expression and association that are enshrined in Ecuador's Constitution. I hope he defends the right of a free press, an independent judiciary, and the right of civil society organizations to function without government interference. These rights are part of the foundation of the representative democracy referenced in the OAS Charter. The alternative is unaccountable government. That is, in fact, where Ecuador was heading, after President Correa orchestrated the adoption of a new constitution in order to run for reelection in 2009 and again in 2013.

I hope the result on April 2 will signify a commitment to uphold Ecuador's Constitution and the beginning of a new relationship with the United States, based on a common devotion to the fundamental rights of citizens.

THE RULE OF LAW IN GUATEMALA

Mr. LEAHY. Mr. President, I want to call the Senate's attention to the current situation in Guatemala, where upholding the rule of law has too often been the exception rather than the rule.

For centuries, most Guatemalans had no access to justice. This was exacerbated during—and in the years since—the civil war, when an estimated 200,000 people were killed or disappeared. Most of them were innocent victims of the armed forces, and only a small number of the military officers and their accomplices who were responsible have been punished. In fact, the armed forces and their benefactors have for the most part successfully avoided justice, by threatening prosecutors and witnesses and paying off judges.

At the same time, Guatemala is experiencing the corrosive effects of drug gangs, smugglers, and organized crime. Former President Perez Molina is under arrest, and other high-ranking officials have been implicated in corruption. Rampant gang violence and a lack of job opportunities have caused tens of thousands of Guatemalans, including unaccompanied minors, to seek safety and employment in the United States.

Two individuals, Thelma Aldana, Guatemala's Attorney General, and Ivan Velasquez, the head of CICIG, the International Commission Against Impunity in Guatemala, have been courageously investigating these high-profile cases and working diligently to bring those responsible to justice. Both are respected former judges, Aldana a Guatemalan and Velasquez a Colombian.

The United States, with the support of Democrats and Republicans in Congress, has provided funding to both of their offices.

It is difficult, dangerous work. They have received anonymous threats in an attempt to intimidate them, and there is a concern that President Morales may oppose the renewal of Mr. Velasquez's term of duty, which ends in September, or request the U.N. Secretary General to remove or replace Mr. Velasquez.

This would be of great concern because no democracy can survive without the rule of law, and there can be no rule of law without independent investigators, prosecutors, and judges.

In Guatemala, with its history of impunity, Thelma Aldana and Ivan Velasquez are making history by showing the Guatemalan people that justice is possible. It is possible even in cases in which the perpetrators are high-ranking government officials, members of their families, or others with wealth and power who have long evaded justice.

Guatemala needs our support to reduce poverty and malnutrition, improve education, combat crime, reform the police, and strengthen its economy and public institutions, but none of that can be achieved or sustained without political will and a transparent, accountable justice system. I know this from my own experience, first as a prosecutor, and more recently as the senior member of the Senate Judiciary Committee.

I have been here a long time, in fact longer than any other Senator. I know Guatemala's history and the daunting challenges it faces. Its people deserve better, and they need leaders who respect the rule of law.

If Guatemala's leaders support Thelma Aldana and Ivan Velasquez for as long they are willing to make the personal sacrifice and continue their important work, we will do our part by supporting the Alliance for Prosperity, but if there are attempts to undermine or curtail the work of these two outstanding prosecutors, then Guatemala's leaders should look elsewhere for support.

TRIBUTE TO DR. HARRY CHEN

Mr. LEAHY. Mr. President, for over a decade, Vermont has been named one of the healthiest States in the Nation. For those who know the tireless dedication of Vermont's Commissioner of Health, Dr. Harry Chen, this fact is not surprising. Dr. Chen recently made the difficult decision to not seek reappointment. He leaves behind a legacy which future leaders will undoubtedly follow.

Dr. Chen has long graced Vermont as a top leader in healthcare. Before his appointment as health commissioner in 2011, Dr. Chen served in the Vermont House of Representatives from 2004 to 2008 and in his last term was the vice chair of the Health Care Committee. In 2008, he was honored with the Physician Award for Community Service by the Vermont State Medical Society.

Prior to his election to the State legislature, Dr. Chen worked for more than 20 years as an emergency room physician and medical director at the Rutland Regional Medical Center. Dr. Chen also served on the clinical faculty at the University of Vermont's College of Medicine and as vice chair of the University of Vermont's board of trustees. He obtained his medical degree and completed his residency at the University of Oregon's school of medicine as chief resident.

Dr. Chen's work to improve public health awareness and education has long made Vermont a nationwide leader in healthcare. As Vermont's Commissioner of Health since 2011 and briefly as the interim Secretary of Health and Human Services from 2014 to 2015, Dr. Chen led the charge to expand public health education and resources across the State. Dr. Chen was especially instrumental in the fight against opioid and substance abuse. I was proud when he testified at the field hearing I held on the issue while ranking member of the Senate Judiciary Committee in 2014. In the years after, he worked to strengthen State resources for treatment and education programs. He has worked to improve the State's prescription drug monitoring system in order to curb harmful opioid prescribing and misuse.

Dr. Chen also led efforts to reduce tobacco, marijuana, and alcohol use among youth. In 2013, he and I worked to secure a $10 million grant from the Substance Abuse and Mental Health Services Administration, SAMHSA, to expand substance abuse efforts in Vermont among young adults at risk of developing habits in alcohol, tobacco, marijuana, and illicit drug use. Since his efforts, the conversation regarding youth substance abuse, especially on marijuana, has become a major public health discussion in the Vermont Statehouse and beyond. He also worked to expand nutrition education in schools and to increase awareness surrounding the importance of vaccines. For instance, 2 years ago, after the outbreak of Ebola, Dr. Chen worked with Vermont's top health facilities to strengthen defenses against the disease, while educating patients on the importance of disease prevention. He also led efforts to increase vaccinations for children in efforts to prevent the spread of disease at school.

Dr. Chen's dedication to public health promotion did not stop at the State level. In 2009, Dr. Chen testified before the Senate Health, Education, Labor, and Pensions Committee on Vermont's experience with healthcare reform and the creation of Vermont Health Connect. In 2014, he became chair of the Centers for Disease Control and Prevention's Food Safety and Modernization Act Surveillance Working Group where he continues to strengthen foodborne illness surveillance systems across the country. He has also long served on the board of the CDC's Office of Infectious Disease, and he currently chairs the Prevention Committee of the Association of State and Territorial Health Officials.

Vermont's national role in promoting the health and well-being of patients has made strides under the leadership of Dr. Chen. Vermonters are sorry to

see him go, but I know we can expect many more years of outstanding leadership from him. In fact, he and his wife have just been accepted to the Peace Corps, where they look forward to training physicians in Africa. I wish them both the very best in this exciting work, and I once again thank Dr. Chen for his incredible contributions to our State and beyond.

ARMS SALES NOTIFICATION

Mr. CORKER. Mr. President, section 36(b) of the Arms Export Control Act requires that Congress receive prior notification of certain proposed arms sales as defined by that statute. Upon such notification, the Congress has 30 calendar days during which the sale may be reviewed. The provision stipulates that, in the Senate, the notification of proposed sales shall be sent to the chairman of the Senate Foreign Relations Committee.

In keeping with the committee's intention to see that relevant information is available to the full Senate, I ask unanimous consent to have printed in the RECORD the notifications which have been received. If the cover letter references a classified annex, then such annex is available to all Senators in the office of the Foreign Relations Committee, room SD–423.

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

DEFENSE SECURITY COOPERATION AGENCY,
Arlington, VA.

Hon. BOB CORKER,
Chairman, Committee on Foreign Relations, U.S. Senate, Washington, DC.

DEAR MR. CHAIRMAN: Pursuant to the reporting requirements of Section 36(b)(1) of the Arms Export Control Act, as amended, we are forwarding herewith Transmittal No. 17–02, concerning the Air Force's proposed Letter(s) of Offer and Acceptance to the Government of the United Kingdom for defense articles and services estimated to cost $150 million. After this letter is delivered to your office, we plan to issue a news release to notify the public of this proposed sale.

Sincerely,

J.W. RIXEY,
Vice Admiral, USN, Director.

Enclosures.

TRANSMITTAL NO. 17–02

Notice of Proposed Issuance of Letter of Offer Pursuant to Section 36(b)(1) of the Arms Export Control Act, as amended

(i) Prospective Purchaser: United Kingdom.

(ii) Total Estimated Value:

Major Defense Equipment* $135.0 million.

Other $ 15.0 million.

Total $150.0 million.

(iii) Description and Quantity or Quantities of Articles or Services under Consideration for Purchase:

Major Defense Equipment (MDE):

One thousand (1,000) AGM–114–R1/R2 Hellfire II Semi-Active Laser (SAL) Missiles.

Non-MDE:

Logistics support services and other related program support.

(iv) Military Department: Air Force (YAI).

(v) Prior Related Cases, if any: UK–D–YAC—$22M—May 2008; UK–D–YAF—$21M—Mar 2011; UK–D–YAY—$134M—Aug 2013.

(vi) Sales Commission. Fee. etc., Paid. Offered, or Agreed to be Paid: None.

(vii) Sensitivity of Technology Contained in the Defense Article or Defense Services Proposed to be Sold: See Attached Annex.

(viii) Date Report Delivered to Congress: March 16, 2017.

*As defined in Section 47(6) of the Arms Export Control Act.

POLICY JUSTIFICATION

United Kingdom—Hellfire Missiles

The Government of the United Kingdom (UK) requested a possible sale of 1,000 AGM–114–RI/R2 Hellfire II Semi-Active Laser (SAL) Missiles with logistics support services and other related program support. The estimated cost is $150 million.

This proposed sale directly contributes to the foreign policy and national security policies of the United States by enhancing the close air support capability of the UK in support of NATO and other coalition operations. Commonality between close air support capabilities greatly increases interoperability between our two countries' military and peacekeeping forces and allows for greater burden sharing.

The proposed sale improves the UK's capability to meet current and future threats by providing close air support to counter enemy attacks on coalition ground forces in the U.S. Central Command area of responsibility (AOR) and other areas, as needed. The UK already has Hellfire missiles in its inventory and will have no difficulty absorbing these additional missiles.

The proposed sale of this equipment and support will not alter the basic military balance in the region.

There is no principal contractor for this sale as the missiles are coming from U.S. stock.

Implementation of this proposed sale will not require the assignment of any additional U.S. Government or contractor representatives to the UK.

There will be no adverse impact on U.S. defense readiness as a result of this proposed sale.

2017 FOOD AND DRUG ADMINISTRATION USER FEE REAUTHORIZATION

Mr. ALEXANDER. Mr. President, I ask unanimous consent to have printed in the RECORD a copy of my remarks at the Senate Committee on Health, Education, Labor, and Pensions earlier today.

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

2017 FOOD AND DRUG ADMINISTRATION USER FEE REAUTHORIZATION

The Senate Committee on Health, Education, Labor and Pensions will please come to order. We're holding a hearing today on ''FDA User Fee Agreements: Improving Medical Product Regulation and Innovation for Patients Part 1.''

Now, Senator Murray and I will each have an opening statement, then we will introduce our panel of witnesses. After our witness testimony, senators will have 5 minutes of questions. The subject of today is the Food and Drug Administration's medical device and drug user fees. It seems like a long time ago, but it really wasn't that long ago, that Congress passed the 21st Century Cures Act. 94 Senators voted for it, President Obama and Vice President Biden were strongly in support of it. So were Speaker Ryan and Mitch McConnell, who called it ''the most important piece of legislation in the last Congress.

It came through this committee and I thank the members of the committee, especially for resolving our differences of opinions and making it possible to reach a consensus. That bill was about the moving medical products, drugs and devices more rapidly, in a safe way, through the investment and the regulatory process into the hands of patients and doctors offices.

Today, we are talking about really implementing that great goal, one that shows so much promise for virtually every American. We're here to talk about how we continue the fund the Food and Drug Administration, the agency responsible for making sure the promising research supported by 21st Century Cures actually reaches patients.

We will hear from witnesses from the agency itself to tell us how the user fee agreements will improve the agency's abilities to regulate medical products and promote innovation. We will hear from patients, device manufacturers, and brand and generic drug manufacturers in a second hearing, which is tentatively scheduled for April 4.

I want to thank the witnesses for taking the time to testify today. We respect the great amount of expertise and service that you've given for our country. I want to thank you also for moving so quickly to implement the 21st Century Cures Act. I noticed specifically that the provision involving regenerative medicine was published with about a month after President Obama signed the law.

The first medical product user fee agreement was enacted in 1992. FDA worked with the drug manufacturers to hammer out an agreement that the agency would collect user fees from drug manufacturers in exchange for more timely, predictable reviews. The agreement was a success—it decreased review times and increased patient access to medicines.

Before September 30 of this year, 4 different user fee agreements need to be reauthorized: The Prescription drug user fee is the first one. Now it's common around here to call it PDUFA, I'm not going to do it. I just can't stand PDUFA, and MDUFA and GDUFA and the other UFA. So I'm going to call them if you don't mind, the prescription drug user fee, which accounted for over 70 percent of the brand drug review budget in FY2015.

The second one is the Medical device user fee, which accounted for 35 percent of the medical device review budget in 2015.

The Generic drug user fee accounted for 70 percent of the generic drug review budget. Biosimilar user fee accounted for 7 percent of the biosimilar review budget.

CONSEQUENCES OF FAILING TO REAUTHORIZE

So a lot of the money for the FDA comes from these agreements with manufacturers of prescription drugs and devices.

The authority for FDA to collect user fees for medical product review will expire on September 30 of this year—six months from now.

Now this is probably the most important part of what I have to say this morning. If we do not move quickly to reauthorize these agreements, the FDA will be forced to begin sending layoff notices to more than 5,000 employees to notify them that they may lose their jobs in 60 days—that's what they have to do by law.

A delay in reauthorizing these agreements would delay the reviews of drugs and devices submitted after April 1, only a few days away.

For example, if we do not pass these reauthorizations into law before the current agreements expire, an FDA reviewer who