support net neutrality. What they want is an unregulated online ecosystem where they can stifle the development of competing services that cannot afford to compete in this kind of corporate deception.

What the broadband providers really want is an unregulated online ecosystem where they can stifle the development of competing services that cannot afford to compete.

Chairman Pai says he likes net neutrality but simply wants to eliminate the very order that established today’s net neutrality rules. That is like saying you want to have your cake and eat it too when it comes to net neutrality.

President Trump and his Republican allies are waging an all-out assault on every front that they can on our core democratic values. Whether it is healthcare, immigration, climate change, or net neutrality, they want to end the vital protections that safeguard our families and hand over power to corporations and special interests. We know better.

We need to make our voices heard. A political landscape of opposition will protect our economy, protect our free speech, protect our democracy. We must protect net neutrality as a core principle in a modern 21st century America, in a modern America where the smallest company can raise the capital in order to accomplish that goal, where the smallest company doesn’t have to ask for permission to be able to innovate, where the smallest company doesn’t have to first raise the money to ensure they can pay to have access to this incredible economic engine of entrepreneurial expression that has been the internet for this last generation, where free speech, the First Amendment, this ability to be able to speak unfettered, uncontrolled by corporate America and whether or not you can afford to do that must continue to be protected in our country.

That is what net neutrality is all about. The principles of nondiscriminatory access is what gave us Google and eBay, Amazon and Hulu, YouTube and Etsy, Zillow and Privity Advisor, Zillow and Pricelists and an endless variety of companies that knew they could access every single potential consumer in our country and could, as a result, raise the capital necessary to ensure that engine of economic entrepreneurial innovation could be deployed from their minds in changing fundamentally the economy of our country and the economy of the world.

In 2017, every company is an internet company. Every company depends upon free and open access to the internet. That is what we have been transformed into in just the last 20 years.

I was the Democratic coauthor of the Telecommunications Act of 1996. In 1996, not one home in America had broadband. Can I say that again? Just 20 years ago, not one home in America had broadband. But we changed the rules to create this chaotic entrepreneurial world, where all of a sudden all of these companies whose names are now common household names could be created, transforming our economy.

There is no problem. They are trying to fix a problem that does not exist.

We need to give the next generation of entrepreneurs the same opportunity to innovate that the last generation had—not to get permission, not to ask: Pretty please, may I reach all 320 million Americans? No, ladies and gentlemen, that is not what this revolution is about. That is not what young people all across this country—with brilliant new ideas to further transform our American economy online—want to have as an option.

What will happen now is you will have an idea, but if you can’t raise the money to pay for this fast-lane broadband access, that is going to throttle back your ability to be able to move in this agile way that the internet provides. Instead of agility, it will be hostility that you will be feeling as an entrepreneur, feeling you can’t take the risk—you are not sure you can reach your consumer—rather than ensuring that you can pay the broadband company—rather than ensuring that you can reach all these consumers for your revolutionary idea.

This internet day of action we are having across the country is going to raise from 5 million, to 6 million, to 7 million, to 10 million, to 15 million, to 20 million, the number of Americans who are going to be saying to the Federal Communications Commission and to the U.S. House and Senate that something is fundamentally wrong with this FCC and its potential change of the internet—Open Internet Order.

If they do move, we are going to court. If they do move, we are going to be taking this all the way to the Supreme Court of the United States of America because that is how important this issue is. It goes right to the fundamental nature of what has happened to the internet in the last generation. And that is all it took. We moved from the black rotary dial phone to a world where everyone is carrying a computer in their pockets. It happened just like that. It could have happened before if it wasn’t possible because the broadband companies didn’t even exist. There were just telephone companies and cable companies that did not have a vision of the future. Their vision of the future is a lot like their vision of the past before that law passed, which is, let’s go back to total control by a small handful of companies in our communications cocktail, rather than thinking of the future, of tens of thousands, hundreds of thousands of smaller companies can be started up in dorm rooms and garages across our Nation.

This is a dangerous and harmful plan the FCC has on the books today. Today’s day of internet action will be increasing as each moment goes by between now and today they make that decision at the FCC.

Mr. President, I yield back the remainder of my time.

The PRESIDING OFFICER. The Senator from Connecticut.

Mr. BLUMENTHAL. Mr. President, I want to build on the last point my colleague—a great advocate and champion of net neutrality—made about the rule of law and about the need to go to court when there is utter disrespect and contempt for the rule of law, which is reflected in the prospective plan of the Chairman of the FCC to undo that agency’s net neutrality rules. It reflects an astonishing lack of respect and care for that agency’s rules—in contrast to the FCC’s use of discretionary rulemaking—under the Administrative Procedure Act.

Chairman Pai wants to overturn a rule that was established after a fact-finding—an elaborate process of comment and response—without going through that same process that is required under the Administrative Procedure Act, a fact-based docket that requires him to show that something has changed—not a little bit; something significant has changed—in the market since the Open Internet Order was established in February 2015. The burden is on the FCC to make that finding. That finding is impossible, which is why they are avoiding the attempt to do it.

The fact is, the Open Internet Order was established based on 10 years of evidence about how internet access service provides people with broadband. It has been upheld by the DC Circuit Court of Appeals twice over the past year. The thicket of law that the Chairman wants to simply leap over—it is not within his discretion to do.
The most recent evidence shows that net neutrality has not inhibited net-work investment at all, in contrast to Chairman Pai's claims. According to statements this year by the internet service providers—AT&T, in fact, is expanding fiber deployment and calling fiber a growth opportunity. Comcast is saying that it doubles its network capacity every 18 to 24 months. Verizon is announcing a new $1 billion investment in cable. That is why we are here say-ing we will not and we cannot allow Chairman Pai to succeed in this plan to gut neutrality at the behest of big cable companies.

I am proud to speak today in support of the Day of Action to Save Net Neu-trality and against the FCC proposal to undo the Open Internet Order because it is really a consummate pro-consumer measure. The Open Internet Order serves the best interests of con-sumers directly but also the best inter-ests of competition in promoting innova-tion and insights that benefit con-sumers, as well as the products and services that companies generally pro-vide.

The Open Internet Order created three bright-line rules: No blocking, no throttling, and no pay prioritization. These rules apply to both fixed and mo-bile broadband service, which protects consumers no matter how they access the internet—on a desktop or a mobile service. Consumers deserve equal access, an open platform—no walls benefiting the companies that may want their gardens walled in. The walls are against consumer interest, and breaking down those walls is what the open internet rule sought to do.

It also has real First Amendment sig-nificance. In one of the most recently proposed megamergers—AT&T and Time Warner—clearly content, access, and net neutrality are at stake. The merger gives the combined company, if the merger is approved, both the incentive and the means to throttle First Amendment expression. There have been reports that the White House will use this merger, in fact, to throttle the First Amendment rights of CNN, which is owned by Time Warner. This would be a direct threat to all First Amend-ment liberties.

Using antitrust policy and power to diminish the threat of the rights of free expression would be a grave disservice to this country, as well as the rule of law. That is why I have written to the nominee for the Department of Justice Antitrust Division chief, the Assistant Attorney General for Antitrust, Makan Delrahim, and asked for a meeting so he can ensure us that, in fact, antitrust policy will be independently enforced, that these reports do not reflect his view or the administration policy. I want him to assure us that this merger will not be used to influence or impede any media outlet.

But access and an open internet are principles that go beyond the enforce-
I also want to make clear what our challenge is going to be about because the Federal Communications Commission—Senator BLUMENTHAL talked about it and others—is going to be making decisions on this before too long. We know where the votes are. This is going to be a long battle, but one of the reasons I wanted to come to the floor today is to say that this is another one of these issues that is going to show that political change doesn’t start in Washington, DC, and then trickle down to people. It will be bottom-up, as more and more Americans find out what is at stake here.

A few years back, I would say the Presiding Officer of the Senate—and I see my colleague from the Finance Committee here, as well—and my colleagues will remember the PIPA and SOPA bills. These were the bills, PIPA and SOPA, that were anti-internet bills. As with so much, people can have a difference of opinion, and the sponsors go out to fight piracy. As we have to fight piracy, people rigging everybody online. To fight piracy, we will use these two bills to kind of change the architecture of the internet, particularly the domain name system, which is basically the phone book of the internet. I looked at it, and I said: We are all against piracy. We are against people selling fake Viagra, or whatever it is, online, but why would we want to wreck the architecture of the internet in order? Is that what we want? There are other kinds of remedies.

So I put in a bill with a conservative Republican in the other body to come up with an alternative approach, and I put a hold on PIPA and SOPA. Here in the Senate, at that time, 44 Senators were cosponsors of that bill. That is an army—out of the 100, 44 Senators.

Everybody said: You know, Ron is putting a hold on it, and, well, if you have more time online in a week than they do, then why would we want to change the way that they use the internet? Just as we are doing with this situation where people want to unravel real net neutrality.

So I was determined to oppose my hold—in effect, lift my neutrality. I want to be in the fight for real net neutrality, which is what you have after you pay your internet access fee, and you get to go where you want, when you want, and how you want, and everybody is treated equally in those efforts. For all of those reasons, I moved to support the neutrality that we are in for a long battle. We know where the votes are at the Federal Communications Commission, but that is just the beginning. That is just the beginning.

So I wish to say again that without real strong net neutrality, which is what we have today, we will not have a free and open internet for all Americans to enjoy. So I come to the floor to say this is going to be a long battle. Nobody thought we had a prayer to walk past the protection that was PIPA and SOPA, and I am sure a lot of people are saying that this is another one where the powerful interests are going to win.

I say to the Senate again: Not so fast. You are going to see the power of Americans speaking out. I urge all the people of this country who are following what goes on in the Senate today and in the days ahead to be part of this effort, because I think if they do, if we show that political change isn’t top-down but bottom-up, it is going to be a long battle, but we will win, and our country will keep a bedrock principle of the free and open internet, which is real net neutrality.

I yield the floor.

The PRESIDING OFFICER (Mr. LEE). The Senator from Texas.

HEALTHCARE LEGISLATION

Mr. CORNYN. Mr. President, as we continue to discuss the Better Care Act, which is an alternative bill that we will propose next week and vote on, which takes the disaster known as the American Care Act, which is an alternative bill that we will propose next week and vote on, which takes the disaster known as ObamaCare which for millions of Americans has led to sky-high premiums and unaffordable deductibles, if they can even find an insurance company that will sell them an insurance policy—which we will propose a better care act, as we call it, a perfect care act but a better care act.

It would be even better if our Democratic colleagues would join us and work with us in this effort, but as we have to find out, they are unwilling to acknowledge the failures of the ObamaCare. So we are forced to do this without their assistance. It would be better if it were bipartisan, if they would join us, but they have made it very clear that they are not interested in changing the broken structure of the ObamaCare. What I predict is that what they would offer is an insurance company bailout, throwing perhaps hundreds of billions of dollars at these insurance companies in order to sustain a broken ObamaCare that will never work—no matter how much money you throw at it. So people will still be hurt by the failures of the ObamaCare unless we will have the courage to step forward and to say we are going to do the very best we can with the tough hand we have been dealt to help save the American people who are being hurt.

Basically, there are four principles involved. One is we want to stabilize the individual insurance market, which is the one that insurance companies are fleeing now because they are bleeding red ink. They can’t make any money, and they are tired of losing money so they basically pull their roots up and leave town, leaving customers in the lurch.

Secondly, we want to make sure we actually lower insurance premiums. Under the original discussion draft bill that was introduced a few months ago, the Congressional Budget Office said we will see premiums go down as much as 30 percent over time. Now, I wish I could say we were going to be able to have an immediate effect on those premiums, but the truth is this is much better than our friends across the aisle have offered us with the offer to basically sustain a broken ObamaCare system.

The third thing we want to do is protect people who might have their health insurance hurt or impeded by preexisting conditions. We want to maintain the current law so people are protected when they leave their work or when they change jobs.

The fourth is, we want to put Medicaid on a sustainable path. Medicaid is one of the three major programs, and now we spend roughly $400 billion on Medicaid in this country. Our friends across the aisle don’t want to do anything that would keep that from growing higher and higher and higher, to the point where basically the system collapses. We believe that is not the responsible choice. What we propose is to spend $71 billion more on Medicaid over the budget window and to work to transition those States that have expanded Medicaid and offer their people a better option in the private insurance area, but I just want to mention that I have shared a number of stories about, for example, a small business owner in Donana, TX, who was forced to fire their employees so they could afford to keep the doors open and provide health insurance for the remaining people. You have to ask: What in the world could lead us to a system which would discourage people from hiring more folks and basically put them in a position in which they had to let people go?

But that is what the employer mandate did under the ObamaCare. If you have more than 50 employees, you are subject to
the employer mandate. You get punished unless you make sure your employees are covered with insurance, and many times it is unaffordable so it had the perverse impact of small businesses saying: We can’t afford to grow the number of people who are working in our businesses, we are going to need to shrink it in order to avoid that penalty. Stories like this remind me of just how important our efforts are to repeal and replace ObamaCare.

The status quo is not working. In fact, every year ObamaCare gets worse for the millions of people in the individual market in particular. It is important that ObamaCare is not just about insurance. ObamaCare is about penalties that are being imposed on businesses that hurt their ability to grow and create jobs. That is one reason I believe that since the great recession of 2008, where ordinarily you would see a sharp bounce up in the economy, that the economy has been largely flat and has not been growing, in part, because of the penalties, mandates, and regulations associated with ObamaCare.

Not only has ObamaCare made health insurance more expensive while taking away choices, it has also compounded fundamental problems with important safety net programs like Medicaid. I wish to share a story from an emergency room employee in Lake Granbury, TX who wrote to me about the alarming trend she has noticed in the hospital where she works. She says, because fewer and fewer physicians will see a Medicaid patient, she has seen an influx of these Medicaid patients who ostensibly have coverage coming to the emergency room for their primary care. As she points out, this is not a good situation for patients and hospitals.

In my State, according to the latest survey of the Texas Medical Association, only 31 percent of doctors in Texas will see a new Medicaid patient. That may sound crazy, but let me explain why. Because Medicaid basically pays a physician about half of what private insurance pays when it comes to see a patient, many of them simply say: Well, I can’t afford to see a lot of Medicaid patients. I need to balance that or at least make sure I see enough private insurance patients to make sure I can keep the doors open and meet my obligations. What we haven’t seen and fewer and fewer doctors actually see Medicaid patients is, people end up showing up in the emergency room for their primary care because they can’t find a doctor to see them. The truth is, medical outcomes based on many studies that have been done in recent years are that Medicaid coverage in those instances can be no worse and no better than not having insurance at all. ObamaCare was put in place ostensibly to avoid reliance on emergency rooms for access to care, but actually not many fewer and fewer Americans have lived up to many of its promises and unfortunately making stories like this one commonplace.

I mentioned this earlier, but just to see the trend line, in 2000, 60 percent of Texas physicians accepted new Medicaid patients; today that number is 34 percent. I think I may have earlier said 31 percent. It is actually 34 percent, due to lower rates of provider reimbursement, but it has not been going anywhere. We want to make sure we preserve Medicaid for the people who actually need it the most. We are working to make it stronger, more efficient, and, yes, more sustainable. I guess our people live in a fantasy world, where they think we can continue to spend money we don’t have and there will never be any consequences associated with it. The fastest items of spending in the Federal budget are entitlement programs including Medicaid. Right now we are at $2 trillion. We have done a pretty good job—I know we don’t get much credit for it—we have done a pretty good job of controlling discretionary spending, but the 70 percent of mandatory spending, including Medicaid, has grown, on this average, about 5.5 percent a year. That can’t happen in perpetuity. Right now, we know we have $20 trillion, roughly, in debt—$20 trillion. It is frankly immoral for those of us who are adults today to spend money borrowed from the next generation and beyond because somebody ultimately is going to have to pay it back, and it is going to have real-world consequences.

So we have to be honest with ourselves and the people we represent that this situation is not sustainable. We have to make the millions of people today make sure the people who really need it—the fragile, elderly, disabled adults and children—that it is there for them, not only now but in the future. That is why we have been discussing ways we might strengthen the sustainability of Medicaid to ensure that families who actually need it can rely on it, and they don’t have the rug pulled out from under them. This requires doing some hard work of reforming the way States handle Medicaid funding.

For example, Medicaid, as is currently applied, States are only allowed to review their list of Medicaid recipients once a year, but a lot can happen in a period of a year. Somebody can get a job, and they may be no longer eligible based on the income qualifications for Medicaid. If they can only check once a year, then people remain on the rolls, even though they may no longer qualify. Regardless of whether somebody gets a job or moves or passes away or no longer needs Medicaid, they are still in the system, and there is nothing the States can do about it. We would like to change that. While it sounds like a simple matter, when the average Medicaid recipient in the State more than $9,000 each and as high as almost $12,000 per elderly individual, it adds up.

One of the things we saw that ObamaCare did in the States that expanded Medicaid coverage is that those States decided to cover single adults who are capable of working. This bill would also allow States to experiment with a work requirement as part of the eligibility for Medicaid. We are not mandating it, saying they have to do this, but allow the States to do it, then they can do so. We need to give the States the flexibility they need so they can use the Medicaid funding they have more efficiently so more people can get access to quality care.

I want to be clear: 4.7 million Texans rely on Medicaid. Of course, those rolls trend to churn based on people’s employment and their family circumstances. But, it is not real money anywhere. We want to make sure we preserve Medicaid for the people who actually need it the most. We are working to make it stronger, more efficient, and, yes, more sustainable. I guess our people live in a fantasy world, where they think we can continue to spend money we don’t have and there will never be any consequences associated with it. The fastest items of spending in the Federal budget are entitlement programs including Medicaid. Right now we are at $2 trillion. We have done a pretty good job—I know we don’t get much credit for it—we have done a pretty good job of controlling discretionary spending, but the 70 percent of mandatory spending, including Medicaid, has grown, on this average, about 5.5 percent a year. That can’t happen in perpetuity. Right now, we know we have $20 trillion, roughly, in debt—$20 trillion. It is frankly immoral for those of us who are adults today to spend money borrowed from the next generation and beyond because somebody ultimately is going to have to pay it back, and it is going to have real-world consequences.

We know that since the great recession, the Federal budget has grown at an interest rates very low through their monetary policy, but we know as well that as the economy tends to get a little bit better and unemployment comes down, they are going to begin inching those interest rates up little by little, which means we are going to end up paying the people who own our debt, our bondholders, more and more money strictly for the purpose of giving them a return on their investment for the debt they buy. This is an opportunity for us, not only to not only to put our money on a sustainable path, to do the responsible thing, to give the States ultimate flexibility in terms of how they handle it, it is also a matter of keeping faith with the next generation and beyond when it comes to this unsustainable debt burden.

I hear people talk about slashing Medicaid despite the fact that the Congressional Budget Office estimates that Medicaid spending will grow by $71 billion over the next decade. I have been going to Washington, DC, is that considered a cut, where spending next year exceeds what it is this year and the next and so on, and it goes up by $71 billion. Yet you will hear people come to the Senate Floor and say that is a cut and that we are slashing Medicaid. It is nothing of the kind.

To me, the choice is clear. Do we want to continue with the failures of ObamaCare or do we want to do our work to provide better choices and better options?

Do we want to continue to allow the status quo, which is hurting families,
putting a strain on doctors and our emergency rooms and hospitals like I mentioned in Lake Granbury or do we actually want to address the fundamental flaws of our healthcare system? I wish we could do something perfect, but certainly with the constraints imposed by the fact that our Democratic friends are not willing to lift a finger to help, and given the fact that we have to do this using the budget process—pretty serious constraints. We basically have to do this with one arm tied behind our back, but we are going to do the best we can because we owe it to the people we represent. I encourage our colleagues on both sides of the aisle to try to take a fresh look at this and figure out how we can be part of the solution, not just to compound the problem.

There is one thing I haven’t mentioned that I am particularly excited about in the Better Care Act: that is, for States like Texas that did not expand Medicaid to cover able-bodied adults in the 100 to 138 percent of Federal poverty level, in the Better Care Act, they would lose access to private health insurance coverage and access for the first time. About 600,000 Texans—low-income Texans—who, for the first time under the provisions of this bill, will have access to a tax credit, and the Innovation and Stability Fund and something called the section 1332 waivers, will be able to design programs which will make healthcare more affordable in the private insurance market.

One reason people prefer the private insurance market to Medicaid is for the reason I mentioned earlier, that Medicaid reimburses healthcare providers about 50 cents on the dollar compared to private health insurance. This actually will provide them more access to more choices than they have now. Certainly, for that cohort of people between 100 percent of Federal poverty and 138 percent of Federal poverty in those States that didn’t expand Medicaid.

I am excited about what we are trying to do here and its potential. Again, to stabilize the markets, which are in meltdown mode right now and we all know are unsustainable, our friends across the aisle will say: We will talk to you if you take all the reforms off the table, which translates to me: We will talk to you about bailing out a bunch of insurance companies but doing so would agree with the basic underlying pathology in the system. So we are going to do that in our bill, the Better Care Act.

Secondly, we want to make sure that we do everything in our power to bring down costs. The President cares passionately about this. This may well be the litmus test for our success. Under the discussion draft we released earlier, the CBO said that in the third year, you could see premiums go up 20 percent lower, but we would like to see even more choices and premiums lower than that and more affordable.

The third thing our Better Care Act will do is to protect people against pre-existing conditions. Right now, people sometimes refuse to or are afraid to leave their jobs in search of other jobs because, if they have preexisting conditions, then they cannot get coverage for a period of time. That is the pre-existing condition exclusion. We would like to protect people against that eventuality so that people do not have to be worried about changing jobs or losing their jobs and losing their coverage.

Fourth, as I have taken a few minutes to talk about here today, we want to put Medicaid—one of the most important safety net programs in the Federal Government—on a sustainable path, one that is fair to the States that expanded Medicaid under the Affordable Care Act and to those that did not. I think any fair-minded person who is looking at what we have proposed here would say that it is not perfect but that it, certainly, fits the name that we have ascribed to it. It is a better alternative than people have under the status quo.

I urge all of our colleagues to work with us in good faith to try to improve it.

Here is the best news of all, perhaps, to those who would have other ideas. We do have an opportunity to have an open amendment process, and sometimes that does not happen around here. For one of those open amendments, you can do it or you cannot do it. You cannot change it. All you can do is vote for it or vote against it.

That is not what we are going to do. We are going to have an open amendment process. As long as Senators have the energy to stay on their feet and offer amendments, they can get votes on those amendments. I cannot think of a better way to reflect the will of the Senate and to come out with the very best product that we can under the circumstances.

We are on a trajectory next week to begin this process and will have, probably, some very late nights and early mornings come Thursday and Friday. 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. REED. Mr. President, I would like to take a moment to talk about the ongoing efforts by the Senate Republicans to take away health insurance from millions of Americans by repealing the Affordable Care Act.

I was here on the floor just a couple of weeks ago reading letters from my constituents, and we have benefited from the ACA and what TrumpCare would mean for them based on what we had seen of their bill so far.

Since then, my colleagues on the other side of the aisle have continued forging ahead in their effort to repeal the ACA, in spite of overwhelming opposition. Indeed, nearly every major healthcare organization representing patients, doctors, nurses, and hospitals, among others, have come together in a united effort, and that is on top of the millions of Americans who know firsthand how devastating TrumpCare would be for them and their families.

Senate Republicans are working on two fronts to convince their colleagues to vote for this disastrous bill. Unfortunately, their so-called “fixes” are not improvements. That is because, in my view, TrumpCare is fatally flawed and cannot be fixed. My constituents know better and have continued to write and call—even stopping me in stores and on the streets—to express their opposition and fear, quite frankly, of all versions of the Senate TrumpCare bill.

For example, my Republican colleagues are looking to add a provision that would bring us back to the days when insurance companies could deny coverage or charge exorbitant amounts for those with preexisting conditions. The Affordable Care Act ended this practice once and for all, we hope, and I can’t imagine why my colleagues want to bring back those discriminatory policies. However, the amendments that several Senators have proposed would do just that. They would allow insurance companies to sell plans in the individual market with no protections for those with preexisting conditions, which would create a death spiral in the marketplace, so that the very people who need health insurance the most would be priced out entirely.

Just last week, I heard from Anne in North Smithfield, RI, about this very issue. Anne said:

I am the parent of a childhood cancer survivor. The last 11 months of my life have been fighting alongside my warrior, my hero, my 9-year-old osteosarcoma survivor, Julia. She loves unicorns, horses, the beach, and going for walks. Due to no fault of her own, she hasn’t been able to walk for the past 11 months.

I am writing to ask for your support to ensure that all children fighting cancer have access to affordable, quality healthcare. If enacted into law, the current proposal for the healthcare bill will have devastating impacts on the hundreds of thousands affected by childhood cancer. Without quality health insurance and access to treatment, my child would not have survived.

Anne went on to explain that the Republican efforts to undermine pre-existing conditions protections would be devastating for childhood cancer survivors. Even parents who get their insurance through their employer would be at risk. Anne pointed out that nearly half of families of children with cancer will experience gaps in coverage because one or both parents often need to stop working or reduce their hours to get coverage for their child.

Further, TrumpCare erodes other critical consumer protections by allowing annual and lifetime limits on care.
Anne continues her message:

Additionally, childhood cancer patients must be assured of access to essential health benefits without the threat of lifetime or annual caps that would effectively price patients out of treatments. Thirds of childhood cancer survivors will develop serious health conditions from the toxicity of childhood cancer treatment or other physical health conditions as well, which would still go unaddressed in this so-called fix. We will be setting people up for failure if we provide immediate drug treatment services that cut funding to the other mental and physical healthcare services they need.

An opioid fund alone will not solve this public health crisis and, in fact, would be a drop in the bucket compared to how the rest of this bill would worsen the crisis.

The cuts to Medicaid under the Senate TrumpCare bill are beyond repair. The Senate TrumpCare bill fundamentally changes the structure of the Medicaid Program, making massive cuts, representing a 35-percent cut over the next two decades. Simply put, this will end the Medicaid Program as we know it, which will hurt not only those suffering from the opioid crisis but also seniors, children, and people with disabilities. We may see Republicans try to spread out this harm over more years to hide the damage, but do not be fooled. Whether they make massive cuts to Medicaid in 2022 or 2026, for that matter, the cuts will be devastating.

In short, no fix can undo the damage this bill will cause. This bill is a massive tax break for the wealthiest Americans at the expense of everyone else. No amendment or tweak to the bill will change that.

Sharon from Wakefield, RI, wrote to me just a couple of days ago and summed this up very well. She said, I do not think the American Health Care Act because it is not a health care plan, it is a tax cut for the rich. I am 67 years old, and I have a mild version of muscular dystrophy, and I have Medicaid. If the GOP wants to end Medicaid, I am asking you to vote NO on the bill.

Republicans must abandon this effort and come to the table to work with Democrats on a new path forward. Let’s have productive conversations about how we can improve access to care and bring down costs. Let’s harness this interest in improving access to drug treatment and work together on those efforts. But, coupled with the TrumpCare bill, those efforts will not mitigate the damage this bill will inflict on my constituents and those across the country.

I hope those on the other side of the aisle who have expressed misgivings will oppose TrumpCare in all of its forms so that we can work together on a bipartisan solution and attempt to do something positive for our constituents.

With that, Mr. President, I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The assistant bill clerk proceeded to call the roll.

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

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

Mr. WHITEHOUSE. Mr. President, I ask unanimous consent to speak for up to 10 minutes as in morning business.

The PRESIDING OFFICER. Without objection, it is so ordered.
In closing, the Heitkamp-White-Stephens bill, to provide a tax credit for carbon capture and carbon utilization. I am willing to work with Republican colleagues to find a way to pay our nuclear fleet for the carbon-free nature of its nuclear power.

It is crazy to be closing safely operating nuclear power facilities just because they get zero economic value for the carbon-free nature of their power. The carbon-free nature of power has significant value. That is why we are offering in our legislation a tax credit of $30 to $50 per avoided ton of carbon dioxide emissions. That implies that an avoided ton of carbon dioxide emissions is worth $30 to $50.

If nuclear power avoids that, I am willing to work with Republican colleagues to figure out a way so that our nuclear fleet can enjoy the actual economic advantage of the carbon-free power they produce.

We close a nuclear plant so we can open a natural gas plant which pollutes more than the nuclear plant because the economics are so fouled up that the nuclear plant gets no value for carbon-free power and the natural gas plant pays no costs for the harm of its carbon emissions. It is economic madness.

We must find a way to pay our nuclear fleet for the carbon-free nature of its nuclear power.

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

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

In 2008, Liu Xiaobo coauthored "Charter 08," a manifesto that shined a light on the Communist Party of China and its totalitarian abuse of power. Though many brave souls signed their names and their lives to that document, Dr. Liu’s name was at the very top. For this reason, he received the Nobel Peace Prize. He also received charges of “inciting subversion of state power” and an 11-year prison sentence.

It is impossible to neglect the stark irony: a man dedicated to nonviolence, motivated Dr. Liu’s tremendous courage and self-sacrifice was a determinate his work on "Charter 08," a manifesto that shined a light on the Communist Party of China and its totalitarian abuse of power. Though many brave souls signed their names and their lives to that document, Dr. Liu’s name was at the very top. For this reason, he received the Nobel Peace Prize. He also received charges of “inciting subversion of state power” and an 11-year prison sentence.

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Mr. CRUZ. Mr. President, I stand here today on behalf of a hero of freedom and democracy in the People’s Republic of China, who his name and his life to that document, Dr. Liu’s name was at the very top. For this reason, he received the Nobel Peace Prize. He also received charges of “inciting subversion of state power” and an 11-year prison sentence.

It is impossible to neglect the stark irony: a man dedicated to nonviolence, motivated Dr. Liu’s tremendous courage and self-sacrifice was a determination to remember what the People’s Republic of China desperately wants the world to forget: Tiananmen Square. A poet, author, and political scientist, Dr. Liu was, in 1989, a visiting scholar at Columbia University, but even the protests broke out in Beijing in June of that year, he raced back to China to support them. He staged a hunger strike in Tiananmen Square in the midst of the historic student protests and insisted that they would remain nonviolent in the faces of the tanks, which the Chinese military deployed to smash them.

In 1996, the party subjected him to 3 years of "reeducation through labor" for continuing to question China’s one-party system.

In 2008, on the eve of the 100-year anniversary of China’s first Constitution and the 30-year anniversary of Beijing’s Democracy Wall movement, Dr. Liu dedicated his work on "Charter 08" to the martyrs at Tiananmen Square.

Today, 8 years into his unjust imprisonment, Dr. Liu needs our help more than ever. Last month, it was revealed that Dr. Liu has contracted an aggressive, late stage form of liver cancer. Although PRC authorities “released” him “on medical parole,” both Liu Xiaobo and Liu Xia linger without freedom. Even worse, Liu Xiaobo is dying.

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

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

Calling for the Release of Liu Xiaobo

Mr. CRUZ. Mr. President, I stand here today on behalf of a hero of freedom and democracy in the People’s Republic of China, Liu Xiaobo. His wife Liu Xia are the faces of liberty in China. They have sacrificed comfort and normalcy to chart a path toward political liberalization. For that, they have been detained, imprisoned, and abused.

In 2008, Liu Xiaobo coauthored "Charter 08," a manifesto that shined a light on the Communist Party of China and its totalitarian abuse of power. Though many brave souls signed their names and their lives to that document, Dr. Liu’s name was at the very top. For this reason, he received the Nobel Peace Prize. He also received charges of "inciting subversion of state power" and an 11-year prison sentence.

It is impossible to neglect the stark irony: a man dedicated to nonviolence, motivated Dr. Liu’s tremendous courage and self-sacrifice was a determination to remember what the People’s Republic of China desperately wants the world to forget: Tiananmen Square. A poet, author, and political scientist, Dr. Liu was, in 1989, a visiting scholar at Columbia University, but even the protests broke out in Beijing in June of that year, he raced back to China to support them. He staged a hunger strike in Tiananmen Square in the midst of the historic student protests and insisted that they would remain nonviolent in the faces of the tanks, which the Chinese military deployed to smash them.

In 1996, the party subjected him to 3 years of "reeducation through labor" for continuing to question China’s one-party system.
His condition is critical, and we are running out of time to act on his behalf. Although Chinese authorities compelled the Lius to sign an affidavit allegedly attesting to their satisfaction with care they have received in China and their wish to remain there, Liu Xia has communicated to their attorney their desire to spend Liu Xiaobo’s final days in America. PRC doctors insisted that Dr. Liu was too ill but medical experts from the United States and Germany—one of them being Dr. Joseph Herman of the MD Anderson Cancer Center of the University of Texas—visited Dr. Liu and attested to the contrary. Issuing a joint statement, they agreed that Dr. Liu “can be safely transported with appropriate medical evacuation care and support.” They then issued this stark warning: “However, the medical evacuation would have to take place as quickly as possible.”

The situation goes beyond Liu Xiaobo. Liu Xia’s livelihood is inextricably linked to the ability of the two of them to leave China. Due to his imprisonment, Liu Xiaobo has been unable to receive his $1.5 million share of the prize money from the Norwegian Nobel Committee. The holdup of transferring the funds is merely routine: a signed form from Dr. Liu and an attestation of the two of them to leave China. No Member can explain the success of this tactic better than my good friend Senator Grassley, the senior Senator from Iowa, who led a very similar effort in 1984 to rename the street in front of the Soviet Embassy after Andrei Sakharov, the famed Soviet dissident. Senator Grassley led that effort under Ronald Reagan, and when the street was renamed, it meant any Soviet had to write to their Embassy and say “Where exactly do I find Andrei Sakharov?”

The Lius have suffered over the past 28 years in prison, through the one action can undo the turmoil that one of them being Dr. Joseph Herman of the MD Anderson Cancer Center of the University of Texas—visited Dr. Liu and attested to the contrary. Issuing a joint statement, they agreed that Dr. Liu “can be safely transported with appropriate medical evacuation care and support.” They then issued this stark warning: “However, the medical evacuation would have to take place as quickly as possible.”

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I urge my colleagues on both sides of the aisle—Republicans and Democrats: If there is an issue that should unite us all, it is that a Nobel Peace laureate so long deprived of peace and democracy should not be wrongfully imprisoned in Communist China. That should bring us together—and the full force of the United States.

I commend President Trump for leading on this issue, and I am hopeful that China will see its way to doing the right thing. I yield the floor.

Mr. McCAIN. Mr. President, as we know, yesterday the majority leader announced that he plans to delay the August recess for several weeks. He stated that this delay is necessary in order to “complete action on important legislative items and process nominees that have been stalled by a lack of cooperation from our friends on the other side of the aisle.” Those are the majority leader’s words.

I have no problem with the leader’s decision. I will happily stay here an additional 2 weeks. I will stay 3, 4, or even 5 weeks as long as we have a plan to address the serious issues that face this Nation.

My friends, when the Senate completes its work this week, we will have considered a whopping total this entire week of three nominations, one of them being a noncontroversial district judge nominee on which the majority leader was forced to file cloture. That cloture vote was unanimous, 97 to 0. Yet we were still forced to burn postcloture time—30 hours—before being allowed to vote today on his confirmation—a vote that was again unanimous at 100 to 0. What? That is the way we are doing business in the Senate? I will repeat. The vote to stop debate was 97 to 0 after 30 hours. After we burned 30 hours, then we were allowed to vote earlier today—a vote that was again unanimous at 100 to 0. Why?

We have a war on. We have men and women in harm’s way. We have nominees stacked up, and so we are spending an entire week with three nominees. So with an incredible act of another chapter in “Profiles in Courage,” rather than say, OK, we will stay here
Friday, we will stay here Saturday, we will stay here Sunday, but by God we are going to do the people’s business—we are not doing the people’s business. I can’t go through all the machinations between the Democratic leader and our majority leader, and I can’t go through all the roadblocks from the other side of that, but I am supposed to go back and speak to a high school civics class and say: I am happy to be here. I have had a very tough week this week in the Senate, my young friends who may want to be engaged in public service someday, and we voted on a district judge 97 to 0. Thirty hours later, we were allowed to vote on his nomination, and the vote was 100 to 0.

That is what the Senate is supposed to do? There was no reason why we needed to take 3 days on this nominee. I say to my friend the Democratic leader and I say to the Republican leader: This type of obstruction has gone on long enough, and it has to stop.

As I said, I am happy to stay here for the entire August recess to do the work the American people sent us here to do, but we must first have a plan of what we are going to do and how. What are we to tell the American people if we stay here for several weeks, have no legislative plan, and accomplish nothing? We have been in for 6 months now. What have we done? We have done Gorsuch, and we have done Gorsuch, and we have repealed some regulations—all of it with my party in control of all three branches of government. I am not proud to go back to Arizona and talk about that record of nonaccomplishment.

Right now, we have no consensus on how to repeal and replace the failed policies of ObamaCare. I can’t tell you the number of hours I have heard the same arguments go around and around and around. As far as I know, there is no consensus on how to best fund the government, no plan to do a bipartisan budget deal, and no path forward on appropriations bills. This is disgraceful.

What I am asking for is simple. If we are going to stay here to work, then let’s get some work done. Why aren’t we working now? Why aren’t we working tonight? There are nominees in the Department of Defense who are before this body, and we are in a vote, and I want to know what are we doing? We are doing a vote on a district judge that we took 30 hours—30 hours—to discuss.

If we are going to stay here, let’s get the work done. Let’s come in early, stay late, negotiate a healthcare bill, and process nominations to make sure the administration is adequately staffed so the executive branch can function. Let’s renew FDA user fees to streamline the regulatory process for lifesaving prescription drugs. Let’s fund the Promise Zone Program to ensure our veterans are able to access care in their communities. Let’s address the debt limit before we default on our payments. Let’s debate, amend, and pass the fiscal year 2018 National Defense Authorization Act. Perhaps, most importantly, let’s get to work on the budget so we can begin moving individual appropriations bills to fund the government and not have to resort to a continuing resolution or omnibus.

To those who may be watching, the fact is that a continuing resolution and an omnibus means that we have two choices—yes or no. We don’t have an amendment. We don’t have a way to actually talk about trillions of dollars, but we are going to wait until we are right at the edge of the cliff, and then my distinguished friends and leaders on both sides will say: You have to vote aye; you have to vote aye because the government is going to be shut down. I am tired of that choice. We know it is coming. We know the cliff is here. So what did we do this week? We spent 30 hours discussing a district judge—30 hours debating a district judge. Is that the right use of American tax payers’ dollars?

Have we no shame? The Senate Armed Services Committee successfully reported out the 2018 National Defense Authorization Act 27 to 0, supporting $650 billion for the base budget for national defense and an additional $60 billion for Overseas Contingency Operations. At these levels, the national defense budget would be within the Budget Control Act spending cap. To put it another way, there was unanimous, bipartisan support for an increase in defense spending of the Budget Control Act, capped by more than a quarter of a trillion dollars. Unless and until this body gets to work on a bipartisan budget deal, we will continue down the path we have been on for years, lurching from crisis to crisis, with no strategy for how to meet our budget responsibilities or fund our national security needs.

My friends, colleagues, and fellow Americans, we must summon the political courage to do the hard work the American people expect of us to do a continuing resolution or omnibus and send the budget to the President to be signed by the President. If we do not, the American people will be left with no choice but to default on our debt. We are 2 months away from the start of the fiscal year. We know that a budget deal must be done. The failure to begin negotiations means we are knowingly driving toward an outcome that will fund our military at levels below the Budget Control Act caps, and that is not acceptable.

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who occasionally has a good idea—once every decade—asked the group: How many of you are here not for the first time? Almost everybody in that room raised their hand.

He said: How many of you have been more than once home, away from the men in that room, raised their hand.

He said: How many of you have been here multiple times? A good number of them raised their hand.

The point is that they are out there serving time after time after time, away from their families, working more than maybe 2 weeks in August. And what are we doing? What are we doing for them?

There are a lot of things they need, and there are a lot of things we need to give them. Yet, somehow, we can't see our way clear—Republicans and Democrats—to sit down and do the right thing for these men and women—to do the right thing so they can win.

We now have a new President, a new National Security Advisor, and a new Secretary of Defense. I don't agree with this President very often, but I do know that this President is committed to rebuilding the military and a winning strategy. The strategy for the last 8 years has been "don't lose." I know that General Mattis and General McMaster are people who want to win, and they have a strategy to win, and we have to be of assistance to them to provide the men and women with what they need to win.

So I ask my colleagues, with passion, that we sit down and figure out the budget deal, move forward with it, and not spend a week like we just spent this week with 30 hours in order to confirm one district judge.

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

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

LEGISLATIVE SESSION

MORNING BUSINESS

Mr. PERDUE. Mr. President, I ask unanimous consent that the Senate be in a period of morning business, with Senators permitted to speak therein for up to 10 minutes each.

Mr. ENZI. Mr. President, I wish to submit the Senate’s scorecard from the budget scorekeeping report for July 2017. The report compares current-law levels of spending and revenues with the amounts the Senate approved in the budget resolution for fiscal year 2017, S. Con. Res. 3. This information is necessary for the Senate Budget Committee to determine whether budget points of order lie against pending legislation. The Republican staff of the Senate Budget Committee and the Congressional Budget Office, CBO, prepared this report pursuant to section 308(b) of the Congressional Budget Act (CBA).

My last filing can be found in the Record on June 7, 2017. The information contained in this report captures legislative activity from that filing through July 10, 2017.

Republican Budget Committee staff prepared tables 1 through 3 of this report. They remain unchanged since my last filing.

In addition to the tables provided by Budget Committee Republican staff, I am submitting CBO tables, which I will use to enforce budget totals approved by the Congress.

CBO provided a spending and revenue report for fiscal year 2017, which helps enforce aggregate spending levels in budget resolutions under CBA section 311. CBO’s estimates show that current-law levels of spending fiscal year 2017 are below the amount assumed in the budget resolution by $303 million in budget authority and $6.4 billion in outlays. CBO also estimates that revenues are $1 million above assumed levels for fiscal year 2017, but $21 million below assumed levels over the fiscal year 2017–2026 period. Social Security levels are consistent with the budget resolution’s fiscal year 2017 figures.

CBO’s report also provides information needed to enforce the Senate pay-as-you-go, PAYGO, rule. The Senate’s PAYGO scorecard currently shows increases of $226 million over the fiscal year 2016–2021 and $277 million over fiscal year 2016–2026 periods. For both of these periods, outlays have increased by $201 million, while revenues decreased by $25 million over the 6-year period and $26 million over the 11-year period. The Senate’s PAYGO rule is enforced by section 201 of 8. Con. Res. 21, the fiscal year 2008 budget resolution.

Finally, included in this submission is a table tracking the Senate’s budget enforcement activity on the floor. No budget points of order have been raised since my last filing.

All years in the accompanying tables are fiscal years.

I ask unanimous consent that the tables be printed in the Record.

There being no objection, the material was ordered to be printed in the Record, as follows:

TABLE 1.—SENATE AUTHORIZING COMMITTEES—ENACTED DIRECT SPENDING ABOVE (+) OR BELOW (−) BUDGET RESOLUTIONS—Continued

<table>
<thead>
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<th></th>
<th>2017</th>
<th>2017–2021</th>
<th>2017–2026</th>
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<tr>
<td>Outlays</td>
<td>0</td>
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<td>Banking, Housing, and Urban Affairs</td>
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<tr>
<td>Commerce, Science, and Transportation</td>
<td>Budget Authority</td>
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<tr>
<td></td>
<td>Outlays</td>
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<td>0</td>
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<td>Energy and Natural Resources</td>
<td>Budget Authority</td>
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<tr>
<td>Environment and Public Works</td>
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<tr>
<td>Homeland Security and Governmental Affairs</td>
<td>Budget Authority</td>
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<td></td>
<td>Outlays</td>
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<tr>
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<td>Budget Authority</td>
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<td>0</td>
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<tr>
<td>Labor, Health and Human Services, Education and Related Agencies</td>
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<tr>
<td></td>
<td>Outlays</td>
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<tr>
<td>Military Construction and Veterans Affairs</td>
<td>Budget Authority</td>
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<tr>
<td></td>
<td>Outlays</td>
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<tr>
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<td></td>
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<tr>
<td>Total</td>
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<tr>
<td>Outlays</td>
<td>39</td>
<td>964</td>
<td>292</td>
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</tbody>
</table>

TABLE 2.—SENATE APPROPRIATIONS COMMITTEE—ENACTED REGULAR DISCRETIONARY APPROPRIATIONS 1 (BUDGET AUTHORITY, IN MILLIONS OF DOLLARS)

<table>
<thead>
<tr>
<th></th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Security 2 Nonsecurity 2</td>
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<tr>
<td>Statutory Discretionary Limit</td>
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<tr>
<td>Amount Provided by Senate Appropriations Subcommittees</td>
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</tr>
<tr>
<td>Agriculture, Rural Development, and Related Agencies</td>
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<tr>
<td>Commerce, Justice, Science, and Related Agencies</td>
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<tr>
<td>Financial Services and General Government</td>
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<td>Homeland Security</td>
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<tr>
<td>Interior, Environment, and Related Agencies</td>
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<tr>
<td>Labor, Health and Human Services, Education and Related Agencies</td>
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<tr>
<td>Legislative Branch</td>
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<td>Military Construction and Veterans Affairs, and Related Agencies</td>
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<td>State, Foreign Operations, and Related Programs</td>
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<tr>
<td>Transportation and Housing and Urban Development, and Related Agencies</td>
<td>300</td>
</tr>
<tr>
<td>Total</td>
<td>551,068</td>
</tr>
</tbody>
</table>

1 This table excludes spending pursuant to adjustments to the discretionary spending limits. These adjustments are allowed for certain purposes in section 251(b)(2) of BBEDCA.

2 Security spending is defined as spending in the National Defense budget function (050) and nonsecurity spending is defined as all spending after security spending.