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House of Representatives

The House met at 10 a.m. and was called to order by the Speaker pro tempore (Mr. HULTGREN).

DESIGNATION OF SPEAKER PRO TEMPORE

The SPEAKER pro tempore laid before the House the following communication from the Speaker:

WASHINGTON, DC,
March 22, 2017.

I hereby appoint the Honorable RANDY HULTGREN to act as Speaker pro tempore on this day.

PAUL D. RYAN,
Speaker of the House of Representatives.

MORNING-HOUR DEBATE

The SPEAKER pro tempore. Pursuant to the order of the House of January 3, 2017, the Chair will now recognize Members from lists submitted by the majority and minority leaders for morning-hour debate.

The Chair will alternate recognition between the parties, with each party limited to 1 hour and each Member other than the majority and minority leaders and the minority whip limited to 5 minutes, but in no event shall debate continue beyond 11:50 a.m.

SURGE IN CITIZENSHIP APPLICATIONS

The SPEAKER pro tempore. The Chair recognizes the gentleman from Illinois (Mr. GUTIÉRREZ) for 5 minutes.

Mr. GUTIÉRREZ. Mr. Speaker, I have spoken here before about the surge in demand for citizenship we are seeing in the Fourth Congressional District of Illinois. Thousands who are eligible are taking the step to become citizens because they feel threatened by a President and administration that does not seem to think of immigrants, refugees, Muslims, or Latinos as human beings. So the one way to protect oneself and to protect one's family is to apply for citizenship if you are eligible.

Some days they are lined up out the door of my office. So full are our daily appointments, we had to add a Saturday citizenship workshop to accommodate all of the people who wanted to apply, and we will be adding additional workshops. At one workshop a couple of weeks ago, staff and volunteers worked with families to fill out the paperwork, assemble all of the evidence and fees for the application. In one day we helped 260 people fill out their citizenship applications.

I discovered something very important. People keep coming back to me and asking: What can I do to fight back? What can I do to help immigrant communities who are under siege by President Trump, ''President'' Bannon, and all the rest of the people who want to drive immigrants out of the country?

So I told them they could help others apply for citizenship, and they came in droves—hipsters with funky facial hair, women with pink knit hats they made for the Women's March, environmental and LGBTQ activists, union members, and just plain old folks from my district who are not themselves immigrants but who feel the solidarity with immigrants in their community.

You know what? This new group, after getting a little training, sat for a few hours with immigrant families, going over their histories, their stories, their reasons for being here, and their reasons for applying for U.S. citizenship. And they were pretty good at filling out government forms. They formed a bond. They got to know each other. They were helping each other accomplish a mutual goal, which is standing up to xenophobia and the Trump-Bannon era.

The citizens and the applicants to become citizens are both worried about Republicans taking away their health care and eliminating the environmental laws that have made the water we drink and the air we breathe so much safer. They worry about where women and girls will get healthcare services in cities like Chicago if Trump and his buddies defund Planned Parenthood, or what happens after the courts are stacked with judges who are so out of step with the modern era on gender and civil rights, consumer protections, women's health, and any of the other issues people care about.

Anyone who walked out of that citizenship workshop where 260 new citizenship applications were completed felt a sense of community and interconnectedness with one another. Now, it is sad to report that thousands of my constituents can't spend a Saturday morning applying for citizenship. Many of them are at legal clinics or law offices filling out papers to address the very fear that they will lose their homes, their savings, and their families if Trump's deportation force knocks on their door.

They are filling out, by the thousands, power of attorney documents and child custody papers in case they are grabbed off the street, in their homes, or, worse yet, in their places of worship. It is heartbreaking. Moms and dads are making decisions about who their kids will go to live with if they get picked up and deported. Which relative, neighbor, or older sibling will be in charge if mom and dad are taken away?

Believe me, these kids know what is going on. The 5 million U.S. citizens who have parents at risk of deportation know that their government is a threat to their safety and their security. Their own government could come to the door and upend their lives at any moment, and their parents are preparing for the worst.

It is the humanity, the love, their striving for a better life that comes through in these parents who want

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what is best for their children and what was unavailable to them in some far-off country. These are very real people who have no legal avenues that allow them to live and work here legally, who have no options other than to hide or leave, who have been cut off from fully integrating into our society as citizens because Congress has been fighting over immigration reform. These are the people that Mr. Bannon, Mr. Sessions, and Mr. KING have been working together for years to get out of what they call their country so that our erratic new President can point to deportations and say that he is making America great again.

What is clear from the citizenship surge and all those who want to help is that America is not only great, not only kind, not only dedicated to the proposition that all men are created equal, but there are Americans and those who want to be Americans willing to stand up and resist when leaders take us in the wrong direction.

Mr. Speaker, you will see millions of Americans and aspiring Americans marching together in American cities across our great Nation on May 1, and when you do, you will see this bond and this shared humanity this coming May 1.

CUBA AND VENEZUELA

The SPEAKER pro tempore. The Chair recognizes the gentlewoman from Florida (Ms. ROS-LEHTINEN) for 5 minutes.

Ms. ROS-LEHTINEN. Mr. Speaker, I rise today to discuss two foreign policy areas that are important to our Nation, our region, and to my constituency in south Florida. Cuba and Venezuela are two countries in our hemisphere that suffer under dictatorships and are avowed enemies of the United States.

In my native homeland of Cuba, we have seen human rights violations on the rise ever since the U.S. concessions to the Castro regime in December 2014. One example is the case of Dr. Eduardo Cardet of Holguin, Cuba, pictured here. He is a medical doctor and the leader of the Christian Liberation Movement who was savagely beaten in front of his wife and two children and has been imprisoned since November 2016. Just days ago he was sentenced to 3 years in prison.

Dr. Cardet is condemned and sentenced because he is the voice for change and a respected human rights leader. The truth is that Eduardo Cardet has been imprisoned because he is willing—and has been doing it—to tell anyone who would listen that the Cuban people do not approve of the Castro regime. For not supporting this vile Castro dictatorship and for speaking out against such cruelty and abuses, he was sentenced to 3 years.

Mr. Speaker, we cannot stand idly by as more and more prodemocracy leaders are being beaten and arrested on the island. The President and his new administration have committed to reversing some of the damage inflicted by the previous administration on the cause of freedom and democracy in Cuba. Our policy in Cuba should send a strong message throughout the hemisphere that the United States will no longer remain silent on these atrocities.

It is well known that Cuba has exposed, has exported its barbaric tactics to other countries in the hemisphere, namely, Venezuela. The Venezuelan people believe that there is no justice in their land. They believe that there is no respect for law in their country, and they are right.

And what about their economy?

Well, according to the International Monetary Fund, the inflation in Venezuela last year was around 800 percent—800 percent—and the inflation projection for this year is 1,600 percent. This is not sustainable, Mr. Speaker, especially when press reports are so visual when they show that Venezuelan people are scavenging for food. They don't have any money, and they are actually leaving their country in order to find food.

Venezuela has only a little over $10 billion worth of foreign reserves, yet it owes $7 billion in outstanding debt payments. This tells us, Mr. Speaker, that we have, sadly, not yet hit rock bottom in Venezuela and that the situation will get worse, which is why it is so important that we begin the process to bring democratic reforms to the country now in order to prevent a larger crisis that is looming in the future.

One way to achieve this, Mr. Speaker, is to impose sanctions on human rights violators. Mr. Speaker, more targeted sanctions against those individuals who are responsible for the famine and the human rights violations that are ongoing in Venezuela are desperately needed.

Let's examine some of the individuals who I believe should be on the sanctions list. First off we have Maikel Moreno. This individual, months ago, used Venezuela's kangaroo courts and ratified the unjust sentence against political prisoner Leopoldo Lopez.

How was he rewarded by the Maduro regime?

He was appointed to be the president of the Supreme Justice Tribunal. Just appalling.

Next up is Marco Torres. Marco Torres is the Venezuelan Minister of Food. Let's examine his awful track record. The food shortages in Venezuela are rampant, and it is difficult for the people to feed themselves or their families. To make matters worse, Mr. Speaker, press reports indicate that Venezuelans are eating from trash in the street just to survive. The Venezuelan people deserve better.

Next we have Jose Viloria Sosa, this gentleman right here. He is the director of the military prison of Ramo Verde. This decrepit character is responsible for the inhumane treatment and abusive tactics against human rights activist Leopoldo Lopez.

Lastly, Susana Barreiros Rodriguez. In 2015, she was the judge of the 28th Trial Circuit Court of Caracas who was the one who originally unjustly sentenced Leopoldo Lopez to jail.

We must provide a voice for those whose rights continue to be trampled, and take swift and decisive actions such as imposing sanctions on all of these regime officials and many more who facilitate those abuses.

When it comes to the tyranny in Cuba and in Venezuela, Mr. Speaker, we must have a clear vision and a clear understanding of the nature of these rogue regimes that do not respect the rule of law, do not respect freedom of expression, and do not respect any kind of human dignity.

HEALTHCARE TROJAN HORSE

The SPEAKER pro tempore. The Chair recognizes the gentleman from Wisconsin (Mr. POCAN) for 5 minutes.

Mr. POCAN. Mr. Speaker, when Queen Helen of Sparta was abducted by the Trojan prince Paris, Helen's jilted husband convinced his brother, a Greek king, to lead an expedition to retrieve her. He was accompanied by a fleet of more than a thousand ships. They crossed the sea to Troy and demanded Helen's return.

The siege, punctuated by all sorts of battles and skirmishes, lasted more than 10 years until one day when Odysseus had a bright idea. He said: Hey, guys, let's build a really massive wooden horse. Let's pretend like we have given up and sailed our fleet behind some island, but really about 30 of us will hide inside the horse. We will have someone tell the Trojans that it is some kind of gift to Athena, the goddess of war, and they will haul it into their city. When they are asleep, we will all sneak out, open the gates for everybody else, and totally kill everybody in the city.

And that is the legend of the Trojan horse.

So what is the moral of that story and why am I reciting Greek lore on the floor of Congress today?

Well, because history has a way of repeating itself. Today we have our own Trojan horse, a so-called GOP healthcare bill, TrumpCare, that professes to be about health care but, in reality, is a Trojan horse to give tax breaks to the wealthiest in the country.

Let's take a serious look at it. We are told that it is the replacement to the Affordable Care Act, a bill that has offered insurance to over 20 million people in this country. Now that replacement is supposed to fix the problems of the Affordable Care Act and ensure health care for everyone, as promised by President Trump.

But the covert part of TrumpCare was that he got busted last week when the Congressional Budget Office, our nonpartisan agency that evaluates bills, said that, in reality, the bill does little to improve health care. In fact, it

said 24 million people would lose access to health care, not gain it. And it said older Americans would pay more for health insurance than under the Affordable Care Act and get fewer subsidies, and that more people on Medicaid would lose access to health care as well.

So how can a supposed healthcare bill actually reduce health care?

Well, when it is only a pretend healthcare bill.

And what else did the CBO say?

Well, they said this bill also includes almost $600 billion in tax cuts for the wealthiest individuals in our country, insurance companies, and Big Pharma.

It gets worse. Those tax cuts for the wealthy, just how bad are they?

Well, the 400 richest families in the country making more than $300 million a year will get an annual tax cut of $7 million each. So Charles Koch and Betsy DeVos get $7 million a year while a retired farmer in Janesville, Wisconsin, in Speaker RYAN's district, earning $26,000 a year may have to pay $14,600 for the same health care she got under the Affordable Care Act, but the old cost was only about $1,700. That is a 750 percent increase on low-income, older Americans so the richest can bank millions.

□ 1015

And the CBO said another tax cut in TrumpCare provides about $275 billion in tax breaks that only the top 2 percent of Americans can get, while 98 percent of us will never see a dime.

And who else gets tax cuts? Insurance companies get a tax break of about $145 billion, drug companies get a tax break of $25 billion, and medical device companies get a break of about $20 billion. That is almost $600 billion worth of tax cuts for the wealthy, and what do we get? Less health care for more money.

That is not a serious healthcare alternative. That is a tax cut for the wealthy disguised as health care, and you and I get to foot the bill.

That is what is called a Trojan horse. And you have to be especially careful these days because Trojans are a little bit different than they used to be, and they are only used when you get—well, the same thing this will do to America, Mr. Speaker.

IMPORTANCE OF CAREER AND TECHNICAL EDUCATION

The SPEAKER pro tempore. The Chair recognizes the gentleman from Pennsylvania (Mr. THOMPSON) for 5 minutes.

Mr. THOMPSON of Pennsylvania. Mr. Speaker, recently, the House Education and the Workforce Subcommittee on Early Childhood, Elementary, and Secondary Education hosted a hearing to discuss the state of career and technical education in America, as well as changes that can be made to strengthen CTE and better prepare students of all ages for the workforce.

One of the biggest challenges facing career and technical education is the stigma associated with it. Through the years, we have seen wrongheaded claims that students involved in the trades lacked ambition. Those misplaced assumptions are slowly subsiding, but not soon enough.

CTE has established itself as a path that many high-achieving students choose in pursuit of industry certification and hands-on skills that they can use right out of high school, in training programs, or in college.

At this hearing, we heard from many knowledgeable witnesses, including Mike Rowe, the television host of the television show ''Dirty Jobs.'' Mike shared his experience as a young student who didn't know what career path he wanted to follow. So, he looked no further than his local community college.

His eyes were open to hundreds of courses that he could afford to study. And Mike said: ''That experience opened doors I didn't even know existed. But that same experience is precisely what thousands of kids are discouraged from pursuing every year.''

Mr. Speaker, the reality is, a huge gap exists in communities nationwide. There are jobs out there, good family-sustaining jobs, but the unemployed or underemployed are either ill-prepared or lack the appropriate training to fill these vacancies. The answer to this problem starts with career and technical education.

That is why last Congress I introduced Strengthening Career and Technical Education for the 21st Century Act. This bill, which passed the House in the fall by a vote of 405–5, aimed to close the skills gap by modernizing the Federal investment in career and technical education programs and connecting educators with industry stakeholders—the job creators.

I look forward to reintroducing similar legislation with my Career and Technical Education Caucus co-chair, Congressman JIM LANGEVIN from Rhode Island, later this month.

During the hearing, Mike Rowe described naysayers as viewing a job in the trades as a ''vocational consolation prize.'' Well, Mr. Speaker, nothing could be further from the truth. We must change this stigma, this bias, and help encourage American students to study a career that they are interested in and that they are passionate about. The list is endless with career and technical education, and the jobs are out there.

HEALTH CARE CONCERNS

The SPEAKER pro tempore. The Chair recognizes the gentleman from California (Mr. RUIZ) for 5 minutes.

Mr. RUIZ. Mr. Speaker, today, I celebrate the birth of my twin daughters, Sky and Sage as they turn 2 years old.

Happy birthday, Sky; happy birthday, Sage. You both have made your mom, Monica, and me very, very happy. Because of you both, I am the happiest man on Earth. We love you very much, and I miss you very much when I am here in the people's House and you are in California in our family's house. The best feelings in the world are when I get home after a long week here and you two girls run up to me with open arms and you run into my arms screaming: Daddy, daddy, daddy. I will never forget those moments ever, and I thank you for them.

Mr. Speaker, my daughters mean the world to me, and my daughters' future and their health mean the world to me. And now, more than ever, I want to protect health care for Sky and Sage and for the millions of Americans across our great Nation.

I am an emergency physician, and I have spent my career caring for patients across the Nation from Boston to Pittsburgh and to the Coachella Valley where I grew up and which I now represent. Many of my patients, far too many, didn't have health insurance. And I have seen firsthand what it means for people when they don't have health coverage and can't afford care.

I know what uninsured patients look like. They are the senior who comes in with emphysema and having to be intubated and put on a respiratory machine because they didn't have health insurance to see their doctor. It is the diabetic who comes in in a diabetic coma and spends 2 months in the ICU because they couldn't afford their insulin, or they couldn't see their doctor. Or that 60-year-old farmworker who had urinary problems and lower back pains, which scares me that he might have prostate cancer metastasized to the lumbar spine, and when asked when was the last time he saw a doctor, he said 6 years ago because that is when he lost his health insurance.

This Republican plan should be called the pain and suffering act or the pay more for less act, because that is what it will do. This bill will add 14 million more uninsured people within 1 year and 24 million more over the next decade.

We need to move beyond the Republican hyperpartisan ideology and listen to patients and their concerns. My patients in the emergency department ask me two of the most common questions, which are: Am I going to be okay? How much is this going to cost me?

I have never cared for an uninsured patient who chose to be uninsured. They didn't have health insurance because they couldn't afford it. And that includes the young, healthy patient who was in an unfortunate car accident and was left paralyzed. I never met a doctor who preferred their patients to be uninsured.

Yet, we know that the Republican bill's age tax—huge cuts to Medicaid—will reduce coverage and make millions more uninsured, increase costs of uncompensated care, while giving tax breaks to millionaires, raising out-of-pocket costs, and raising premiums and deductibles.

The age tax is astronomical. The CBO said that a senior at the age of 60, making about $26,000, would have to pay about $14,000 in premiums. That is nearly half of their income, leaving very little for food and housing and their other needs.

This bill also will make it harder for doctors and hospitals to care for patients, due to the Medicaid block granting and the cuts. That is why the American Medical Association, the American Hospital Association, the AARP, and many major provider organizations oppose this bill, because they also know firsthand the harm it would cause to patients. That is why AARP opposes this bill, because they know the harm it is going to cause to the elderly in our Nation.

Now, do PAUL RYAN and President Trump really know more about patient care and providing care than doctors, nurses, and hospitals? Do they know more about taking care of seniors than the AARP? No. We need to end this hyperpartisan, ideological charade that puts the cost of health care on the shoulders of working families in order to give tax breaks to multimillionaires. We need to come together as one body to provide true health care, reduce the healthcare costs for millions of Americans, and provide the care that is needed.

REPEALING OBAMACARE

The SPEAKER pro tempore. The Chair recognizes the gentlewoman from Alabama (Mrs. ROBY) for 5 minutes.

Mrs. ROBY. Mr. Speaker, 7 years ago this week, in this Chamber, the House gave final passage to the Affordable Care Act, better known as ObamaCare.

I wasn't in Congress then. Many of us weren't. But for my fellow conservatives here today, that vote 7 years ago marked a decision point, or a moment of affirmation, to answer the call to public service and to help chart a better way for this country.

And for 7 years, we have made the case against ObamaCare. As the law has been implemented, that case has been largely made for us. Millions have been forced away from the healthcare plan and doctor they liked, despite being told otherwise.

This year alone, in Alabama, health insurance premiums are rising by 58 percent. That is on top of the already steep increases the past 2 years. Our average deductible for the supposedly affordable bronze plan is now $6,000.

I have heard from countless constituents about the negative impact of ObamaCare. I have listened to their stories about how higher costs and fewer choices have made it that much harder to keep their families healthy and make ends meet.

And in response, I made a promise—the same promise President Trump and every conservative in Congress has made over and over: Give us the majority in the House and the Senate, give us a Republican in the White House, and we will repeal ObamaCare and replace it with reforms that work.

So, Mr. Speaker, I am pleased that we are finally in a position to deliver on that promise. The voters gave us what we asked of them, and it is only right that we keep our end of the bargain.

With the American Health Care Act, we begin the process of repealing ObamaCare once and for all. This bill dismantles the taxes, mandates, and entitlement spending that make up the core of ObamaCare. It cuts taxes on prescription drugs, over-the-counter medications, insurance premiums, and medical devices. It eliminates the individual and employer mandate penalties that have forced millions into expensive, inadequate plans. It replaces the ObamaCare entitlement with refundable tax credits so that people who don't receive insurance through work can put their own tax dollars toward a health plan of their choice.

Mr. Speaker, many people have asked why our plan to repeal and replace ObamaCare is a process. Why is this bill only one step and not the full package? It is an understandable question. For the last several years, Americans have been sold the false hope that government has a magic wand with which they can solve all of their problems. The truth is, of course, that it can't. It never can. And the only proof you need is ObamaCare itself.

That is why congressional Republicans and the Trump administration are taking a completely different approach than President Obama and the Democrats used 7 years ago. Instead of claiming we need to pass the bill so you can find out what is in it, we have worked in a transparent way. The bill text has been posted online for 3 weeks. It has gone through three separate committee markups, and will come to the House floor in regular order.

Instead of one giant bill like ObamaCare, we are using a more responsible, three-step process. First, we will repeal ObamaCare with all its taxes, mandates, and spending through budget reconciliation. Next, the Trump administration will use executive authority to weed out the more intricate ObamaCare policies one by one to stabilize the market and lower costs. And finally, Congress will move forward with legislation addressing more specific policies, such as allowing individuals to purchase insurance across State lines.

I believe this will ultimately lead to better, more stable healthcare policy that empowers patients, increases choices, and lowers costs.

Mr. Speaker, no bill is perfect. I am sure if every Member of this body came up with their ideal health reform bill, they would each be pretty different. It is supposed to be that way, because we all represent different districts in different parts of the country with different needs.

There may well be some changes made here in the House or in the Senate that can make the bill better. That is part of the process, so I certainly remain open to those.

But, Mr. Speaker, I am confident this bill puts us on a path toward lower cost and better care, and away from government-controlled health insurance. It represents our opportunity to undo the damage of ObamaCare and help American families like we said we would.

For 7 years, we have been promising, and this is our chance to deliver.

Mr. Speaker, I urge my colleagues to support the American Health Care Act and send it to the Senate, and get us one step closer to delivering on our promise.

□ 1030

LISTEN TO THE PEOPLE CONCERNING THE AMERICAN HEALTH CARE ACT

The SPEAKER pro tempore. The Chair recognizes the gentlewoman from Texas (Ms. EDDIE BERNICE JOHNSON) for 5 minutes.

Ms. EDDIE BERNICE JOHNSON of Texas. Mr. Speaker, the American Health Care Act, or TrumpCare, does one simple thing: This shortsighted Republican plan forces Americans to pay more to get less. It is nothing more than a tax break for the wealthiest at the expense of the most vulnerable.

Today, joining every major responsible group for providing health care to Americans—including the American Hospital Association, the AARP, the National Physicians Alliance, the American Medical Association, the Association of American Physicians and Surgeons, and the National Nurses United—a group representing over 150,000 registered nurses wrote to Congress urging us to oppose the American Health Care Act.

Registered nurses care for Americans in our most difficult hours. From our first breath of life to our final, nurses are integral to the delivery of health care in our country. More than any other profession, nurses see the personal effects of a flawed healthcare system in the hospital every single day.

I know, Mr. Speaker, because I was the first former registered nurse in the House. I have a firsthand, valuable perspective and insight that nurses have into our healthcare system. We should take their heed alongside the public outcry about the danger of this so-called replacement bill.

These are not paid protesters going to townhall meetings across this country. These are our constituents, participating democratically, telling their Representatives that they want to keep and improve the current law, not repeal and replace.

This proposed plan replaces nothing for the 24 million Americans who would lose coverage as a result of this ill-derived legislation.

In my district alone, President Obama's Affordable Care Act brought

the uninsured rate down from 27.3 percent to 20.8 percent, and insured over 265,000 individuals who did not have coverage before. While the main safety net provider in my district, Parkland Memorial Hospital, provided $1 billion in uncompensated care in 2015, Parkland and the other safety net providers face severe financial burdens in the House GOP proposal.

One of my main concerns with this bill is that it punishes people who get their coverage through Medicaid by capping and slashing the program. With 70 million Americans and 5.2 million Texans who currently rely on Medicaid, per capita caps on the program would not meet the needs of the population, and the people would suffer.

People will live or die as a result of our decisions here on this floor, Mr. Speaker. There is no reason for the Republican leadership to rush this legislation without careful consideration, including the input of those who actually provide health care.

We need to listen to our constituents, our nurses, our doctors, our long-term care aides, and our hospitals. We must listen to the people. This bill will force Americans to pay more for their premiums, more for their care, more for their medicine, more out-of-pocket expenses and deductibles, all the while giving tax breaks directly to the wealthy.

Mr. Speaker, I urge my colleagues to consider the harmful effects of this bill. Your constituents are asking you to work with us to repair the Affordable Care Act, and we are ready to work.

Mr. Speaker, I include in the RECORD correspondence from National Nurses United.

NATIONAL NURSES UNITED,
Silver Spring, MD/Oakland, CA,
March 21, 2017.

HOUSE OF REPRESENTATIVES,
Washington, DC.

DEAR REPRESENTATIVE: On behalf of the 150,000 Registered Nurse members of National Nurses United, we urge you to oppose the American Health Care Act when it comes to a vote on the floor of the House of Representatives.

Registered Nurses care for Americans in their most difficult hours. More than any other profession, we see the personal effects of a flawed healthcare system in the hospital every single day. Our primary responsibility is to protect the health and wellness of our patients by providing care at the bedside.

The American Health Care Act poses a mortal threat to the health and well-being of our patients, and to the health security of our country. Last week, the Congressional Budget Office reported that 24 million Americans will lose insurance coverage under the original legislative text. The plan would increase the number of uninsured people by 78% in 2020, and by 86% in 2026. This reality is in stark contrast to one of the key campaign promises made by the President this past year—instead of providing ''insurance for everybody'', this healthcare bill will dramatically reduce the number of insured Americans. The President also promised not to cut Medicaid or Medicare, but the AHCA includes drastic cuts to both programs.

There is not a single aspect of this legislation that will benefit our patients who lack the health care services that they need. Specifically, the legislation will:

Eliminate the Prevention and Public Health Fund, which will worsen the health of our communities, spread infectious disease, and increase health system costs;

Phase out coverage for Medicaid expansion in Medicaid expansion states beginning in 2020, while preventing new states from receiving enhanced Federal Medical Assistance Percentage in order to expand Medicaid;

Institute a per capita cap for Medicaid, along with the option for states to use a block grant instead. Both options will reduce coverage for the most vulnerable, shift care from clinics to emergency rooms, increase system costs for the chronically ill as they defer treatments because of cost, and unfairly shift the burden of costs to the states;

Empower individual states to determine eligibility, scope and benefits for Medicaid as per their own discretion, but there will be no increase in federal monies to cover expanded eligibility;

Eliminate funding to Planned Parenthood which will worsen women's health, and create burdens for women, families and society from unsafe pregnancies and other health conditions no longer treated;

Eliminate the definition of ''essential benefits''—a move that makes all patients vulnerable to the distortions and marketing games of insurance companies;

Repeal the cost-sharing subsidies of the ACA, and destroy the ability of 80% of people currently buying insurance on the Exchanges to maintain coverage;

Open the door for junk insurance. The bill includes a penalty for lack of continuous coverage, creating a big incentive for patients to buy low-cost, no-coverage plans;

Fail to encourage low-cost coverage, because the legislation shifts thousands of dollars in spending from insurance company spending to the individual's out of pocket costs;

Reproduce the failed ''high-risk pools'' of the 1990's and 2000's, through the ''Patient and Stability Fund''. It is inevitable that the number of eligible patients will overwhelm the resources of these high risk pools;

Repeal the Medicare Hospital Insurance Tax, which will reduce funding and destabilize for the Medicare program that our nation's seniors rely on;

Allow insurers to charge seniors five times the amount of a younger person. This revision will prove to be deadly for our nation's seniors, and it reveals the extent to which this reform will benefit the profit margins of insurance companies, at the expense of patients' lives.

Our experience at the bedside, coupled with analysis from health policy researchers, confirm our conclusion that this bill does not address the primary concerns of our patients: getting the care they need when they need it, without overwhelming financial burdens.

Over many years, with the notable exception of the passage of Medicare in 1965, the United States has built a patchwork health system around private insurance access, rather than genuine access to health care. This legislation, if enacted, will perpetuate this system while undermining gains made in the Affordable Care Act. Given the ultimate reductions in Medicaid, and the other reversals in the bill, there is literally nothing in this legislation that provides our patients with the care they need.

In order to effectively address the health system problems in this country, legislators must move beyond a private health insurance company dominated system. Health policy research, and the experience of every other wealthy nation, shows that a single-payer health care system is the most successful model to use. In the United States, Medicare is an example of how successful such a system can be. If the goal of our health system is to provide quality care for all Americans at the lowest cost possible, then we must transition to a single payer healthcare system—or Medicare For All.

The principal effect of the American Health Care Act, on the other hand, will be the loss of existing health coverage for tens of millions of people without any restraints on healthcare industry pricing practices. This legislation will result in overwhelming health insecurity for the American people.

On behalf of registered nurses across the country, we urge the rejection of this flawed, and deadly, proposal. We urge you to instead support guaranteed healthcare for all, through an improved, expanded Medicare for All program.

Sincerely,

DEBORAH BURGER, RN,
President, NNU.
JEAN ROSS, RN,
President, NNU.

RECOGNIZING CAMPBELLSVILLE UNIVERSITY LADY TIGERS WOMEN'S BASKETBALL TEAM

The SPEAKER pro tempore. The Chair recognizes the gentleman from Kentucky (Mr. COMER) for 5 minutes.

Mr. COMER. Mr. Speaker, I rise to pay special recognition to the Campbellsville University Lady Tigers women's basketball team upon making the entire Commonwealth of Kentucky proud with another successful college basketball season. The Lady Tigers finished with a 28–7 record and appeared in their second NAIA Fab Four round in 3 years.

In their final four game in Billings, Montana, against Oklahoma City, two girls from my home county of Monroe had career highlights. Madison Clements hit six 3-pointers and Lauren Turner had nine assists. The Campbellsville University Lady Tigers are also coached by a Monroe County girl, Ginger High Colvin.

The Campbellsville University Lady Tigers have been one of the most dominant college girls basketball programs in the NAIA over the past 20 years. Campbellsville University is one of Kentucky's finest educational institutions, and I am very proud that Campbellsville is in the First Congressional District of Kentucky.

AMERICAN HEALTH CARE ACT DOESN'T HELP MENTAL HEALTH PATIENTS

The SPEAKER pro tempore. The Chair recognizes the gentleman from Massachusetts (Mr. KENNEDY) for 5 minutes.

Mr. KENNEDY. Mr. Speaker, a few months ago, a woman from my district walked into my office and told me about her daughter, a young lady diagnosed with acute mental illness at just 4 years of age.

A decade later, the stories that that young mom shared would split your heart: stories of countless ER visits, endless fights with insurers and courts,

a little girl being boarded at a hospital for 21 days while they searched up and down the East Coast to find a bed where she could stay.

At 14 years old, she has now spent half of her life in residential care. But it was how her mother ended that story that has stuck with me. She looked me in the eyes and told me that: ''Compared to other people I know, we have been lucky.''

Mr. Speaker, that is not luck. This is a mental health system so broken that it is hard to recognize.

And how have our Republican colleagues followed up in response? They have offered a piece of legislation that is one of the largest assaults on our mental health system in recent history.

The GOP repeal bill will remove guaranteed behavioral health coverage for everyone covered under the Medicaid expansion. It will abandon those suffering from substance abuse disorder to fend for themselves in a country ravaged by opioid abuse. It will allow work requirements for care, forcing countless people to somehow choose between getting treatment and keeping their job. It will help insurers further skirt parity laws that require them to treat the mentally ill fairly. It will send out-of-pocket costs soaring for the most vulnerable among us.

Mr. Speaker, one in five Americans today suffer from mental illness. These brave men and women and their families that love them deserve more than the cheap luck of a broken system. They deserve more than the empty rhetoric of a bill that ''might'' cover or ''could'' cover the care that they need. They deserve an ironclad commitment from their government that we will have their back. This bill does not do that.

DON'T REPEAL AFFORDABLE CARE ACT—MAKE BIG FIXES

The SPEAKER pro tempore. The Chair recognizes the gentlewoman from Connecticut (Ms. DELAURO) for 5 minutes.

Ms. DELAURO. Mr. Speaker, the healthcare plan supported by President Trump and Speaker RYAN will raise premiums and deductibles.

Let's tell the truth here on the floor of the House of Representatives. It will raise premiums and deductibles. It will throw millions off of their insurance. It will shift the cost of health care to the States who are fiscally strapped today, causing a rationing of care at the State level. And, yes, it will cover less and less people and raise the insecurity that people have today about whether or not, if they get an illness or someone in their family does, they are going to have healthcare coverage.

The result is that working people, older Americans, will pay more; and, in fact, with older Americans, it will impose an age tax. The irony of this is that working people and older Americans are going to be paying for the tax breaks in this bill, tax breaks to millionaires and to billionaires. I will explain.

The nonpartisan Congressional Budget Office recently estimated that 14 million Americans will lose coverage in 2018; 24 million Americans will lose their insurance coverage by 2026. In my State of Connecticut, 220,300 individuals are projected to lose their health insurance by 2026.

Again, older Americans will be hit the hardest. They will see their premiums spike. Yes, it is an age tax. And the reckless cuts in this bill rob, in addition to this, it robs the Medicare trust fund, which people rely on, of over $170 billion, shortening the life of that trust fund by years. Long-term care that older Americans rely on will be hurt, as well as folks who are disabled. And children will be hurt as well.

Over the next 10 years—and again, these are not my numbers, but the Joint Committee on Taxation estimates that two of the tax breaks in the repeal bill will provide $275 billion in tax cuts to individuals who have an income over $200,000, and nearly $190 billion will go to tax cuts for health insurance companies.

Do we believe that they are hurting?

It is also going to provide a tax break for drug companies, for pharmaceutical companies.

Are they hurting today? No. They are reaping profits every single day. That is the case with medical device manufacturers as well.

While the wealthiest Americans and corporations reap the benefits of this Trump bill and Ryan bill, roughly 160 million households with incomes below that $200,000 level will pay for the repeal of these taxes.

I have heard from thousands of my constituents about how the Affordable Care Act has positively impacted their lives. I have submitted testimony for the record from women in my district who depend on the Affordable Care Act to manage life-threatening illnesses, get back to work, get them the mental health services that they need.

Just think of that injustice when you think about Mnikesa Whitaker, whom I spoke to just 2 weeks ago. She has an autoimmune disease which is called scleroderma. I regret to say that this has put her life in danger, but she now has the protection because she is no longer threatened by preexisting conditions. In her words, she said: ''I will die without the Affordable Care Act.''

We have a moral obligation not to let Mnikesa or others down. We have an obligation to older Americans and to the middle class of this country, to working people. The Affordable Care Act needs to be changed in critical ways. Premiums and deductibles are way too high and are putting too much strain on families who barely make enough to live on. We know that because their wages have not kept pace with rising costs. There is not enough competition in the marketplaces.

But instead of repealing the Affordable Care Act, we should be working our hearts out to make the big fixes that are necessary. But my friends, that starts with defeating this wrong-headed bill.

□ 1045

LET'S COME TOGETHER TO MAKE MEANINGFUL PROGRESS

The SPEAKER pro tempore. The Chair recognizes the gentleman from Florida (Mr. LAWSON) for 5 minutes.

Mr. LAWSON of Florida. Mr. Speaker, the Republican plan to repeal and replace the Affordable Care Act is an exercise in smoke and mirrors.

This proposal would give tax breaks to wealthy Americans by burdening hardworking families with higher healthcare costs.

The Republican plan allows for soaring new healthcare costs for our seniors and shortens the life of the Medicare trust fund, endangering seniors and disabled Americans who depend on Medicare coverage.

The nonpartisan Congressional Budget Office estimates that if the Republican proposal became the law of the land, some 14 million people will be without healthcare insurance in 2018, and up to 24 million could lose their healthcare coverage by the year 2026. The CBO also found that average premiums for people buying insurance on their own would be 15 to 20 percent higher in 2018 and 2019 than they would under current law.

In my home district, the uninsured rate has gone from 18.7 percent to 14.9 percent since the Affordable Care Act was implemented, and 34,000 people have purchased coverage thanks to the ACA. Those people are now at risk of losing their healthcare coverage if the Republican plan becomes law. This is completely unacceptable to Floridians.

We know that the Affordable Care Act is not a perfect law, and there is a lot of room for improvement. That is what we should focus on in Congress right now: coming together to figure out ways to bring down healthcare costs, stabilize the market, and help ensure that more people can have access to the affordable health care they need and deserve.

We need to put aside the partisan bickering, roll up our sleeves, and get to work. It is a sad day in America when Members of Congress are unable to come together to do what is right for the American people. I will continue to fight to ensure that Floridians with preexisting conditions don't have to worry about losing their healthcare costs, and that young adults can stay on their family's insurance until they reach age 26.

I urge my colleagues to remember that no roads or bridges were ever built by Democrats or Republicans. No war was ever won by Democrats or Republicans. From Social Security to Medicare, to putting a man on the Moon

and tearing down the Berlin wall, none of these milestones in our history was accomplished by one particular political party. They are a result of public servants coming together to solve the great challenges of our time.

This is the challenge that lies before us: we must find a way to come together to make meaningful progress for the American people.

PEOPLE NEED BETTER HEALTH CARE

The SPEAKER pro tempore. The Chair recognizes the gentleman from New York (Mr. NADLER) for 5 minutes.

Mr. NADLER. Mr. Speaker, President Trump and Speaker RYAN have said that the Affordable Care Act that we have now is a disaster, that it is a calamity.

There are problems with it. For some people in some plans, premiums are too high.

So what do the Republicans want to do?

Raise the premiums.

For some people in some plans, deductibles are too high.

So what do the Republicans want to do?

Make the deductibles much higher.

Let's get away from the rhetoric about the Affordable Care Act and look at what the Republicans plan to do with the bill that we are going to be voting on presumably in the next few days: raise the premiums, raise the deductibles.

They say that you will not be disqualified for preexisting conditions and that you will still be able to get insurance, but not if you let your coverage lapse in 6 months. If you are laid off from your job and you lose your insurance and 6 months later you get insurance, no, you are going to have to pay a 30 percent higher premium in order to get coverage. So their guarantee is worth nothing.

What does the bill that we are going to be voting on do?

This bill would throw 24 million people off of coverage. Twenty four million Americans would lose their health care, the security of mind that they have now. This bill would destroy about 2 million jobs. This bill would force families to pay higher costs, higher premiums, higher deductibles.

The nonpartisan Congressional Budget Office estimates that a 50- or 60-year-old person making $26,000 and who, under ObamaCare, is paying, after the subsidies, out of pocket $1,700 a year for health insurance, will, under this new Republican bill, after the appropriate subsidies that this bill will give, pay not $1,700, but $14,000 on a pretax income of $26,000.

So this bill will increase costs, throw 24 million people off of coverage, and impose an age tax. People above 50 years old will have to pay five times as much as younger people for insurance, a very crushing age tax.

Why? Why do this?

Because they say people need more freedom to choose their health care.

People don't need more freedom to choose their health care. People need better health care. They need coverage. They need security. They need coverage that will take care of their health needs at a low cost. That is what they need.

The ObamaCare, the existing bill that we have, the Affordable Care Act, gives them that, not as well as it should. We should make improvements to it. It is not an improvement to throw 24 million people off of coverage, increase the cost, and institute a crushing age tax.

Why?

It is to give a tax benefit of $2.8 billion to the richest 400 families in the United States. This bill would be the largest transfer of wealth from low- and mostly middle-income people to the top 1 percent in American history.

Let me just address one last thing. People are being bribed to vote for this bill. People are being bribed legally. Provisions are being put in the bill to say: Hey, if you vote for this bill, you will benefit, your State will benefit.

Okay. There is nothing wrong with that. It has been done before.

Let's take a look at one of those bribes, the so-called New York bribe. New York, along with 15 other States, takes advantage or utilizes a provision in the law that has been in the law since 1965 in Medicaid in which the State share of Medicaid is borne partially by the State and partially by local governments. Sixteen States have elected to do that.

This bill says that New York State only will be prohibited from sharing the burden of Medicaid with local governments. So $2.3 billion will be shifted from various local governments onto the State's taxpayers, except for New York City. Upstate counties will lose their share. New York City will have to keep it. The State will have to bear the burden. So it is a $2.3 billion increase for State taxpayers.

Now, eight Republicans, we are told, from upstate New York are going to vote for this bill just because of that. They don't like the bill in other respects, but because of that provision, which will relieve some of the burden from local counties, they are going to vote for the bill; and they say so. Representative COLLINS of New York said so. He would vote for that bill. He got a number of other people to agree. That is why the provision is in the bill.

Okay. But it is not going to happen. It is flatly unconstitutional. They are selling their votes for something that is never going to happen, and that is just wrong. This bill should not be approved. It is a sellout to the people of the entire country.

BUILD ON AFFORDABLE COVERAGE

The SPEAKER pro tempore. The Chair recognizes the gentlewoman from Florida (Ms. CASTOR) for 5 minutes.

Ms. CASTOR of Florida. Mr. Speaker, I am here today on the floor of the House to speak out on behalf of my neighbors back home in the State of Florida. I represent a district in the Tampa Bay area. Let me tell you, they are very concerned about the impact of this Republican healthcare bill.

What we know about the bill so far, based upon the report of the nonpartisan Congressional Budget Office, is that the Republican bill will rip coverage away from at least 24 million Americans. This is at a time when we have made such progress since the adoption of the Affordable Care Act.

Under the Affordable Care Act, about 20 million Americans have gained coverage, including about 1.7 million of my neighbors in Florida that went shopping on healthcare.gov and found an affordable option.

The Republican bill would take us backwards. It would also impose huge cost increases on everyone. Let me tell you, most people in America have their insurance through their employer. And under the Affordable Care Act—it hasn't been perfect—what we have seen in the State of Florida between the years 2010 and 2015 is the rate of increase for my neighbors who have their insurance through their jobs has been kept in check. The rate of increase has only been 1.3 percent. Before the adoption of the Affordable Care Act, the rate of increase was well over 8 percent.

Why is this happening?

If you have insurance through your job, you want other people to have insurance coverage. That is very important because, if more Americans don't have insurance coverage, they show up in the emergency room and that cost is passed along to those who have coverage or those on Medicare, or the hospital has to take on bad debt, or local governments have to raise taxes to cover that care.

Under this Republican bill, hold on to your wallet because that insurance coverage now will be unaffordable for millions of more Americans. If you have insurance through your job, like most people do, you are now going to end up picking up the cost of people that can no longer afford coverage.

If you are a little bit older, easing into Medicare—maybe you are 50 to 64—hold on to your wallet. There is a huge age tax in this Republican bill.

I will give you an example from a neighbor of mine back home. Her name is Kathy Palmer. She lives in Tampa. She works two part-time jobs. She works for an accountant. It is a small business. They cannot afford to provide insurance through their small business. She is also working to get her degree in accountancy from the University of South Florida. Kathy has two part-time jobs. She is age 60. She is going to school to get a degree. She has a teenager in high school. She couldn't afford insurance coverage before the Affordable Care Act. When the Affordable Care Act was adopted, she could go

shopping on healthcare.gov and get some tax credit help to help afford coverage.

Here is what happened to Kathy in December. She had heart pains. She thought she was having a heart attack. She went to the emergency room of one of our great local hospitals. Thank goodness, she did not have a heart attack.

Kathy almost had a heart attack, however, when she got the hospital bill later. The hospital bill was $70,000. That would bankrupt her. Fortunately, she had coverage through the Affordable Care Act at healthcare.gov, and ultimately what she paid on that hospital bill was only $179.

This story is repeated over and over again, and I simply do not understand why my Republican colleagues think it is wise to make coverage unaffordable and increase cost on all Americans.

Mr. Speaker, the other part of this bill that is kind of flying under the radar, but is quite insidious and rather unconscionable is the hatchet it takes to the 50-year guarantee that is provided to Americans under Medicaid.

Medicaid serves our neighbors with Alzheimer's. It pays about two-thirds of the cost of long-term care and skilled nursing, the cost of care for the disabled, many children, many pregnant women. It has been the law for about 50 years to ensure that, in the United States of America, if you have a child born with a complex medical condition or you have a parent or grandparent that has to go into a nursing home, that your family is not going to be impoverished. That is a valued decision we made 50 years ago.

In this bill, the Republican leadership intends to go back on our values and pull the rug out from under our families who rely on Medicaid services. They say: Oh, the States will be able to do this. The States will have all the flexibility in the world.

Well, flexibility is a canard for they are going to have less, and we are going to ration care.

Mr. Speaker, I urge my Republican colleagues to pull this bill, to build on affordable coverage, to build on the cost savings that we have made and the progress we have made for these families.

□ 1100

HEALTH CARE OUGHT TO BE A RIGHT AND NOT A PRIVILEGE

The SPEAKER pro tempore. The Chair recognizes the gentleman from Illinois (Mr. DANNY K. DAVIS) for 5 minutes.

Mr. DANNY K. DAVIS of Illinois. Mr. Speaker, let me thank you for giving me the opportunity to once again express my opposition to the repeal-and-replace healthcare bill before us.

You know, it is my position that health care ought to be a right and not a privilege, especially in a country where we have the skill, the knowledge, and the technology to provide it.

Medicare and Medicaid opened up new opportunities for health care for seniors and large numbers of low-income, poor people in this country in the mid-1960s. As a matter of fact, before Medicaid and Medicare, some of them had never ever been able to acquire any professional medical help. As a matter of fact, they lived off remedies and concoctions and things that they had learned how to put together.

Now we come along with some help—Medicare, Medicaid—and the next big move was the Affordable Care Act, which was a long time coming, but it helped us move to the point where more than 20 million people were able to get health insurance who had never had it before, whose only outlet was to go to the emergency room of public hospitals and oftentimes sit sometimes for 2 or 3 days before they got service, before they got attention.

Now, here we come with something talking about repealing it, taking it away. How could we possibly want to go backwards, back to where millions of people are wondering every day whether or not they are going to be able to go to the doctor and get serviced if they are sick?

And so I say to my colleagues, especially those who have never had the experience of knowing hundreds of people with no care like I have, let's say: No, no, no. Forward ever, backwards never.

DON'T WALK THE PLANK

The SPEAKER pro tempore. The Chair recognizes the gentlewoman from Illinois (Ms. SCHAKOWSKY) for 5 minutes.

Ms. SCHAKOWSKY. Mr. Speaker, it was 7 years ago today that the Affordable Care Act passed and changed the lives of so many millions of Americans who previously couldn't get health care. But I think we knew even at the time that a big bill like this, a transformative piece of legislation like this, over time would require some changes, just as Social Security and Medicare have done.

The truth of the matter is, for 7 years, as we heard Republicans complaining about what was happening, we said: Let's sit down together, as Members of Congress, representatives of the people, and fix what we have got and build on the things that have made it possible for all these millions of people to have not only health care, but better health care.

Instead, what we heard over and over again is: Repeal ObamaCare; repeal ObamaCare. And I kind of feel like today what we have is, because they said that, then they feel like they have to fulfill a promise. But if you look at what they are offering, it really hurts so many Americans.

What I hope the American people will understand is that the so-called repeal-and-replace bill raises the cost of premiums and out-of-pocket costs. People are going to pay more and get less.

Twenty-four million people—that is just a start; it ends up being some 50 million people after some years—will lose their coverage altogether.

It represents the single largest transfer of wealth to the top richest Americans and corporations. We are talking about $600 billion in tax relief. There is not a lot of talk about that. In many ways, this is a tax cut for the richest being masked as a healthcare bill.

Finally, I want to really focus in on what we call the age tax. Well, before I was a senior citizen myself, I have worked with older Americans in the State of Illinois, where I am from, and here in Congress as well.

So what is this age tax? This bill says that people who are between the age of 50—not very old—and 64, in other words, pre-Medicare, will be allowed to be charged five times more than young people for their health care. Actually, it allows the States even to go more than five times more for their health care. It will lower the subsidies.

As has been said many times, here is just an example. If you are 64 years old with an income of around $26,500—which, by the way, is the median income for people that age, certainly not a wealthy person—you would pay, under this bill, the Republican bill, $14,600 for premiums—think of that—as compared to $1,700 today, an increase of $12,900. So it is not surprising that the Congressional Budget Office predicts that many of those people will simply have to give up their health care.

The reason they want to charge them more is to entice younger people, who will then pay lower premiums, to actually get on the program. We are all for that. We want to make sure that young people get on. But people who are 50 to 64 are very likely, or more likely than young people, to have healthcare issues.

It is absolutely no wonder that so many organizations and forces are lining up in the United States to oppose this bill:

The American Medical Association, the doctors, and all the different subgroups of doctors, have written letters saying no to this repeal-and-replace.

The American Hospital Association, not only urban hospitals and hospitals in medically underserved areas, rural hospitals could go under.

The AARP, 35 million members strong, is absolutely dead set—they are running ads; some people may have seen them on television—against this legislation.

The American Nurses Association, conservative think tanks are against it, and many Members of Congress are against it—and for good reason. One of our Republican Senators said to House Republicans: Don't walk the plank.

I would suggest they take that advice and vote ''no.''

KEEPING PROMISES

The SPEAKER pro tempore. The Chair recognizes the gentleman from Florida (Mr. GAETZ) for 5 minutes.

Mr. GAETZ. Mr. Speaker, the repeal and replacement of ObamaCare is about keeping promises and being worthy of the American people's trust.

We, for the third time in American history, have unified Republican control of the government: a Republican in the White House and Republican control of the House of Representatives and of the Senate. In the last five campaigns, one out of every four ads was about health care, so it is our turn to lead.

Here is what we know: ObamaCare today is failing. It is failing to meet the promises that were made that people could keep their doctor or keep their plan. It is failing to be affordable for those who see rising premiums, rising deductibles, no choices, no health care at all, and limited access.

As Republicans leading in this Chamber, we are on a rescue mission to save the American people from this disaster and to replace this law with something that works and gets us away from government-centered health care and moves us to patient-centered health care, doctor-centered health care.

You know, we believe in ownership societies where you ought to be able to own your own healthcare plan, own your own decisions about education and how you choose to prosper.

Today, the Rules Committee is contemplating amendments that should excite conservatives with generational changes that will unlock the potential of this great country.

State flexibility, for the first time, we really see the option for States like mine in Florida to step up and say we don't want the Federal Government involved in health care anymore. We want to take control over those who are vulnerable in our communities, and we want to innovate and come up with solutions that meet those challenges.

Work requirements, hardworking people in my district don't understand why they go to work every day but too often they are paying for entitlements for people who are able-bodied, childless, can work, and choose not to. That is wrong.

We are going to take up, on this floor, legislation that I suspect will have a work requirement for able-bodied, childless adults for those States who choose to implement this bold conservative reform.

We also expect that there will be an end to the disaster of Medicaid expansion. Today in America, one out of every four people is on Medicaid. That is absolutely unsustainable. It means three of us have got to pay for the cost of our own health care and then a substantial portion of the cost of someone else's.

By ending Medicaid expansion for nonexpansion States, we put the country back on a path to prosperity—not government-centered health care, individual patient-centered health care where people can choose the plans that best meet their needs.

If we do this, if we meet this challenge with our historic opportunity to lead, then the American people will know that we are worthy of their trust. We are keeping our word, and we will repeal and replace health care.

RECESS

The SPEAKER pro tempore. Pursuant to clause 12(a) of rule I, the Chair declares the House in recess until noon today.

Accordingly (at 11 o'clock and 12 minutes a.m.), the House stood in recess.

□ 1200

AFTER RECESS

The recess having expired, the House was called to order by the Speaker at noon.

PRAYER

Dr. Tom Smiley, Lakewood Baptist Church, Gainesville, Georgia, offered the following prayer:

In the name that is above every name, in the name of the One by whom all things were created and by whom all things created are sustained, in the name of the One who was crucified for the sins of all people, raised on the third day, and who, upon His return, every knee will bow and every tongue confess is Lord, in the name of Jesus, my Savior and my Lord, today, I ask:

Draw near unto thyself the heart of any in this body who still remain far from You.

Give confidence and courage to all who govern from this House, to be unashamed of the Judeo-Christian ethic, which has led this Nation to prominence and prosperity above all other nations.

And Father, remind all, who by faith trust You that Your love wants what is best for us, Your wisdom knows what is best for us, and Your power will accomplish what is best for us.

In Jesus' name and God's people.

Amen.

THE JOURNAL

The SPEAKER. The Chair has examined the Journal of the last day's proceedings and announces to the House his approval thereof.

Pursuant to clause 1, rule I, the Journal stands approved.

PLEDGE OF ALLEGIANCE

The SPEAKER. Will the gentleman from New York (Mr. JEFFRIES) come forward and lead the House in the Pledge of Allegiance.

Mr. JEFFRIES led the Pledge of Allegiance as follows:

> I pledge allegiance to the Flag of the United States of America, and to the Republic for which it stands, one nation under God, indivisible, with liberty and justice for all.

WELCOMING DR. TOM SMILEY

The SPEAKER. Without objection, the gentleman from Georgia (Mr. COLLINS) is recognized for 1 minute.

There was no objection.

Mr. COLLINS of Georgia. Mr. Speaker, I rise today to recognize Dr. Tom Smiley, whose compassion and character have made him a true leader in Gainesville and northeast Georgia.

Dr. Smiley grew up in Gumbranch, Georgia, where he received his call to preach. After graduating from Blue Mountain College in Mississippi, Pastor Tom attended Southeastern Baptist Theological Seminary and Columbia Theological Seminary, where he obtained his doctorate in ministry, with an emphasis on marriage and family ministry.

As senior pastor of Lakewood Baptist Church, Dr. Smiley has led the congregation—including my own family—for over 25 years. The vision for Lakewood is to be a regional church that raises up fully devoted followers of Christ who are trained and equipped to love and reach lost people, locally and globally.

In addition to his work at church, Pastor Tom has established himself as a successful writer, authoring three books: ''Runaway Lives,'' ''Angels All Around,'' and ''Uncommon Common Sense.''

Dr. Smiley is engaged with the Gainesville community at every level, and our neighbors have enjoyed his contributions as a Little League baseball and basketball coach, as well as the work that he does at the community YMCA branch.

Dr. Smiley is my pastor and friend, and in every aspect of his life, he leads with grace and devotion. I am proud to welcome him here to our Nation's Capitol in Washington, D.C.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore (Mr. POE of Texas). The Chair will entertain up to 15 further requests for 1-minute speeches on each side of the aisle.

OBAMACARE FAILED THE AMERICAN PEOPLE

(Mr. WILSON of South Carolina asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. WILSON of South Carolina. Mr. Speaker, ObamaCare has failed the American people destroying jobs. All across South Carolina, premiums have skyrocketed, small-business jobs have been terminated, and our State is now down to a single insurance provider on the exchange. This is not what families were promised 7 years ago.

With the American Health Care Act, House Republicans have delivered on the commitment to give Americans a healthcare system that increases choice, creates jobs, and puts the patient back in control. This bill protects

those with preexisting conditions, returns power to the States, allows young adults to remain on their parents' insurance until they are 26, and increases consumer choice. This is a critical first step of three to repeal and replace ObamaCare.

I am grateful that the American Health Care Act is supported by the NFIB, the Susan B. Anthony List, Americans for Tax Reform, the U.S. Chamber of Commerce, the National Taxpayers Union, the Institute for Liberty, the Small Business and Entrepreneurship Council, and dozens of other advocates promoting creating jobs.

In conclusion, God bless our troops, and we will never forget September the 11th in the global war on terrorism.

TRUMPCARE

(Mr. CICILLINE asked and was given permission to address the House for 1 minute.)

Mr. CICILLINE. Mr. Speaker, Republicans are planning to vote tomorrow to pass TrumpCare.

This bill is a great deal for the superrich, it is a great deal for insurance companies, and it is a great deal for drug companies. But it is a bad deal for working men and women across our country.

TrumpCare will raise premiums, increase deductibles and out-of-pocket expenses.

TrumpCare ends coverage for 24 million people.

TrumpCare destroys 2 million jobs.

TrumpCare imposes an age tax on older Americans.

And TrumpCare cuts Medicaid by $880 billion to give corporations and the wealthiest Americans a $600 billion tax cut—the single largest transfer of wealth from working people to the rich in history. This is wrong.

The American people do not want this bill. They don't want to pay more for less.

Donald Trump promised that he would be a great champion for the middle class. It only took him 2 months in office to break that promise and sell out to the wealthy and the special interests. Shame on him and shame on anyone who votes to take away health coverage from working men and women to fund a big tax cut for folks who don't need it. The working people of this country deserve better.

AMERICAN HEALTH CARE ACT BRINGS MEDICAID ACCOUNTABILITY

(Mr. PITTENGER asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. PITTENGER. Mr. Speaker, I rise in support of the American Health Care Act and, specifically, the critically important reforms to Medicaid, in addition to the other great reforms that will bring cost-effective health care to this country.

For 50 years, Medicaid has been a blank check to the States with little accountability and rampant fraud. During my time in the North Carolina Senate, we found as much as 20 percent waste, fraud, and abuse in Medicaid.

In response, I have worked with SAS, a major technology firm, to develop accountability and oversight. North Carolina is now a leader in Medicaid fraud recovery.

Under the American Health Care Act, Medicaid replaces an open blank check with commonsense per capita or block grant allotments for each State. This incentivizes States to follow North Carolina's lead and clean out the bad actors exploiting eligibility and the providers taking advantage of Medicaid at the expense of America's most vulnerable.

Conservatives have championed these reforms for decades. Now is our opportunity to bring accountability to Medicaid.

I urge my colleagues to vote ''yes'' on this great reform.

UN-AMERICAN HEALTH CARE ACT TAKES US BACKWARD

(Mr. HECK asked and was given permission to address the House for 1 minute.)

Mr. HECK. Mr. Speaker, let's make this clear. The Un-American Health Care Act doesn't just repeal advances with ObamaCare, it takes us backward to a point worse off than we were before the Affordable Care Act.

It guts Medicaid, and will fail to meet existing needs, hurting vulnerable children, pregnant women, people with disabilities, and seniors needing long-term care, hurting them all.

It abandons Planned Parenthood services. Women with nowhere else to turn will lose access to critical services like pelvic exams and pap tests.

I am here today speaking on behalf of single mom Sherry, cancer survivor Marty, star student Kelty, and little Gracie and her devoted grandmother Donna.

We are all one voice saying we cannot afford to make the American healthcare system even worse than it was before ObamaCare. That is the path the un-American Health Care Act will carve. My friends, let's not go down that path. Vote ''no.''

REPUBLICAN HEALTHCARE BILL

(Ms. JUDY CHU of California asked and was given permission to address the House for 1 minute.)

Ms. JUDY CHU of California. Mr. Speaker, Republicans rushed their pay more for less healthcare bill through committees before CBO even had a chance to score it. And then, once they realized that 24 million people would lose coverage, they made late night additions just 2 days before the House is scheduled to vote.

Americans' health care is too important to be done on an artificial deadline. It is too important for people in my district like Rachel. Rachel is a hairdresser in her midthirties, who was finally able to get health coverage for her husband and three children, thanks to the ACA. But under the Republican plan, their coverage will be replaced by tax credits that don't even come close to meeting the healthcare costs for a family of five.

And there are millions just like her struggling to make ends meet. Instead of abandoning people like Rachel to give tax breaks to the wealthiest few, I urge Republicans to do what even Trump promised—provide health insurance for everybody. That starts with rejecting this bill.

PAY MORE AND GET LESS WITH TRUMPCARE

(Mr. JEFFRIES asked and was given permission to address the House for 1 minute.)

Mr. JEFFRIES. Mr. Speaker, under the Republican healthcare plan, TrumpCare, hardworking Americans will pay more and get less. Your premiums will increase. Your copays will increase. Your deductibles will increase. Your out-of-pocket costs will increase. But the quality of your health care will go down.

Tens of millions of Americans under TrumpCare will also lose their entire health coverage. And under the Republican healthcare plan, it will impose a draconian age tax on people between 50 and 64, some of whom will be forced to pay approximately $14,000 per year.

Trump has said he is going to do health care in three phases. I have finally figured it out. Phase one, disease. Phase two, disaster. Phase three, destruction. Vote ''no'' against this reckless plan.

HARDWORKING AMERICA NEEDS A TAX BREAK

(Mr. HIGGINS of New York asked and was given permission to address the House for 1 minute.)

Mr. HIGGINS of New York. Mr. Speaker, tomorrow House Republicans will perpetrate a careless financial assault on good, hardworking America in exchange for a massive payoff to greedy insurance executives and their cronies. Yes, this vote is rigged against the good.

If you are 50 to 64 years old, you and your family get clobbered. More doughnut holes, more premiums, and less health care.

UnitedHealthcare, one of America's largest private insurers, is today under investigation for defrauding the Medicare program of billions of dollars. Your bill, in 17 words on page 67, rewards UnitedHealthcare, their executives and cronies, with a massive tax cut. UnitedHealthcare made $83 billion last year, and their CEO was compensated with $66 million. They don't need a break. Hardworking America does.

Your bill also allows UnitedHealthcare to charge five times more for older Americans, and imposes a 30 percent unemployment tax on the unemployed, all going to more profits for them and less health care for America.

STANDING AGAINST TRUMPCARE

(Mrs. BUSTOS asked and was given permission to address the House for 1 minute.)

Mrs. BUSTOS. Mr. Speaker, during the last few weeks, my office has heard from literally hundreds of concerned Illinoisans about TrumpCare.

I have heard from a heart attack survivor, whose prescription medication would go from affordable to $1,000 a day under this plan.

I have heard from Americans ages 50 to 64—I happen to be in that group—who are worried about paying an age tax of five times more than others.

Just in the last 24 hours, I have heard from two more groups that are standing against TrumpCare. And, no, they are not partisan political groups.

The first is the Illinois Health and Hospital Association, which represents more than 200 hospitals in the State of Illinois. They oppose TrumpCare because it means taking health coverage away from hundreds of thousands of Illinoisans, while killing the jobs of another 60,000 hardworking people in my State.

The second group is the National Farmers Union. They understand that TrumpCare's drastic cuts could force hundreds of rural hospitals to close their doors.

So I am left wondering, who exactly supports TrumpCare? Instead of throwing 24 million Americans off their coverage, let's work across the aisle to improve health care for all, not just the richest among us.

□ 1215

AMERICAN HEALTH CARE ACT IS BAD FOR NEW YORK HOSPITALS

(Mrs. CAROLYN B. MALONEY of New York asked and was given permission to address the House for 1 minute.)

Mrs. CAROLYN B. MALONEY of New York. Mr. Speaker, the GOP's awful, irresponsible healthcare bill will impose an age tax on older Americans, it will raise your premiums, and it will be absolutely disastrous to our Nation's hospitals.

In my district in New York, our hospitals serve millions of people every day, and their budgets are already stretched. The GOP healthcare bill will rip away health insurance for over 24 million Americans, forcing more people to get care in high-cost emergency rooms while, at the same time, cutting billions in Federal funding hospitals need to survive.

New York's hospitals will lose over $1 billion in 2018 alone. With uncompensated care already skyrocketing, the 27 New York hospitals that are already on a financial distress watch list tell me they may not even be able to survive. That is why the Greater New York Hospital Association, the Healthcare Association of New York State, and other New York health groups are urging all of us to vote ''no'' on this terrible GOP bill.

OPPOSING THE GOP AMERICAN HEALTH CARE ACT REPEAL BILL

(Ms. BLUNT ROCHESTER asked and was given permission to address the House for 1 minute.)

Ms. BLUNT ROCHESTER. Mr. Speaker, I know that I am new to the House, but I was elected by my constituents to reach across the aisle and get things done.

Sadly, instead of reaching across the aisle to work on commonsense fixes to the Affordable Care Act, some of my Republican colleagues have decided to push through a healthcare bill that, instead of increasing health coverage, actually takes it away from more than 24 million people and imposes an age tax.

In my State alone, this bill will cut Medicaid coverage for 60,000 individuals and result in a $170 million loss of Federal funds at a time when my State is facing a major budget shortfall. Additionally, almost 22,000 individuals in my State will lose access to employer-sponsored insurance, and more than 6,000 individuals who are currently receiving coverage through our healthcare exchange will lose coverage as a result of this bill.

Mr. Speaker, given its impact on our Nation's working families and our most vulnerable citizens, I believe passage of this bill would be an act of medical malpractice—pun intended. So I urge all of my colleagues to vote ''no'' on H.R. 1628.

WILL THOSE CHAMPIONING TRUMPCARE TRADE PLACES WITH THOSE WHOM IT HARMS

(Ms. PINGREE asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. PINGREE. Mr. Speaker, since the Republicans in Washington have not held a single public hearing on TrumpCare, I asked my constituents directly for feedback at a Maine healthcare townhall. Not one of the hundreds of constituents spoke in support of the legislation. Instead, many said they will be among the millions of Americans who will lose their coverage under this bill.

One of those voices was Ed Saxby of Cape Elizabeth, pictured on the board next to me. Ed stood beside his wife and granddaughter as he bravely spoke about his own battle with cancer. He said that the odds of survival are against him because TrumpCare will take away the tax credits he needs to afford healthcare coverage as a retiree living on a fixed income.

Ed's wife, Jill, asked me if those who are championing TrumpCare would be willing to trade places with those whom it will harm.

I pose that question today to my Republican colleagues. If you can't answer in the affirmative, you should not be voting for this terrible bill.

TRUMPCARE BENEFITS THE SUPERRICH

(Ms. TITUS asked and was given permission to address the House for 1 minute.)

Ms. TITUS. Mr. Speaker, the GOP's disastrous healthcare proposal is really just the largest transfer of wealth to the superrich in this Nation's entire history. In fact, it gives the top 1 percent of earners a windfall of tax breaks and subsidies.

The superrich are going to be able to buy a lot of things with this new money. It has been estimated they could buy: one Lamborghini, 26 Rolex watches, or 44 sets of Super Bowl tickets.

Thanks to this tax cut, in effect, you are shifting wealth from Main Street to Mar-a-Lago, from middle America to Mar-a-Lago, from my district to Mar-a-Lago. Forty-four thousand people in my district in southern Nevada will lose their health insurance according to the Center for American Progress.

Our President said, well, he didn't know—not our President. He is not my President. Anyway, he said he didn't know health care could be so complicated. Well, if you look at this bill, it is really not very complicated. It is quite simple:

Premiums go up, benefits go down; deductibles go up, coverage goes down; prices go up, healthcare for women goes down.

Vote ''no'' on this bill.

RECOGNIZING FIREFIGHTERS AND FIRST RESPONDERS IN OVERLAND PARK, KANSAS

(Mr. YODER asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. YODER. Mr. Speaker, I rise today to shed light on a recent eight-alarm fire in my district and to thank the firefighters and other first responders for making sure that no one was seriously hurt.

The fire on Monday destroyed an apartment complex and 22 neighboring homes. Amazingly though, no one was killed or seriously injured. Three firefighters were treated for their injuries while fighting the fire, and we wish them a speedy recovery.

It is a reminder of the risks that our first responders take every day, not knowing when they will have to answer the call, placing their lives on the line to protect us and our community.

We pray for the families who are displaced right now, who came home from work on Monday to find their homes

gone. We also thank the Christ Lutheran Church and many other community organizations and partners that have come together to assist these families who have lost so much so unexpectedly.

Finally, Mr. Speaker, thank you to Overland Park Fire Department Chief Bryan Dehner and all of the firefighters in Kansas who came together to contain the largest fire in Overland Park history.

AMERICAN HEALTH CARE ACT MAKES US INSECURE

(Mr. PANETTA asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. PANETTA. Mr. Speaker, I rise today in opposition to the American Health Care Act and the repeal of the Affordable Care Act.

Since the passage of the Affordable Care Act 7 years ago, in my district, the uninsured rate has dropped from 19 percent to 9 percent. In my district, there has been the creation and the funding of 6,500 jobs in local hospitals and rural healthcare clinics.

Yet, despite this progress in my community and across our country, the majority wants to replace the ACA with a quickly and carelessly crafted AHCA.

If the AHCA becomes law, in my district, 56,000 people will lose their healthcare coverage. In Salinas, hardworking families will pay more than $3,000 for healthcare coverage; and in Santa Cruz, low-income senior citizens will be stripped of $10,000 worth of subsidies.

Yes, the ACA does have its faults, but we should come together to thoughtfully fix it. But it is not just about money; it is about people. And it is not just about people; it is about the security that the ACA provides people to live their daily lives.

Mr. Speaker, the AHCA makes us insecure, and that is why I am voting against it.

ACA AND THE STRONGER GENERATION

(Ms. CLARK of Massachusetts asked and was given permission to address the House for 1 minute.)

Ms. CLARK of Massachusetts. Mr. Speaker, the President and I do agree on one thing: designing a healthcare system is complicated.

But the effects of TrumpCare are as simple as they are devastating: 24 million hardworking Americans will lose their coverage; your healthcare costs and premiums will go up, and your coverage will go down; and for those of us between the ages of 50 and 64, we are about to be hit with an age tax just when we need coverage the most, just when we are trying to help with college tuition and save for our retirement. As we face an opiate crisis in this country that takes 120 American lives a day, TrumpCare will close the door on treatment for over 1 million Americans.

Our President tells us that he is a dealmaker. This is the ultimate bad deal for the American people, and we should reject this bill.

STAND AS PATRIOTS AGAINST TRUMPCARE

(Ms. JACKSON LEE asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. JACKSON LEE. Mr. Speaker, this morning I came in contact with two mothers of two young boys who are homebound with catastrophic illnesses. My heart broke as I listened to them say: The only way that I survive to see their happy face and I can work is because they have insurance through extensive Medicaid.

And so I come today to ask my friends on the other side of the aisle not to worry about threats about losing your office or your job. This is about patriotism and being an American. Vote against this horrible TrumpCare debacle that will create higher cost, less coverage, and an age tax that will hurt the old and devastate the young.

This is a time for the flag to be waved and for patriots to stand and to be heard across America. Vote down TrumpCare not for self and selfishness, but really to be able to stand with those who cannot help themselves.

I wanted to embrace those mothers as a mother, as a grandmother, because we are giving life to those beautiful children, now 9 and 10, living because they got health care under the Affordable Care Act. Stand as a patriot against TrumpCare.

WINNERS IN TRUMPCARE BILL

(Mrs. DAVIS of California asked and was given permission to address the House for 1 minute.)

Mrs. DAVIS of California. Mr. Speaker, I understand that major laws often have winners and losers. Unfortunately, I am struggling to figure out who wins under this healthcare plan.

We have seen who stands to lose: 24 million fewer people will have insurance; States will lose billions, forcing painful cuts to education and other services; California, alone, will lose $6 billion in 2020 and much more in the years that follow; hospitals and clinics will have to cut back on services and investments.

So, who are the winners? It is hard to find any, except, of course, for insurance companies and millionaires who will get almost all of the tax relief included in this package.

Do Americans really think that we should pass a bill that cuts coverage in order to give millionaires an average tax cut of $49,000?

We can do better. I hope we will.

BEWARE OF TRUMPCARE

(Mr. CÁRDENAS asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. CÁRDENAS. Mr. Speaker, I stand here with this simple explanation about what TrumpCare really means for Americans: You pay more for less care.

Twenty-four million Americans will lose the access to health care by losing their insurance. It is an age tax on older Americans; and it guts Medicaid that not only goes to seniors now, it goes to young people as well, young families.

But it is also a huge tax cut for millionaires.

If you look at TrumpCare, you realize the great supposed negotiator actually has a great reputation of being the great bankrupter.

What this TrumpCare will do: It will affect tens of millions of Americans, and it will put them into misery, take away the dignity of health care and put them in a place that no one should ever have to be: lacking the dignity of being able to see a doctor. This is going to send us back to the Dark Ages.

You probably think I am exaggerating, but when you look at these facts, you realize that is just the truth. These are the facts.

Beware of what you are being sold. This is not going to help America.

□ 1230

COMMUNICATION FROM THE CLERK OF THE HOUSE

The SPEAKER pro tempore laid before the House the following communication from the Clerk of the House of Representatives:

OFFICE OF THE CLERK,
HOUSE OF REPRESENTATIVES,
Washington, DC, March 22, 2017.

Hon. PAUL D. RYAN,
The Speaker, House of Representatives, Washington, DC.

DEAR MR. SPEAKER: Pursuant to the permission granted in Clause 2(h) of Rule II of the Rules of the U.S. House of Representatives, the Clerk received the following message from the Secretary of the Senate on March 22, 2017, at 9:12 a.m.:

That the Senate agreed to without amendment H.J. Res. 69.

With best wishes, I am,
Sincerely,

KAREN L. HAAS.

COMMUNICATION FROM THE CLERK OF THE HOUSE

The SPEAKER pro tempore laid before the House the following communication from the Clerk of the House of Representatives:

OFFICE OF THE CLERK,
HOUSE OF REPRESENTATIVES,
Washington, DC, March 22, 2017.

Hon. PAUL D. RYAN,
The Speaker, House of Representatives, Washington, DC.

DEAR MR. SPEAKER: Pursuant to the permission granted in Clause 2(h) of Rule II of

the Rules of the U.S. House of Representatives, the Clerk received the following message from the Secretary of the Senate on March 22, 2017, at 11:22 a.m.:

That the Senate passed without amendment H.R. 1228.

That the Senate passed with amendment H.R. 244.

With best wishes, I am,

Sincerely,

KAREN L. HAAS.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, the Chair will postpone further proceedings today on motions to suspend the rules on which a recorded vote or the yeas and nays are ordered, or on which the vote incurs objection under clause 6 of rule XX.

Record votes on postponed questions will be taken later.

TERRORIST AND FOREIGN FIGHTER TRAVEL EXERCISE ACT OF 2017

Ms. MCSALLY. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 1302) to require an exercise related to terrorist and foreign fighter travel, and for other purposes.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 1302

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the ''Terrorist and Foreign Fighter Travel Exercise Act of 2017''.

SEC. 2. EXERCISE ON TERRORIST AND FOREIGN FIGHTER TRAVEL.

(a) IN GENERAL.—In addition to, or as part of exercise programs currently carried out by the Department of Homeland Security, to enhance domestic preparedness for and collective response to terrorism, promote the dissemination of homeland security information, and test the security posture of the United States, the Secretary of Homeland Security, through appropriate offices and components of the Department and in coordination with the relevant Federal departments and agencies, shall, not later than one year after the date of the enactment of this Act, develop and conduct an exercise related to the terrorist and foreign fighter threat.

(b) EXERCISE REQUIREMENTS.—The exercise required under subsection (a) shall include—

(1) a scenario involving—

(A) persons traveling from the United States to join or provide material support or resources to a terrorist organization abroad; and

(B) terrorist infiltration into the United States, including United States citizens and foreign nationals; and

(2) coordination with relevant Federal departments and agencies, foreign governments, and State, local, tribal, territorial, and private sector stakeholders.

(c) REPORT.—Not later than 60 days after the completion of the exercise required under subsection (a), the Secretary of Homeland Security shall, consistent with the protection of classified information, submit an after-action report to the Committee on Homeland Security of the House of Representatives and the Committee on Homeland Security and Governmental Affairs of the Senate presenting the initial findings of such exercise, including any identified or potential vulnerabilities in United States defenses and any legislative changes requested in light of the findings. The report shall be submitted in unclassified form, but may include a classified annex.

(d) DEFINITION.—In this section, the term ''material support or resources'' has the meaning given such term in section 2339A of title 18, United States Code.

SEC. 3. EMERGING THREATS IN THE NATIONAL EXERCISE PROGRAM.

Subparagraph (A) of section 648(b)(2) of the Post-Katrina Emergency Management Reform Act of 2006 (6 U.S.C. 748(b)(2)) is amended—

(1) in clause (v), by striking ''and'' at the end; and

(2) by adding after clause (vi) the following new clause:

''(vii) designed, to the extent practicable, to include exercises addressing emerging terrorist threats, such as scenarios involving United States citizens departing the United States to enlist with or provide material support or resources to terrorist organizations abroad or terrorist infiltration into the United States, including United States citizens and foreign nationals; and''.

SEC. 4. NO ADDITIONAL FUNDS AUTHORIZED.

No additional funds are authorized to carry out the requirements of this Act and the amendments made by this Act. Such requirements shall be carried out using amounts otherwise authorized.

The SPEAKER pro tempore. Pursuant to the rule, the gentlewoman from Arizona (Ms. MCSALLY) and the gentleman from California (Mr. CORREA) each will control 20 minutes.

The Chair recognizes the gentlewoman from Arizona.

GENERAL LEAVE

Ms. MCSALLY. Mr. Speaker, I ask unanimous consent that all Members have 5 legislative days within which to revise and extend their remarks and include any extraneous material on the bill under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from Arizona?

There was no objection.

Ms. MCSALLY. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise today in support of H.R. 1302, the Terrorist and Foreign Fighter Travel Exercise Act.

This legislation furthers the efforts that I and several of my colleagues on the House Homeland Security Committee engaged in last Congress as members of the bipartisan Task Force on Combating Terrorist and Foreign Fighter Travel. For 6 months, our task force investigated our security vulnerabilities and the threat posed by ISIS. Our work produced 32 key findings and over 50 recommendations to make Americans safer.

In our findings, the task force found that the growing complexity and changing nature of the foreign fighter phenomenon may be creating unseen gaps in our defenses. Yet, it has been years since any large-scale stress test has been conducted on U.S. Government protection and prevention programs against terrorist travel.

The last major government exercise on terrorist travel occurred in 2009 when the Federal Emergency Management Agency, or FEMA, conducted an exercise focused on the aftermath of a national terrorist event outside of the United States and how to prevent subsequent efforts by the terrorists to enter the United States and carry out additional attacks. The objective of the exercise was to determine how government agencies at all levels would respond in such an environment.

However, the threat environment has changed considerably and relying on information gathered during an exercise that took place nearly a decade ago is simply unacceptable and puts American lives at risk.

The exercise conducted in 2009 also focused primarily on terrorists attempting to infiltrate the United States. However, our task force found that officials today should be just as concerned about Americans leaving the country to train overseas with terrorist groups as foreign fighters and then come back.

The ability of these hardened fighters to return to the United States is a legitimate security threat to the homeland. Catching individuals who are looking to join the ranks and train with ISIS and other terrorist organizations prior to their initial departure is equally important and should be a goal for law enforcement as well.

As such, H.R. 1302 would require that the executive branch conduct an exercise to evaluate the Nation's preparedness against all phases of foreign fighter planning and travel. Carrying out such attacks would be beneficial in understanding how partners at all levels of government and abroad are currently responding to these scenarios.

We must take decisive action to defeat the threat of ISIS and other terrorist organizations. The findings of the exercise required by this legislation will identify weaknesses at home and abroad that may be exploited by terrorists and foreign fighters, particularly to infiltrate the United States to conduct attacks. These findings will also be provided to Congress and Federal law enforcement and intelligence officials to provide information on how we can best address these weaknesses.

Passage of the Terrorist and Foreign Fighter Travel Exercise Act today represents continued action by this body to fight against ISIS and ensure we keep Americans safe. I urge all Members to join me in supporting this commonsense, bipartisan bill.

Mr. Speaker, I urge all Members to join me in supporting this bill, and I reserve the balance of my time.

COMMITTEE ON TRANSPORTATION AND INFRASTRUCTURE, HOUSE OF REPRESENTATIVES,

Washington, DC, March 10, 2017.

Hon. MICHAEL T. MCCAUL,

Chairman, Committee on Homeland Security, Washington, DC.

DEAR CHAIRMAN MCCAUL: I write concerning H.R. 1302, the ''Terrorist and Foreign Fighter Travel Exercise Act of 2017.'' This

legislation includes matters that fall within the Rule X jurisdiction of the Committee on Transportation and Infrastructure.

In order to expedite Floor consideration of H.R. 1302, the Committee on Transportation and Infrastructure will forgo action on this bill. However, this is conditional on our mutual understanding that forgoing consideration of the bill does not prejudice the Committee with respect to the appointment of conferees or to any future jurisdictional claim over the subject matters contained in the bill or similar legislation that fall within the Committee's Rule X jurisdiction. I appreciate you working with us on the base text of the bill and request you urge the Speaker to name members of the Committee to any conference committee named to consider such provisions.

Please place a copy of this letter and your response acknowledging our jurisdictional interest in the Congressional Record during House Floor consideration of the bill. I look forward to working with the Committee on Homeland Security as the bill moves through the legislative process.

Sincerely,

BILL SHUSTER,
Chairman.

HOUSE OF REPRESENTATIVES,
COMMITTEE ON HOMELAND SECURITY,
Washington, DC, March 15, 2017.

Hon. BILL SHUSTER,
Chairman, Committee on Transportation and Infrastructure,
Washington, DC.

DEAR CHAIRMAN SHUSTER: Thank you for your letter regarding H.R. 1302, the ''Terrorist and Foreign Fighter Travel Exercise Act of 2017''. I appreciate your support in bringing this legislation before the House of Representatives, and accordingly, understand that the Committee on Transportation and Infrastructure will not seek a sequential referral on the bill.

The Committee on Homeland Security concurs with the mutual understanding that by foregoing a sequential referral of this bill at this time, the Committee on Transportation and Infrastructure does not waive any jurisdiction over the subject matter contained in this bill or similar legislation in the future. In addition, should a conference on this bill be necessary, I would support your request to have the Committee on Transportation and Infrastructure represented on the conference committee.

I will insert copies of this exchange in the Congressional Record during consideration of this bill on the House floor. I thank you for your cooperation in this matter.

Sincerely,

MICHAEL T. MCCAUL,
Chairman, Committee on Homeland Security.

Mr. CORREA. Mr. Speaker, I yield myself such time as I may consume.

I rise in support of H.R. 1302, the Terrorist and Foreign Fighter Travel Exercise Act of 2017.

Every day, communities across this country are confronted by evolving threats. Since the beginning of the year, we have seen a number of bomb threats against Jewish Community Centers. A year and a half ago, a 21-year-old White gunman hoping to start a race war opened fire at the Emanuel AME Church in Charleston, South Carolina, killing nine of its parishioners. The year 2015 went on record as the year with most threats, reports of harassments, and vandalism against mosques in the United States.

In light of the emboldened White nationalist, anti-Semitic, and antigovernment movements, as well as ongoing threats from abroad, we must ensure that our first responders are prepared to respond to the evolving threats to our great country.

This bill will direct FEMA's national exercise program to design scenarios that include emerging terrorist threats. To be clear, the legislation does not require FEMA's national exercise program to focus exclusively on terrorist threats, but, rather, seeks to ensure that FEMA continues to develop exercises that are responsive to threats as they may emerge.

The bill also requires the Secretary of Homeland Security to carry out exercises related to terrorist threats domestically and abroad.

H.R. 1302 was passed unanimously and approved by the Committee on Homeland Security earlier this month and the full House in the last Congress, in July 2016.

Mr. Speaker, H.R. 1302 is commonsense legislation that will prepare first responders, as well as State and local government partners, for the challenges that lie ahead.

At this time, when first responder programs are slated for the chopping block under the administration's budget blueprint, it is more important than ever that Congress stand together to support them. Exercises like the ones authorized under this legislation contribute to our preparedness.

As such, I urge Members to support this bill once again.

Mr. Speaker, I yield back the balance of my time.

Ms. MCSALLY. Mr. Speaker, I thank the gentleman from California (Mr. CORREA) on the Committee on Homeland Security for supporting this bill, and I urge the rest of my colleagues to support H.R. 1302.

Mr. Speaker, I yield back the balance of my time.

Ms. JACKSON LEE. Mr. Speaker, as a senior member of the House Committee on Homeland Security I rise in support of H.R. 1302, Terrorist and Foreign Fighter Travel Exercise Act of 2017 to require an exercise to terrorist and foreign fighter travel.

This bipartisan bill would expand the scope of the Federal Emergency Management Agency's National Exercise Program by requiring additional scenarios to address emerging terrorist threats.

Among the scenarios to be included are those involving U.S. citizens enlisting with or providing support to terrorists organizations abroad, as well as terrorist infiltration in the United States.

A nationwide exercise would be held within a year of enactment to evaluate the threat of individuals traveling from the United States to join a terrorist organization.

The exercise would also test scenarios involving terrorist infiltration into the U.S. by United States citizens and foreign nationals.

DHS would coordinate with other federal departments, foreign governments, state and local governments, and the private sector to conduct the exercise.

The growing complexity of the threat may be creating unseen gaps in our defenses, yet it has been years since any large-scale ''stress test'' has been conducted against terrorist travel.

Federal officials suspect that Todd Wolfe, an American citizen from Texas, planned to fly his family to Europe where he would meet up with an ISIS handler and take them all to Syria.

In March of 2014, Hanad Abdullahi Mohallim, an American from Minnesota, entered Syria at Tel Abyad and recruited other fellow Somali-Americans in Minnesota to leave the United States and join ISIS.

Also in 2014, Abdi Nur left the U.S. for Syria to join ISIS. He was later reported to have attempted to recruit other men here in the U.S. to join the terrorist organization.

We need to be gravely concerned about Americans leaving the country to train overseas with terrorist organizations who then return to the United States as foreign fighters.

I ask my colleagues to join me in supporting H.R. 1302.

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from Arizona (Ms. MCSALLY) that the House suspend the rules and pass the bill, H.R. 1302.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the ayes have it.

Ms. MCSALLY. Mr. Speaker, I object to the vote on the ground that a quorum is not present and make the point of order that a quorum is not present.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, further proceedings on this question will be postponed.

The point of no quorum is considered withdrawn.

SECURING OUR AGRICULTURE AND FOOD ACT

Mr. DONOVAN. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 1238) to amend the Homeland Security Act of 2002 to make the Assistant Secretary of Homeland Security for Health Affairs responsible for coordinating the efforts of the Department of Homeland Security related to food, agriculture, and veterinary defense against terrorism, and for other purposes.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 1238

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the ''Securing our Agriculture and Food Act''.

SEC. 2. COORDINATION OF FOOD, AGRICULTURE, AND VETERINARY DEFENSE AGAINST TERRORISM.

(a) IN GENERAL.—Title V of the Homeland Security Act of 2002 (6 U.S.C. 311 et seq.) is amended by adding at the end the following new section:

''SEC. 528. COORDINATION OF DEPARTMENT OF HOMELAND SECURITY EFFORTS RELATED TO FOOD, AGRICULTURE, AND VETERINARY DEFENSE AGAINST TERRORISM.

''(a) PROGRAM REQUIRED.—The Secretary, acting through the Assistant Secretary for

Health Affairs, shall carry out a program to coordinate the Department's efforts related to defending the food, agriculture, and veterinary systems of the United States against terrorism and other high-consequence events that pose a high risk to homeland security.

''(b) PROGRAM ELEMENTS.—The coordination program required by subsection (a) shall include, at a minimum, the following:

''(1) Providing oversight and management of the Department's responsibilities pursuant to Homeland Security Presidential Directive 9–Defense of United States Agriculture and Food.

''(2) Providing oversight and integration of the Department's activities related to veterinary public health, food defense, and agricultural security.

''(3) Leading the Department's policy initiatives relating to food, animal, and agricultural incidents, and the impact of such incidents on animal and public health.

''(4) Leading the Department's policy initiatives relating to overall domestic preparedness for and collective response to agricultural terrorism.

''(5) Coordinating with other Department components, including U.S. Customs and Border Protection, as appropriate, on activities related to food and agriculture security and screening procedures for domestic and imported products.

''(6) Coordinating with appropriate Federal departments and agencies.

''(7) Other activities as determined necessary by the Secretary.

''(c) RULE OF CONSTRUCTION.—Nothing in this section may be construed as altering or superseding the authority of the Secretary of Agriculture relating to food and agriculture.''.

(b) CLERICAL AMENDMENT.—The table of contents in section 1(b) of the Homeland Security Act of 2002 is amended by inserting after the item relating to section 527 the following new item:

''Sec. 528. Coordination of Department of Homeland Security efforts related to food, agriculture, and veterinary defense against terrorism.''.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from New York (Mr. DONOVAN) and the gentleman from California (Mr. CORREA) each will control 20 minutes.

The Chair recognizes the gentleman from New York.

GENERAL LEAVE

Mr. DONOVAN. Mr. Speaker, I ask unanimous consent that all Members have 5 legislative days within which to revise and extend their remarks and include any extraneous material on the bill under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from New York?

There was no objection.

Mr. DONOVAN. Mr. Speaker, I yield myself such time as I may consume.

I rise today in support of H.R. 1238, the Securing our Agriculture and Food Act, introduced by Congressman DAVID YOUNG of Iowa. This bill seeks to authorize the Department of Homeland Security's food, agriculture, and veterinary defense program within the Office of Health Affairs.

Last year, the Subcommittee on Emergency Preparedness, Response, and Communications held a hearing to examine the potential devastating impacts of an intentional attack on, or a natural disruption of, U.S. agricultural or food production systems.

The food and agriculture sector is critically important to our Nation's economy. U.S. food and agriculture accounts for roughly one-fifth of the Nation's economic activity, and contributed $835 billion to the U.S. gross domestic product in 2014, and is responsible for 1 out of every 12 U.S. jobs.

Coming from Iowa and as a member of the Appropriations Subcommittee on Agriculture, Congressman YOUNG of Iowa knows all too well the importance of protecting this sector, which is vital to the economy and our way of life. I appreciate him introducing this bill of which I am pleased to be an original cosponsor.

I thank Chairman WALDEN of the Energy and Commerce Committee and Chairman CONAWAY of the Agriculture Committee for working with us to advance this bill.

Mr. Speaker, we also look forward to working with our Senate colleagues, who recently approved companion legislation without amendment in the Senate Homeland Security and Governmental Affairs Committee.

This bipartisan legislation passed the House last September by voice vote, and I urge all Members to join me once again in supporting this bill.

Mr. Speaker, I reserve the balance of my time.

HOUSE OF REPRESENTATIVES,
COMMITTEE ON ENERGY AND COMMERCE,
Washington, DC, March 16, 2017.

Hon. MICHAEL T. MCCAUL,
Chairman, Committee on Homeland Security, Washington, DC.

DEAR CHAIRMAN MCCAUL: I write in regard to H.R. 1238, Securing our Agriculture and Food Act, which was referred in addition to the Committee on Energy and Commerce. I wanted to notify you that the Committee will forgo action on the bill so that it may proceed expeditiously to the House floor for consideration.

The Committee on Energy and Commerce takes this action with our mutual understanding that by foregoing consideration of H.R. 1238, the Committee does not waive any jurisdiction over the subject matter contained in this or similar legislation and will be appropriately consulted and involved as this or similar legislation moves forward to address any remaining issues within the Committee's jurisdiction. The Committee also reserves the right to seek appointment of an appropriate number of conferees to any House-Senate conference involving this or similar legislation and asks that you support any such request.

I would appreciate your response confirming this understanding with respect to H.R. 1238 and ask that a copy of our exchange of letters on this matter be included in your committee's report on the legislation or the Congressional Record during its consideration on the House floor.

Sincerely,

GREG WALDEN,
Chairman.

HOUSE OF REPRESENTATIVES,
COMMITTEE ON HOMELAND SECURITY,
Washington, DC, March 16, 2017.

Hon. GREG WALDEN,
Chairman, Committee on Energy and Commerce, Washington, DC.

DEAR CHAIRMAN WALDEN: Thank you for your letter regarding H.R. 1238, the ''Securing our Agriculture and Food Act.'' I appreciate your support in bringing this legislation before the House of Representatives, and accordingly, understand that the Committee on Energy and Commerce will forego consideration of the bill.

The Committee on Homeland Security concurs with the mutual understanding that by foregoing consideration on this bill at this time, the Committee on Energy and Commerce does not waive any jurisdiction over the subject matter contained in this bill or similar legislation in the future. In addition, should a conference on this bill be necessary, I would support a request by the Committee on Energy and Commerce for conferees on those provisions within your jurisdiction.

I will insert copies of this exchange in the report or in the Congressional Record during consideration of this bill on the House floor. I thank you for your cooperation in this matter.

Sincerely,

MICHAEL T. MCCAUL.

HOUSE OF REPRESENTATIVES,
COMMITTEE ON AGRICULTURE,
Washington, DC, March 10, 2017.

Hon. MICHAEL MCCAUL,
Chairman, Committee on Homeland Security, Washington, DC.

DEAR CHAIRMAN MCCAUL: Thank you for the opportunity to review H.R. 1238, ''Securing our Agriculture and Food Act.'' As you are aware, the bill was primarily referred to the Committee on Homeland Security, while the Agriculture Committee received an additional referral.

I recognize and appreciate your desire to bring this legislation before the House in an expeditious manner and, accordingly, I agree to discharge H.R. 1238 from further consideration by the Committee on Agriculture. I do so with the understanding that by discharging the bill, the Committee on Agriculture does not waive any future jurisdictional claim on this or similar matters. Further, the Committee on Agriculture reserves the right to seek the appointment of conferees, if it should become necessary.

I ask that you insert a copy of our exchange of letters into the Congressional Record during consideration of this measure on the House floor.

Thank you for your courtesy in this matter and I look forward to continued cooperation between our respective committees.

Sincerely,

K. MICHAEL CONAWAY,
Chairman.

HOUSE OF REPRESENTATIVES,
COMMITTEE ON HOMELAND SECURITY,
Washington, DC, March 10, 2017.

Hon. K. MICHAEL CONAWAY,
Chairman, Committee on Agriculture, Washington, DC.

DEAR CHAIRMAN CONAWAY: Thank you for your letter regarding H.R. 1238, the ''Securing our Agriculture and Food Act.'' I appreciate your support in bringing this legislation before the House of Representatives, and accordingly, understand that the Committee on Agriculture will forego consideration of the bill.

The Committee on Homeland Security concurs with the mutual understanding that by foregoing consideration on this bill at this time, the Committee on Agriculture does not

waive any jurisdiction over the subject matter contained in this bill or similar legislation in the future. In addition, should a conference on this bill be necessary, I would support a request by the Committee on Agriculture for conferees on those provisions within your jurisdiction.

I will insert copies of this exchange in the Congressional Record during consideration of this bill on the House floor. I thank you for your cooperation in this matter.

Sincerely,

MICHAEL T. MCCAUL.

Mr. CORREA. Mr. Speaker, I yield myself such time as I may consume.

I rise in support of H.R. 1238, the Securing our Agriculture and Food Act.

Mr. Speaker, U.S. agriculture and agriculture-related business represents about 6 percent of our gross domestic product as of 2014. Protecting this industry, which contributes $985 billion to our economy, from international and naturally occurring biological events is critical not only to the stability of our national economy, but also to the security of our national food supply and our human health.

This bill would clarify the responsibilities of the Department of Homeland Security's Assistant Secretary for Health Affairs as they relate to the DHS' responsibilities under the Homeland Security Presidential Directive 9, entitled: ''The Defense of U.S. Agriculture and Food.''

The bill includes language offered by Representative DONALD PAYNE, Jr., my colleague on the committee, directing the Assistant Secretary for Health Affairs to coordinate with all departmental components with responsibilities related to food and agriculture security and screening procedures. Such coordination will include Customs and Border Protection, which has historically struggled to maintain agriculture inspection staffing levels at ports of entry.

Mr. Speaker, agriculture and agriculture-related businesses constitute a major portion of California's economy. Agriculture plays an integral role in industries ranging from transportation and warehousing to finance and insurance, to accommodation and food services.

□ 1245

The cascading effects of national and international outbreaks compromise agriculture, food, and could have devastating effects on the State's economy.

I encourage my colleagues to support this bill to ensure the integrity of our agriculture industry and food supply.

I reserve the balance of my time.

Mr. DONOVAN. Mr. Speaker, I yield as much time as he may consume to the gentleman from Iowa (Mr. YOUNG).

Mr. YOUNG of Iowa. Mr. Speaker, I want to thank the chairman of the subcommittee for shepherding this through the committee as well as being a cosponsor. I appreciate that.

Mr. Speaker, in 2015, our Nation experienced the worst animal disease outbreak in our history, as highly pathogenic avian influenza wreaked havoc on turkey farmers and egg producers in the Midwest.

This naturally occurring outbreak revealed significant vulnerabilities and coordination challenges between Federal, State, and local stakeholders in responding quickly to prevent the spread of avian influenza.

It also demonstrated the importance of having mitigation and response strategies and processes in place to ensure any naturally occurring outbreak or coordinated attack against our Nation's agricultural sector can be prevented quickly and be contained.

Maintaining the integrity of our agricultural and food supply system is imperative. The folks I talked to have great concerns about the safety and security of our homeland and our people, and their concerns are warranted.

The reality of living in this day and age is that it is just not the big cities that have to be prepared for a terror attack. All counterterrorism measures must reflect a universal understanding of potential vulnerabilities, which includes our agriculture and rural communities.

Farming and agriculture are not only the backbone of the Iowa economy, but of the entire Nation. Any attack on our food supply could have devastating consequences on our economy and our communities. It is essential that we take the proper steps against potential threats.

Now, the reality is agroterrorism and other high-risk events pose serious threats to our food, agriculture, and livestock industries across the United States. For that reason, I introduced, in a bipartisan fashion, the Securing Our Agriculture and Food Act together with Congressman DAN DONOVAN and Congressman DONALD PAYNE, Jr., the chairman and ranking member of the Homeland Security Subcommittee on Emergency Preparedness, Response, and Communications, to ensure our Nation has a plan and strategy to prepare for and respond to any high-risk event threatening our agricultural sector, our food supply, and, ultimately, our people.

The Securing Our Agriculture and Food Act requires the Secretary of Homeland Security, through the Assistant Secretary for Health Affairs, to lead the government's efforts to secure our Nation's food, agriculture, and our veterinary systems against terrorism and high-risk events.

This bipartisan bill also authorizes the Secretary to collaborate with other agencies to ensure food, agriculture, and animal and human health sectors receive the attention and are integrated into the DHS' domestic preparedness policy initiatives.

I appreciate the support of Subcommittee Chairman Donovan—thank you—and Ranking Member PAYNE as we work to better secure our agriculture and food sectors. I thank you both for elevating the importance of this issue.

I also want to thank the chairman and ranking members of the full committee and all their staff for their assistance in bringing this bill to the floor today in the House.

Mr. Speaker, I urge the passage of this bill.

Mr. CORREA. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, Securing Our Agriculture and Food Act passed the House in September of 2016, and the Senate companion bill was reported out of committee last week.

Passage of this measure will send a strong message about our commitment to protecting our Nation's food and agricultural sectors. As such, I urge my colleagues to support H.R. 1238.

I yield back the balance of my time.

Mr. DONOVAN. Mr. Speaker, I yield myself as much time as I may consume, and I once again urge my colleagues to support H.R. 1238.

Mr. Speaker, I yield back the balance of my time.

Ms. JACKSON LEE. Mr. Speaker, I rise in support of H.R. 1238, ''Securing Our Agriculture and Food Act.''

This bipartisan bill amends the Homeland Security Act of 2002 to make the Assistant Secretary of Homeland Security for Health Affairs responsible for coordinating the efforts for the DHS related to food, agriculture, and veterinary defense against terrorism.

The coordination program under the measure would include:

1. Overseeing and managing DHS's responsibilities under the presidential directive;

2. Integrating activities related to veterinary public health, food and agriculture security;

3. Leading the department's policy initiatives relating to food, animal, and agriculture incidents, as well as domestic preparedness for and collective response to agricultural terrorism; and

4. Coordinating with other parts of the federal government.

Agro-terrorism is defined as the deliberate introduction of an animal or plant disease for the purpose of generating fear, causing economic losses, or undermining social stability.

Killing livestock and plants or contaminating food can help terrorists cause economic crises in the agriculture and food industries.

Agriculture comprises the largest single sector in U.S. economy, making agro-terrorism an attractive opportunity for many terrorist organizations.

Attacks directed against the cattle, pork, or poultry industries or via the food chain pose the most serious danger for latent, ongoing effects and general socioeconomic and political disruption.

Food availability becomes a matter of immediate life and death in such circumstances, and significant national and global resources need to be dedicated to emergency relief efforts.

Any attacks of agro-terrorism would be particularly devastating for the citizens of Texas.

In Texas, the largest source of agricultural revenue comes from the sale of beef cattle.

Texas produces roughly 20 percent of the nation's cattle and ranks first in the country in the value of cattle raised.

It is crucial that we have preparedness policies in place to quickly respond to events

threatening U.S. agriculture or food production systems.

I ask my colleagues to join me in supporting H.R. 1238.

Mr. JOHNSON of Georgia. Mr. Speaker, I stand in strong support to H.R. 1238, the Securing Our Agriculture and Food Act of 2017.

Our nation's agricultural sector comprises a substantial portion of our economy. In my home state of Georgia, eggs, beef, poultry, peanuts, onions, and many other agricultural commodities allow for agriculture to be an almost $14 billion industry. Furthermore, the food and fiber industry directly and indirectly results in a total economic impact of tens of billions of dollars annually and the creation of hundreds of thousands of jobs in Georgia. Moreover, agricultural industries serve as a vital backbone to the nutrition and nourishment of both America's citizens and consumers abroad.

Naturally, an industry as critical to the United States' stability as the country's food production must not be compromised by threats of sabotage or acts of terrorism.

Passing this bill will amend portions of the Homeland Security Act of 2002 (HSA) to allow the Department of Homeland Security to better protect America's agricultural sector. The reorganization of DHS resources outlined in this bill ensure that proper oversight and management of our nation's agriculture necessary to prevent a devastating attack on our agricultural sector.

The level of bipartisan cooperation and support for the Securing our Agricultural and Food Act reflects the importance of this bill to security and economic interests of American's citizens. The security of our nation's food supplies is not an issue defined by political party, nor is the concern only relevant to rural populations. All American's will suffer if we are unable to ensure the safety of the country's agricultural sector.

This bill provides security to a fundamental and often. overlooked area of our economy and existence. We as lawmakers must ensure the preparedness of our Federal government to react to events of ecological sabotage and terrorism.

I strongly urge my colleagues to vote YES on the resolution.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from New York (Mr. DONOVAN) that the House suspend the rules and pass the bill, H.R. 1238.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the ayes have it.

Mr. DONOVAN. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, further proceedings on this motion will be postponed.

DEPARTMENT OF HOMELAND SECURITY ACQUISITION INNOVATION ACT

Mr. DONOVAN. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 1365) to amend the Homeland Security Act of 2002 to require certain acquisition innovation, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 1365

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the ''Department of Homeland Security Acquisition Innovation Act''.

SEC. 2. ACQUISITION INNOVATION.

(a) IN GENERAL.—Title VII of the Homeland Security Act of 2002 (6 U.S.C. 341 et seq.) is amended by adding at the end the following new section:

''SEC. 710. ACQUISITION INNOVATION.

''The Under Secretary for Management may—

''(1) designate an individual within the Department to manage acquisition innovation efforts of the Department;

''(2) test emerging acquisition best practices to carrying out acquisitions, consistent with the Federal Acquisition Regulation and Department acquisition management directives, as appropriate;

''(3) develop and distribute best practices and lessons learned regarding acquisition innovation throughout the Department;

''(4) establish metrics to measure the effectiveness of acquisition innovation efforts with respect to cost, operational efficiency of the acquisition program (including timeframe for executing contracts), and collaboration with the private sector, including small businesses; and

''(5) determine impacts of acquisition innovation efforts on the private sector by—

''(A) engaging with the private sector, including small businesses, to provide information and obtain feedback on procurement practices and acquisition innovation efforts of the Department;

''(B) obtaining feedback from the private sector on the impact of acquisition innovation efforts of the Department; and

''(C) incorporating such feedback, as appropriate, into future acquisition innovation efforts of the Department.''.

(b) CLERICAL AMENDMENT.—The table of contents in section 1(b) of the Homeland Security Act of 2002 is amended by inserting after the item relating to section 709 the following new item:

''Sec. 710. Acquisition innovation.''.

(c) INFORMATION.—Not later than 90 days after the date on which the Secretary of Homeland Security submits the annual budget justification for the Department of Homeland Security for each of fiscal years 2018 through 2022, the Secretary shall, if appropriate, provide information to the Committee on Homeland Security of the House of Representatives and the Committee on Homeland Security and Governmental Affairs of the Senate on the activities undertaken in the previous fiscal year in furtherance of section 710 of the Homeland Security Act, as added by subsection (a) of this Act, on the following:

(1) Emerging acquisition best practices that were tested within the Department during such year.

(2) Efforts to distribute best practices and lessons learned within the Department, including through web-based seminars, training, and forums, during such year.

(3) Utilization by components throughout the Department of best practices distributed by the Under Secretary of Management pursuant to paragraph (3) of such section 710.

(4) Performance as measured by the metrics established under paragraph (4) of such section 710.

(5) Outcomes of efforts to distribute best practices and lessons learned within the Department, including through web-based seminars, training, and forums.

(6) Any impacts of the utilization of innovative acquisition mechanisms by the Department on the private sector, including small businesses.

(7) The criteria used to identify specific acquisition programs or activities to be included in acquisition innovation efforts and the outcomes of such programs or activities.

(8) Recommendations, as necessary, to enhance acquisition innovation in the Department.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from New York (Mr. DONOVAN) and the gentleman from California (Mr. CORREA) each will control 20 minutes.

The Chair recognizes the gentleman from New York.

GENERAL LEAVE

Mr. DONOVAN. Mr. Speaker, I ask unanimous consent that all Members have 5 legislative days within which to revise and extend their remarks and include any extraneous materials on the bill under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from New York?

There was no objection.

Mr. DONOVAN. Mr. Speaker, I yield myself as much time as I may consume.

Mr. Speaker, I rise in support of H.R. 1365, the Department of Homeland Security Acquisition Innovation Act.

The bill allows DHS to designate a senior official to manage acquisition innovation efforts; test, develop, and distribute acquisition best practices throughout the Department; and establish performance metrics to evaluate the effectiveness of these efforts. Republican amendments at the committee markup strengthened the underlying bill by encouraging DHS to obtain feedback from the private sector and incorporate this feedback into future efforts.

As we have seen from numerous watchdog reports, the Federal Government's acquisition and contracting process is broken, cumbersome, and bureaucratic. DHS must continue to innovate to ensure the private sector can best support our critical homeland security needs. The Department has recently taken positive steps in using new contracting tools and collaborating with industry. This legislation supports those efforts and encourages their continued use.

I commend Oversight and Management Efficiency Subcommittee Ranking Member CORREA for all of his hard work on this legislation.

I urge all Members to join me in supporting this bill.

Mr. Speaker, I reserve the balance of my time.

Mr. CORREA. Mr. Speaker, I yield myself such time as I may consume.

I rise in support of H.R. 1365, the Department of Homeland Security Acquisition Innovation Act.

When the Department of Homeland Security was established in 2002, it was understood that the mission of safeguarding the American people would be

a complex one. Today, 15 years later, the ever-changing nature of the terrorist threat and its landscape has demanded that DHS be more innovative. In the past 3 years, the Department has actively worked to carry out its procurement process in new and innovative ways.

The Acquisition Innovations in Motion program, launched in 2015, is a framework for coordinated industry engagement in which opportunities, challenges, and strategies are discussed to identify acquisition solutions and foster greater efficiency and effectiveness.

A key component of this program is a Procurement Innovation Lab called PIL. PIL is a virtual testing environment that experiments with innovative techniques to assess whether they can be effectively integrated into DHS' procurement process. To date, PIL is credited with reducing award times, the integration of existing flexibilities that are in use in other portions of the Federal Government, and improved acquisition training.

Results, case studies, and lessons learned from the PIL process are regularly shared throughout DHS through webinars and the internal web portal. These activities facilitate a continuous learning culture that enhances the DHS mission of support.

I introduced this bill, H.R. 1365, to institutionalize DHS' acquisition innovation efforts by authorizing such activity by the Under Secretary of Management. Specifically, my legislation authorizes robust testing, development, and distribution of best practices and acquisitions throughout the Department, as well as performance metrics to measure the effectiveness of such efforts.

Enactment of this bill will help ensure that this successful acquisition management technique continues. This bill was unanimously approved by the Committee on Homeland Security earlier this month.

Mr. Speaker, DHS' approach to acquisitions not only accommodates the Department's unique mission, but it supports our responsibility to the management of taxpayer dollars.

This bill codifies a pathway to developing and implementing innovative approaches that serve the Department's acquisition challenges through collaboration and efficiency. To that end, it is vital that DHS continue to drive towards a more effective procurement process in support of its vital mission.

Mr. Speaker, I urge passage of H.R. 1365, and I yield back the balance of my time.

Mr. DONOVAN. Mr. Speaker, I once again urge my colleagues to support H.R. 1365, as amended.

Mr. Speaker, I yield back the balance of my time.

Mr. MCCAUL. Mr. Speaker, I include in the RECORD the cost estimate on H.R. 1365:

MARCH 22, 2017.

Hon. MICHAEL MCCAUL,
Chairman, Committee on Homeland Security, House of Representatives, Washington, DC.

DEAR MR. CHAIRMAN: The Congressional Budget Office has prepared the enclosed cost estimate for H.R. 1365, the Department of Homeland Security Acquisition Innovation Act.

If you wish further details on this estimate, we will be pleased to provide them. The CBO staff contact is Mark Grabowicz.

Sincerely,

KEITH HALL.

Enclosure.

H.R. 1365

DEPARTMENT OF HOMELAND SECURITY ACQUISITION INNOVATION ACT

As ordered reported by the House Committee on Homeland Security on March 8, 2017

H.R. 1365 would authorize the Department of Homeland Security (DHS) to promote the use of innovation in its acquisition programs. The legislation would direct DHS to provide information annually to the Congress on activities related to innovative acquisition practices. Based on information from DHS, CBO estimates that implementing H.R. 1365 would cost less than $500,000 annually; such spending would be subject to the availability of appropriated funds.

Enacting the legislation would not affect direct spending or revenues; therefore, pay-as-you-go procedures do not apply. CBO estimates that enacting H.R. 1365 would not increase net direct spending or on-budget deficits in any of the four consecutive 10-year periods beginning in 2028.

H.R. 1365 contains no intergovernmental or private-sector mandates as defined in the Unfunded Mandates Reform Act and would not affect the budgets of state, local, or tribal governments.

The CBO staff contact for this estimate is Mark Grabowicz. The estimate was approved by H. Samuel Papenfuss, Deputy Assistant Director for Budget Analysis.

Ms. JACKSON LEE. Mr. Speaker, as a senior member of the Homeland Security Committee, I rise in support of H.R. 1365, the "Department of Homeland Security Acquisition Innovation Act" which authorizes the DHS to expand the use of acquisition innovation.

This bipartisan bill will guarantee new acquisition methods and practices are considered to ensure taxpayers get the most for their money.

This bill would permit DHS's undersecretary for management to:

1. Designate an official to manage acquisition innovation;

2. Test and develop best practices that are consistent with acquisition rules and directives;

3. Measure how innovation in acquisition processes have affected cost, operational efficiency, the timeframe for executing contracts, and collaboration with small businesses and other private-sector companies; and

4. Obtain and incorporate feedback from the private sector.

From fiscal 2018 through 2022, DHS would provide Congress with information on acquisition innovation activities during the previous fiscal year, including:

1. Best practices that were tested, used and distributed, including through web-based seminars, trainings and forums;

2. Effects on the private sector, including small businesses;

3. Criteria to indemnify acquisition programs that would be appropriate for innovation; and

4. Recommendations for enhancing innovation at DHS.

Innovation is the American way and this bill makes sure the Department of Homeland Security finds new ways to do its job effectively and efficiently.

At the Tenth Annual Border Security Expo in Texas, officials from the Department of Homeland Security observed some of the latest innovations that can help to protect our border. This included 3D holographic images, portable biometric testing kits, and underground seismic signal detectors.

In Texas, U.S. Customs and Border Protection agents deter, detect, and interdict smuggling along the Texas/Mexico border through the deployment of an integrated network of detection and communication technologies.

In 2016, the Texas of Department of Public Safety provided direct assistance to U.S. Customs and Border Protection in the arrest of over 37,000 criminals deemed a high threat risk.

Frontline personnel securing our borders, protecting our airports, and defending our shores must have the tools to successfully accomplish their mission.

I ask my colleagues to join me in supporting H.R. 1365.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from New York (Mr. DONOVAN) that the House suspend the rules and pass the bill, H.R. 1365, as amended.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the ayes have it.

Mr. DONOVAN. Mr. Speaker, I object to the vote on the ground that a quorum is not present and make the point of order that a quorum is not present.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, further proceedings on this question will be postponed.

The point of no quorum is considered withdrawn.

□ 1300

RAISING A QUESTION OF THE PRIVILEGES OF THE HOUSE

Mr. POLIS. Mr. Speaker, I have a privileged resolution at the desk.

The SPEAKER pro tempore. The Clerk will report the resolution.

The Clerk read as follows:

Whereas, in the United States' system of checks and balances, Congress has a responsibility to hold the executive branch of government to the highest standard of transparency to ensure the public interest is placed first;

Whereas, according to the Tax History Project, every President since Gerald Ford has disclosed their tax return information to the public;

Whereas, tax returns provide an important baseline disclosure because they contain highly instructive information including whether the candidate can be influenced by foreign entities and reveal any conflicts of interest;

Whereas, Article I, section 9 of the Constitution states that no person holding any office of profit or trust under them, shall, without the consent of Congress, accept any present, emolument, Office or Title, of any kind whatever from any King, Prince, or foreign State;

Whereas, disclosure of the President's tax returns is important towards investigating Russian influence in the 2016 election, understanding the President's financial ties to the Russian Federation and Russian citizens, including debts owed and whether he shares any partnership interests, equity interests, joint ventures, or licensing agreements with Russia or Russian nationals, formally or informally associated with Vladmir Putin;

Whereas, The New York Times has reported that President Trump's close senior advisers, including Carter Page, Paul Manafort, Roger Stone, and General Michael Flynn, have been under investigation by the Federal Bureau of Investigation for their ties to the Russian Federation;

Whereas, Russian Deputy Foreign Minister Sergei Ryabkov told Interfax, a Russian media outlet, on November 10, 2016, that ''there were contacts'' with Donald Trump's 2016 campaign, and it has been reported that members of President Trump's inner circle were in contact with senior Russian officials throughout the 2016 campaign;

Whereas, General Michael Flynn, former national security adviser of President Trump, received almost $68,000 in fees and expenses from Russian entities in 2015, including by an entity recognized by U.S. intelligence agencies as an arm of the Russian Government;

Whereas, FBI Director Comey stated in the Select Intelligence Committee hearing on the Russian interference with the November 2016 election that ''there is no information to support those tweets,'' relating to President Trump's allegations that President Obama illegally wiretapped the Trump campaign;

Whereas, distracting investigators with dead-end leads and outrageous statements is a common tactic from those with a guilty conscience or in a deliberate effort to throw off investigators;

Whereas, according to his 2016 candidate filing with the Federal Election Commission, the President has 564 financial positions in companies located in the United States and around the world;

Whereas, according to The Washington Post, the Trump International Hotel in Washington, DC, has hired a ''director of diplomatic sales'' to generate high-priced business among foreign leaders and diplomatic delegations;

Whereas, the chairman on the Ways and Means Committee, Joint Committee on Taxation, and Senate Finance Committee have the authority to request the President's tax returns under section 6103 of the tax code;

Whereas, the Ways and Means Committee used IRC 6103 authority in 2014 to make public the confidential tax information of 51 taxpayers;

Whereas, the American people have the right to know whether or not their President is operating under conflicts of interest related to international affairs, tax reform, government contracts, or otherwise:

Now, therefore, be it resolved that the House of Representatives shall:

One, immediately request the tax return information of Donald J. Trump for tax years 2006 through 2015 for review in closed executive session by the Committee on Ways and Means, as provided under section 6103 of the Internal Revenue Code, and vote to report the information therein to the full House of Representatives;

Two, support transparency in government and the longstanding tradition of Presidents and Presidential candidates disclosing their tax returns.

The SPEAKER pro tempore. Does the gentleman from Colorado wish to present argument on the parliamentary question whether the resolution presents a question of the privileges of the House?

Mr. POLIS. Yes, Mr. Speaker.

The SPEAKER pro tempore. The gentleman from Colorado is recognized.

Mr. POLIS. Mr. Speaker, under rule IX, clause 1, questions of the privileges of the House and those affecting the rights of the House, its safety, dignity, and the integrity of its proceedings, that is the section we are talking about here today when we are talking about privilege.

Mr. Speaker, truly, there is nothing more of a threat to the very integrity of the legislative branch in the House than ignoring our duty to provide a check and balance on the executive branch.

To restore the dignity of the House inherent in rule IX, clause 1, we absolutely must use our authority to request that President Trump's tax returns are given to the American people. The American people demand to know the full scope of the President's financial background because there are legitimate concerns which, frankly, were worsened this very week by the hearing in the Select Intelligence Committee where the FBI and NSA testified there is an ongoing investigation to determine if there was coordination between the President's campaign and Russia.

The Internal Revenue Code already has language that lays out a path for the Ways and Means Committee to obtain those tax returns and review them in a respectful manner; and, frankly, there is precedent for that provision being used. Fifty-one tax returns of Americans were requested the last time they used it.

The House needs to demonstrate that our Members are listening to the valid concerns about the integrity of the Republic. The House needs to show that we care about protecting our Constitution and our system of checks and balances.

When I look at the language, the privileges of the House, those affecting the rights of the House collectively, its safety, dignity, and the integrity of its proceedings, I can see nothing that fits that language more than this motion before you today.

Let's shine a light on the President's conflicts so we, as a Congress, and the American people can judge what is occurring, where the conflicts lie, whether his decisions are being made for himself or his business interests or foreign interests or for the greater good of the American people.

I call upon the Speaker to rule in favor of allowing this privileged resolution to move forward and for the President to disclose his tax returns immediately.

The SPEAKER pro tempore. Does any other Member wish to be heard on the question of order?

Mr. PASCRELL. Mr. Speaker, I do.

The SPEAKER pro tempore. The gentleman from New Jersey is recognized.

Mr. PASCRELL. Mr. Speaker, on a question of the privileges of the House under rule IX, clause 1, questions of the privileges of the House are those affecting the rights of the House collectively, its safety, dignity, and the integrity of its proceedings. Congressional oversight is a power granted by the Constitution in public law and in House rules.

Mr. Speaker, just 2 days ago, FBI Director James Comey confirmed that there was an investigation of Donald Trump's campaign's ties to the Russian agents.

We know that, following six bankruptcies, Donald Trump had trouble getting loans and financing for his real estate businesses. We know that German Bank Deutsche stepped in when Wall Street stopped lending, giving at least $300 million in loans for those properties and, more personally, to his daughter, Ivanka, and son-in-law.

We know that Deutsche Bank has been fined for criminally transferring $10 billion out of Russia. We also know that Donald Trump, Jr. said that the Trump organization saw money ''pouring in from Russia'' and that ''Russians make up a pretty disproportionate cross-section of a lot of our assets.''

We know that Donald Trump repeatedly attempted to secure trademarks in Russia—the record is the record—to develop real estate in Russia—the record is the record—and to sell products in Russia—the record is the record. We have seen how just two pages summarizing the President's 2005 tax returns, which many laughed off, showed that he paid a low rate of 25 percent. He has proposed tax changes that would significantly lower his own personal tax bill.

We need to see how the President——

The SPEAKER pro tempore. The gentleman will suspend.

The gentleman's remarks must be confined to the question of order.

The gentleman from New Jersey is recognized.

Mr. PASCRELL. Mr. Speaker, nothing could be more of a threat to the integrity of this House than ignoring our duty to fully examine the personal financial entanglements any President,

and this President, may have had with Russian entities and individuals. If and when such conflicts are revealed, I do not want to say to our constituents that we had the power to review these conflicts, but, instead, we sat on our hands and did nothing. I, for one, do not want my integrity or the integrity of my colleagues in this body on both sides of the aisle to be demeaned by such a shameful failure.

To restore the dignity of the House, we must use our authority to request President Trump's tax returns to give the American people—the 75 percent who say ''give it up,''—75 percent of the American people, the transparency they deserve.

The SPEAKER pro tempore. The gentleman's remarks must be confined to the question of order.

Mr. PASCRELL. Mr. Speaker, I yield back the balance of my time.

Mr. COHEN. Mr. Speaker.

The SPEAKER pro tempore. Does the gentleman from Tennessee wish to be heard on the question of order?

Mr. COHEN. Yes, Mr. Speaker.

The SPEAKER pro tempore. The gentleman from Tennessee is recognized.

Mr. COHEN. Mr. Speaker, Mr. POLIS and Mr. PASCRELL have made the point, and it is the same point I want to make. There is a shadow hanging over the United States of America, over our government, and over this House; and only we can lift it.

The Trump campaign said that if Hillary Clinton was the President with a Federal investigation overlooking her, which it looked like there was with Mr. Comey's comments before the election, that it would be unheard of, unprecedented, and the Government couldn't go on.

Well, there is a Federal investigation of the present President of the United States—something that has never happened before—and that has put a dark cloud that can only be lifted by showing in the light of day what the President's involvements were with his income taxes, whom he owes money to. And if he doesn't owe money to people that have a conflict, that is good for the government because it relieves the President of any suspicion.

Like Caesar's wife, he should be beyond suspicion and beyond reproach, and, right now, there is a serious cloud. So I would ask the Chair to rule in favor of this motion so we can do our job to make the light shine on this government and on this House and give more respect for us.

I thank the Speaker who is an honorable man and I am proud to say is my friend.

Mr. Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. Does any other Member wish to be heard on the question of order?

PARLIAMENTARY INQUIRY

Mr. POLIS. Point of parliamentary inquiry, Mr. Speaker.

The SPEAKER pro tempore. The gentleman will state his parliamentary inquiry.

Mr. POLIS. Mr. Speaker, how many Members must come before the Speaker establishing that this qualifies under the privileges of the House affecting the integrity of the House until the Speaker rules in our favor?

The SPEAKER pro tempore. The Chair is prepared to rule.

Mr. POLIS. Mr. Speaker, I hope that the Chair will rule favorably on behalf of the American people.

Mr. Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. The gentleman from Colorado seeks to offer a resolution as a question of the privileges of the House under rule IX.

As the Chair ruled on February 27, 2017; March 7, 2017; and March 15, 2017, the resolution directs the Committee on Ways and Means to meet and consider an item of business under the procedures set forth in 26 U.S.C. 6103 and, therefore, does not qualify as a question of the privileges of the House.

Mr. POLIS. Mr. Speaker, I appeal the ruling of the Chair.

The SPEAKER pro tempore. The question is, Shall the decision of the Chair stand as the judgment of the House?

MOTION TO TABLE

Ms. CHENEY. Mr. Speaker, I have a motion at the desk.

The SPEAKER pro tempore. The Clerk will report the motion.

The Clerk read as follows:

Ms. Cheney moves that the appeal be laid on the table.

The SPEAKER pro tempore. The question is on the motion to lay the appeal on the table.

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

Mr. POLIS. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, this 15-minute vote on the motion to lay the appeal on the table will be followed by 5-minute votes on the motion to recommit on H.R. 372 and passage of H.R. 372, if ordered.

The vote was taken by electronic device, and there were—yeas 230, nays 189, answered ''present'' 1, not voting 9, as follows:

[Roll No. 182]

YEAS—230

Abraham
Aderholt
Allen
Amash
Amodei
Arrington
Babin
Bacon
Banks (IN)
Barletta
Barr
Barton
Bergman
Biggs
Bilirakis
Bishop (MI)
Black
Blum
Bost
Brady (TX)
Brat
Bridenstine
Brooks (AL)
Brooks (IN)
Buchanan
Buck
Bucshon
Budd
Burgess
Byrne
Calvert
Carter (GA)
Carter (TX)
Chabot
Chaffetz
Cheney
Coffman
Cole
Collins (GA)
Collins (NY)
Comer
Comstock
Conaway
Cook
Costello (PA)
Cramer
Crawford
Culberson
Curbelo (FL)
Davidson
Davis, Rodney
Denham
Dent
DeSantis
DesJarlais
Diaz-Balart
Donovan
Duffy
Duncan (SC)
Duncan (TN)
Dunn
Emmer
Farenthold
Faso
Ferguson
Fitzpatrick
Fleischmann
Flores
Fortenberry
Foxx
Franks (AZ)
Frelinghuysen
Gaetz
Gallagher
Garrett
Gibbs
Gohmert
Goodlatte
Gosar
Gowdy
Granger
Graves (GA)
Graves (LA)
Graves (MO)
Griffith
Grothman
Guthrie
Harper
Harris
Hartzler
Hensarling
Herrera Beutler
Hice, Jody B.
Higgins (LA)
Hill
Holding
Hollingsworth
Hudson
Huizenga
Hultgren
Hunter
Hurd
Issa
Jenkins (KS)
Jenkins (WV)
Johnson (LA)
Johnson (OH)
Johnson, Sam
Jordan
Joyce (OH)
Katko
Kelly (MS)
Kelly (PA)
King (NY)
Kinzinger
Knight
Kustoff (TN)
Labrador
LaHood
LaMalfa
Lamborn
Lance
Latta
Lewis (MN)
LoBiondo
Long
Loudermilk
Love
Lucas
Luetkemeyer
MacArthur
Marchant
Marino
Marshall
Massie
Mast
McCarthy
McCaul
McClintock
McHenry
McKinley
McMorris Rodgers
McSally
Meadows
Meehan
Messer
Mitchell
Moolenaar
Mooney (WV)
Mullin
Murphy (PA)
Newhouse
Noem
Nunes
Olson
Palazzo
Palmer
Paulsen
Pearce
Perry
Pittenger
Poe (TX)
Poliquin
Posey
Ratcliffe
Reed
Reichert
Renacci
Rice (SC)
Roby
Roe (TN)
Rogers (AL)
Rogers (KY)
Rohrabacher
Rokita
Rooney, Francis
Rooney, Thomas J.
Ros-Lehtinen
Roskam
Ross
Rothfus
Rouzer
Royce (CA)
Russell
Rutherford
Scalise
Schweikert
Scott, Austin
Sensenbrenner
Sessions
Shimkus
Simpson
Smith (MO)
Smith (NE)
Smith (NJ)
Smith (TX)
Smucker
Stefanik
Stewart
Stivers
Taylor
Tenney
Thompson (PA)
Thornberry
Tiberi
Tipton
Trott
Turner
Upton
Valadao
Wagner
Walberg
Walden
Walker
Walorski
Walters, Mimi
Weber (TX)
Webster (FL)
Wenstrup
Westerman
Williams
Wilson (SC)
Wittman
Womack
Woodall
Yoder
Yoho
Young (AK)
Young (IA)
Zeldin

NAYS—189

Adams
Aguilar
Barragán
Bass
Beatty
Bera
Beyer
Bishop (GA)
Blumenauer
Blunt Rochester
Bonamici
Boyle, Brendan F.
Brady (PA)
Brown (MD)
Brownley (CA)
Bustos
Butterfield
Capuano
Carbajal
Cárdenas
Carson (IN)
Cartwright
Castor (FL)
Castro (TX)
Chu, Judy
Cicilline
Clark (MA)
Clarke (NY)
Clay
Cleaver
Clyburn
Cohen
Connolly
Conyers
Cooper
Correa
Costa
Courtney
Crist
Crowley
Cuellar
Cummings
Davis (CA)
Davis, Danny
DeFazio
DeGette
Delaney
DeLauro
DelBene
Demings
DeSaulnier
Deutch
Dingell
Doggett
Doyle, Michael F.
Ellison
Engel
Eshoo
Espaillat
Esty
Evans
Foster
Frankel (FL)
Fudge
Gabbard
Gallego
Garamendi
Gonzalez (TX)
Gottheimer
Green, Al
Green, Gene
Grijalva
Gutiérrez
Hanabusa
Hastings
Heck
Higgins (NY)
Himes
Hoyer
Huffman
Jackson Lee
Jayapal
Jeffries
Johnson (GA)
Johnson, E. B.
Jones
Kaptur
Keating
Kelly (IL)
Kennedy
Khanna
Kihuen
Kildee
Kilmer
Kind
Krishnamoorthi
Kuster (NH)
Langevin
Larsen (WA)
Larson (CT)
Lawrence
Lawson (FL)
Lee
Levin
Lewis (GA)
Lieu, Ted
Lipinski
Loebsack
Lofgren
Lowenthal
Lowey
Lujan Grisham, M.
Luján, Ben Ray
Lynch

Maloney, Carolyn B.
Maloney, Sean
Matsui
McCollum
McEachin
McGovern
McNerney
Meeks
Meng
Moore
Moulton
Murphy (FL)
Nadler
Napolitano
Neal
Nolan
Norcross
O'Halleran
O'Rourke
Pallone
Panetta
Pascrell
Pelosi
Perlmutter
Peters
Peterson
Pingree
Pocan
Polis
Price (NC)
Quigley
Raskin
Rice (NY)
Richmond
Rosen
Roybal-Allard
Ruiz
Ruppersberger
Ryan (OH)
Sánchez
Sarbanes
Schakowsky
Schiff
Schneider
Schrader
Scott (VA)
Scott, David
Serrano
Sewell (AL)
Shea-Porter
Sherman
Sires
Smith (WA)
Soto
Speier
Suozzi
Swalwell (CA)
Takano
Thompson (CA)
Thompson (MS)
Titus
Tonko
Torres
Vargas
Veasey
Vela
Velázquez
Visclosky
Walz
Wasserman Schultz
Waters, Maxine
Watson Coleman
Welch
Wilson (FL)
Yarmuth

ANSWERED ''PRESENT''—1

Sanford

NOT VOTING—9

Bishop (UT)
Blackburn
King (IA)
Payne
Rush
Shuster
Sinema
Slaughter
Tsongas

□ 1336

Mr. CRIST changed his vote from ''yea'' to ''nay.''

Mr. HUNTER changed his vote from ''nay'' to ''yea.''

So the motion to table was agreed to.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

COMPETITIVE HEALTH INSURANCE REFORM ACT OF 2017

The SPEAKER pro tempore. The unfinished business is the vote on the motion to recommit on the bill (H.R. 372) to restore the application of the Federal antitrust laws to the business of health insurance to protect competition and consumers, offered by the gentlewoman from Nevada (Ms. ROSEN), on which the yeas and nays were ordered.

The Clerk will redesignate the motion.

The Clerk redesignated the motion.

The SPEAKER pro tempore. The question is on the motion to recommit.

This is a 5-minute vote.

The vote was taken by electronic device, and there were—yeas 189, nays 233, not voting 7, as follows:

[Roll No. 183]

YEAS—189

Adams
Aguilar
Barragán
Bass
Beatty
Bera
Beyer
Bishop (GA)
Blum
Blumenauer
Blunt Rochester
Bonamici
Boyle, Brendan F.
Brady (PA)
Brown (MD)
Brownley (CA)
Bustos
Butterfield
Capuano
Carbajal
Cárdenas
Carson (IN)
Cartwright
Castor (FL)
Castro (TX)
Chu, Judy
Cicilline
Clark (MA)
Clarke (NY)
Clay
Cleaver
Clyburn
Cohen
Connolly
Conyers
Cooper
Correa
Costa
Courtney
Crist
Crowley
Cuellar
Cummings
Davis (CA)
Davis, Danny
DeFazio
DeGette
Delaney
DeLauro
DelBene
Demings
DeSaulnier
Deutch
Dingell
Doggett
Doyle, Michael F.
Ellison
Engel
Eshoo
Espaillat
Esty
Evans
Foster
Frankel (FL)
Fudge
Gabbard
Gallego
Garamendi
Gonzalez (TX)
Gottheimer
Green, Al
Green, Gene
Grijalva
Gutiérrez
Hanabusa
Hastings
Heck
Higgins (NY)
Himes
Hoyer
Huffman
Jackson Lee
Jayapal
Jeffries
Johnson (GA)
Johnson, E. B.
Jones
Kaptur
Keating
Kelly (IL)
Kennedy
Khanna
Kihuen
Kildee
Kilmer
Kind
Krishnamoorthi
Kuster (NH)
Langevin
Larsen (WA)
Larson (CT)
Lawrence
Lawson (FL)
Lee
Levin
Lewis (GA)
Lieu, Ted
Lipinski
Loebsack
Lofgren
Lowenthal
Lowey
Lujan Grisham, M.
Luján, Ben Ray
Lynch
Maloney, Sean
Matsui
McCollum
McEachin
McGovern
McNerney
Meeks
Meng
Moore
Moulton
Murphy (FL)
Nadler
Napolitano
Neal
Nolan
Norcross
O'Halleran
O'Rourke
Pallone
Panetta
Pascrell
Pelosi
Perlmutter
Peters
Peterson
Pingree
Pocan
Polis
Price (NC)
Quigley
Raskin
Rice (NY)
Richmond
Rosen
Roybal-Allard
Ruiz
Ruppersberger
Ryan (OH)
Sánchez
Sarbanes
Schakowsky
Schiff
Schneider
Schrader
Scott (VA)
Scott, David
Serrano
Sewell (AL)
Shea-Porter
Sherman
Sires
Smith (WA)
Soto
Speier
Suozzi
Swalwell (CA)
Takano
Thompson (CA)
Thompson (MS)
Titus
Tonko
Torres
Vargas
Veasey
Vela
Velázquez
Visclosky
Walz
Wasserman Schultz
Waters, Maxine
Watson Coleman
Welch
Wilson (FL)
Yarmuth

NAYS—233

Abraham
Aderholt
Allen
Amash
Amodei
Arrington
Babin
Bacon
Banks (IN)
Barletta
Barr
Barton
Bergman
Biggs
Bilirakis
Bishop (MI)
Bishop (UT)
Black
Blackburn
Bost
Brady (TX)
Brat
Bridenstine
Brooks (AL)
Brooks (IN)
Buchanan
Buck
Bucshon
Budd
Burgess
Byrne
Calvert
Carter (GA)
Carter (TX)
Chabot
Chaffetz
Cheney
Coffman
Cole
Collins (GA)
Collins (NY)
Comer
Comstock
Conaway
Cook
Costello (PA)
Cramer
Crawford
Culberson
Curbelo (FL)
Davidson
Davis, Rodney
Denham
Dent
DeSantis
DesJarlais
Diaz-Balart
Donovan
Duffy
Duncan (SC)
Duncan (TN)
Dunn
Emmer
Farenthold
Faso
Ferguson
Fitzpatrick
Fleischmann
Flores
Fortenberry
Foxx
Franks (AZ)
Frelinghuysen
Gaetz
Gallagher
Garrett
Gibbs
Gohmert
Goodlatte
Gosar
Gowdy
Granger
Graves (GA)
Graves (LA)
Graves (MO)
Griffith
Grothman
Guthrie
Harper
Harris
Hartzler
Hensarling
Herrera Beutler
Hice, Jody B.
Higgins (LA)
Hill
Holding
Hollingsworth
Hudson
Huizenga
Hultgren
Hunter
Hurd
Issa
Jenkins (KS)
Jenkins (WV)
Johnson (LA)
Johnson (OH)
Johnson, Sam
Jordan
Joyce (OH)
Katko
Kelly (MS)
Kelly (PA)
King (NY)
Kinzinger
Knight
Kustoff (TN)
Labrador
LaHood
LaMalfa
Lamborn
Lance
Latta
Lewis (MN)
LoBiondo
Long
Loudermilk
Love
Lucas
Luetkemeyer
MacArthur
Marchant
Marino
Marshall
Massie
Mast
McCarthy
McCaul
McClintock
McHenry
McKinley
McMorris Rodgers
McSally
Meadows
Meehan
Messer
Mitchell
Moolenaar
Mooney (WV)
Mullin
Murphy (PA)
Newhouse
Noem
Nunes
Olson
Palazzo
Palmer
Paulsen
Pearce
Perry
Pittenger
Poe (TX)
Poliquin
Posey
Ratcliffe
Reed
Reichert
Renacci
Rice (SC)
Roby
Roe (TN)
Rogers (AL)
Rogers (KY)
Rohrabacher
Rokita
Rooney, Francis
Rooney, Thomas J.
Ros-Lehtinen
Roskam
Ross
Rothfus
Rouzer
Royce (CA)
Russell
Rutherford
Sanford
Scalise
Schweikert
Scott, Austin
Sensenbrenner
Sessions
Shimkus
Shuster
Simpson
Smith (MO)
Smith (NE)
Smith (NJ)
Smith (TX)
Smucker
Stefanik
Stewart
Stivers
Taylor
Tenney
Thompson (PA)
Thornberry
Tiberi
Tipton
Trott
Turner
Upton
Valadao
Wagner
Walberg
Walden
Walker
Walorski
Walters, Mimi
Weber (TX)
Webster (FL)
Wenstrup
Westerman
Williams
Wilson (SC)
Wittman
Womack
Woodall
Yoder
Yoho
Young (AK)
Young (IA)
Zeldin

NOT VOTING—7

King (IA)
Maloney, Carolyn B.
Payne
Rush
Sinema
Slaughter
Tsongas

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore (during the vote). There are 2 minutes remaining.

□ 1345

Mr. KING of New York changed his vote from ''yea'' to ''nay.''

Mr. MCEACHIN changed his vote from ''nay'' to ''yea.''

So the motion to recommit was rejected.

The result of the vote was announced as above recorded.

The SPEAKER pro tempore. The question is on the passage of the bill.

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

RECORDED VOTE

Mr. UPTON. Mr. Speaker, I demand a recorded vote.

A recorded vote was ordered.

The SPEAKER pro tempore. This is a 5-minute vote.

The vote was taken by electronic device, and there were—ayes 416, noes 7, not voting 6, as follows:

[Roll No. 184]

AYES—416

Abraham
Adams
Aderholt
Aguilar
Allen
Amash
Amodei
Arrington
Babin
Bacon
Banks (IN)
Barletta
Barr
Barragán
Barton
Bass
Beatty
Bera
Bergman
Beyer
Biggs
Bilirakis
Bishop (GA)
Bishop (MI)
Bishop (UT)
Black
Blackburn
Blum
Blumenauer
Blunt Rochester
Bonamici
Bost
Boyle, Brendan F.
Brady (PA)
Brady (TX)
Brat
Bridenstine
Brooks (AL)
Brooks (IN)
Brown (MD)
Brownley (CA)
Buchanan
Buck
Bucshon
Budd
Burgess
Bustos
Butterfield
Byrne
Calvert
Capuano
Carbajal
Cárdenas
Carson (IN)
Carter (GA)
Carter (TX)
Cartwright
Castor (FL)
Castro (TX)
Chabot
Chaffetz
Cheney
Chu, Judy
Cicilline
Clark (MA)
Clarke (NY)
Clay
Cleaver
Clyburn
Coffman
Cohen
Cole
Collins (GA)
Collins (NY)
Comer
Comstock
Conaway

Connolly
Conyers
Cook
Cooper
Correa
Costa
Costello (PA)
Courtney
Cramer
Crawford
Crist
Crowley
Cuellar
Culberson
Cummings
Curbelo (FL)
Davidson
Davis (CA)
Davis, Danny
Davis, Rodney
DeFazio
DeGette
Delaney
DeLauro
DelBene
Demings
Denham
Dent
DeSantis
DeSaulnier
DesJarlais
Deutch
Diaz-Balart
Dingell
Doggett
Donovan
Doyle, Michael F.
Duffy
Duncan (SC)
Duncan (TN)
Dunn
Ellison
Emmer
Engel
Eshoo
Espaillat
Esty
Evans
Farenthold
Faso
Ferguson
Fitzpatrick
Fleischmann
Flores
Fortenberry
Foster
Foxx
Frankel (FL)
Franks (AZ)
Frelinghuysen
Gabbard
Gaetz
Gallagher
Garamendi
Garrett
Gibbs
Gohmert
Gonzalez (TX)
Goodlatte
Gosar
Gottheimer
Gowdy
Granger
Graves (GA)
Graves (LA)
Graves (MO)
Green, Al
Green, Gene
Griffith
Grijalva
Grothman
Guthrie
Gutiérrez
Hanabusa
Harper
Harris
Hartzler
Hensarling
Herrera Beutler
Hice, Jody B.
Higgins (LA)
Higgins (NY)
Hill
Himes
Holding
Hollingsworth
Hoyer
Hudson
Huffman
Huizenga
Hultgren
Hunter
Hurd
Issa
Jackson Lee
Jayapal
Jeffries
Jenkins (KS)
Jenkins (WV)
Johnson (GA)
Johnson (LA)
Johnson (OH)
Johnson, E. B.
Johnson, Sam
Jones
Jordan
Joyce (OH)
Kaptur
Katko
Keating
Kelly (IL)
Kelly (MS)
Kelly (PA)
Kennedy
Khanna
Kihuen
Kildee
Kilmer
Kind
King (NY)
Kinzinger
Knight
Krishnamoorthi
Kuster (NH)
Kustoff (TN)
Labrador
LaHood
LaMalfa
Lamborn
Lance
Langevin
Larsen (WA)
Larson (CT)
Latta
Lawrence
Lawson (FL)
Lee
Levin
Lewis (GA)
Lewis (MN)
Lieu, Ted
Lipinski
LoBiondo
Loebsack
Lofgren
Long
Loudermilk
Love
Lowenthal
Lowey
Lucas
Luetkemeyer
Lujan Grisham, M.
Luján, Ben Ray
Lynch
MacArthur
Maloney, Carolyn B.
Maloney, Sean
Marchant
Marino
Marshall
Massie
Mast
Matsui
McCarthy
McCaul
McClintock
McCollum
McEachin
McGovern
McHenry
McKinley
McMorris Rodgers
McNerney
McSally
Meadows
Meehan
Meeks
Meng
Messer
Mitchell
Moolenaar
Mooney (WV)
Moore
Moulton
Mullin
Murphy (FL)
Murphy (PA)
Nadler
Napolitano
Neal
Newhouse
Noem
Nolan
Norcross
Nunes
O'Halleran
O'Rourke
Olson
Palazzo
Pallone
Palmer
Panetta
Pascrell
Paulsen
Pearce
Pelosi
Perlmutter
Perry
Peters
Peterson
Pingree
Pittenger
Pocan
Poe (TX)
Poliquin
Polis
Posey
Price (NC)
Quigley
Raskin
Ratcliffe
Reed
Reichert
Renacci
Rice (NY)
Rice (SC)
Richmond
Roby
Roe (TN)
Rogers (AL)
Rogers (KY)
Rohrabacher
Rokita
Rooney, Francis
Rooney, Thomas J.
Ros-Lehtinen
Rosen
Roskam
Ross
Rothfus
Rouzer
Roybal-Allard
Royce (CA)
Ruiz
Ruppersberger
Russell
Rutherford
Ryan (OH)
Sánchez
Sanford
Sarbanes
Scalise
Schakowsky
Schiff
Schneider
Schrader
Schweikert
Scott (VA)
Scott, Austin
Scott, David
Sensenbrenner
Serrano
Sessions
Sewell (AL)
Shea-Porter
Sherman
Shimkus
Shuster
Simpson
Sires
Smith (MO)
Smith (NE)
Smith (NJ)
Smith (TX)
Smucker
Soto
Speier
Stefanik
Stewart
Stivers
Suozzi
Swalwell (CA)
Takano
Taylor
Tenney
Thompson (CA)
Thompson (MS)
Thompson (PA)
Thornberry
Tiberi
Tipton
Titus
Tonko
Torres
Trott
Turner
Upton
Valadao
Vargas
Veasey
Vela
Velázquez
Visclosky
Wagner
Walberg
Walden
Walker
Walorski
Walters, Mimi
Walz
Wasserman Schultz
Weber (TX)
Webster (FL)
Welch
Wenstrup
Westerman
Williams
Wilson (FL)
Wilson (SC)
Wittman
Womack
Woodall
Yarmuth
Yoder
Yoho
Young (AK)
Young (IA)
Zeldin

NOES—7

Fudge
Gallego
Hastings
Heck
Smith (WA)
Waters, Maxine
Watson Coleman

NOT VOTING—6

King (IA)
Payne
Rush
Sinema
Slaughter
Tsongas

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore (during the vote). There are 2 minutes remaining.

□ 1352

Ms. ESHOO changed her vote from ''no'' to ''aye.''

So the bill was passed.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

Stated for:

Mr. HASTINGS. Mr. Speaker, during rollcall Vote number 184 on H.R. 372, I mistakenly recorded my vote as "nay" when I should have voted "yea."

Mr. GALLEGO. Mr. Speaker, I cast a vote in error. On the rollcall Vote No. 184, I had intended to vote in the follow manner: rollcall Vote No. 184—Competitive Health Insurance Reform Act of 2017—"yes."

SMALL BUSINESS HEALTH FAIRNESS ACT OF 2017

Ms. FOXX. Mr. Speaker, pursuant to House Resolution 210, I call up the bill (H.R. 1101) to amend title I of the Employee Retirement Income Security Act of 1974 to improve access and choice for entrepreneurs with small businesses with respect to medical care for their employees, and ask for its immediate consideration.

The Clerk read the title of the bill.

The SPEAKER pro tempore. Pursuant to House Resolution 210, in lieu of the amendment recommended by the Committee on Education and the Workforce printed in the bill, an amendment in the nature of a substitute consisting of the text of Rules Committee Print 115–9 is adopted and the bill, as amended, is considered read.

The text of the bill, as amended, is as follows:

H.R. 1101

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) SHORT TITLE.—This Act may be cited as the ''Small Business Health Fairness Act of 2017''.

(b) TABLE OF CONTENTS.—The table of contents for this Act is as follows:

Sec. 1. Short title; table of contents.
Sec. 2. Rules governing association health plans.
Sec. 3. Clarification of treatment of single employer arrangements.
Sec. 4. Enforcement provisions relating to association health plans.
Sec. 5. Cooperation between Federal and State authorities.
Sec. 6. Effective date and transitional and other rules.

SEC. 2. RULES GOVERNING ASSOCIATION HEALTH PLANS.

(a) IN GENERAL.—Subtitle B of title I of the Employee Retirement Income Security Act of 1974 is amended by adding after part 7 the following new part:

''PART 8—RULES GOVERNING ASSOCIATION HEALTH PLANS

''SEC. 801. ASSOCIATION HEALTH PLANS.

''(a) IN GENERAL.—For purposes of this part, the term 'association health plan' means a group health plan whose sponsor is (or is deemed under this part to be) described in subsection (b).

''(b) SPONSORSHIP.—The sponsor of a group health plan is described in this subsection if such sponsor—

''(1) is organized and maintained in good faith, with a constitution and bylaws specifically stating its purpose and providing for periodic meetings on at least an annual basis, as a bona fide trade association, a bona fide industry association (including a rural electric cooperative association or a rural telephone cooperative association), a bona fide professional association, or a bona fide chamber of commerce (or similar bona fide business association, including a corporation or similar organization that operates on a cooperative basis (within the meaning of section 1381 of the Internal Revenue Code of 1986)), for substantial purposes other than that of obtaining or providing medical care;

''(2) is established as a permanent entity which receives the active support of its members and requires for membership payment on a periodic basis of dues or payments necessary to maintain eligibility for membership in the sponsor; and

''(3) does not condition membership, such dues or payments, or coverage under the plan on the basis of health status-related factors with respect to the employees of its members (or affiliated members), or the dependents of such employees, and does not condition such dues or payments on the basis of group health plan participation.

Any sponsor consisting of an association of entities which meet the requirements of paragraphs (1), (2), and (3) shall be deemed to be a sponsor described in this subsection.

''SEC. 802. CERTIFICATION OF ASSOCIATION HEALTH PLANS.

''(a) IN GENERAL.—The applicable authority shall prescribe by regulation a procedure under which, subject to subsection (b), the applicable authority shall certify association health plans which apply for certification as meeting the requirements of this part.

''(b) STANDARDS.—Under the procedure prescribed pursuant to subsection (a), in the case of an association health plan that provides at least one benefit option which does not consist of health insurance coverage, the applicable authority shall certify such plan as meeting the requirements of this part only if the applicable authority is satisfied that the applicable requirements of this part are met (or, upon the date on which the plan is to commence operations, will be met) with respect to the plan.

''(c) REQUIREMENTS APPLICABLE TO CERTIFIED PLANS.—An association health plan with respect to which certification under this part is in effect shall meet the applicable requirements of this part, effective on the date of certification (or, if later, on the date on which the plan is to commence operations).

''(d) REQUIREMENTS FOR CONTINUED CERTIFICATION.—The applicable authority may provide by regulation for continued certification of association health plans under this part.

''(e) CLASS CERTIFICATION FOR FULLY INSURED PLANS.—The applicable authority shall establish a class certification procedure for association health plans under which all benefits consist of health insurance coverage. Under such procedure, the applicable authority shall provide for the granting of certification under this part to the plans in each class of such association health plans upon appropriate filing under such procedure in connection with plans in such class and payment of the prescribed fee under section 807(a).

''(f) CERTIFICATION OF SELF-INSURED ASSOCIATION HEALTH PLANS.—An association health plan which offers one or more benefit options which do not consist of health insurance coverage may be certified under this part only if such plan consists of any of the following:

''(1) A plan which offered such coverage on the date of the enactment of the Small Business Health Fairness Act of 2017.

''(2) A plan under which the sponsor does not restrict membership to one or more trades and businesses or industries and whose eligible participating employers represent a broad cross-section of trades and businesses or industries.

''(3) A plan whose eligible participating employers represent one or more trades or businesses, or one or more industries, consisting of any of the following: agriculture; equipment and automobile dealerships; barbering and cosmetology; certified public accounting practices; child care; construction; dance, theatrical and orchestra productions; disinfecting and pest control; financial services; fishing; food service establishments; hospitals; labor organizations; logging; manufacturing (metals); mining; medical and dental practices; medical laboratories; professional consulting services; sanitary services; transportation (local and freight); warehousing; wholesaling/distributing; or any other trade or business or industry which has been indicated as having average or above-average risk or health claims experience by reason of State rate filings, denials of coverage, proposed premium rate levels, or other means demonstrated by such plan in accordance with regulations.

"SEC. 803. REQUIREMENTS RELATING TO SPONSORS AND BOARDS OF TRUSTEES.

''(a) SPONSOR.—The requirements of this subsection are met with respect to an association health plan if the sponsor has met (or is deemed under this part to have met) the requirements of section 801(b) for a continuous period of not less than 3 years ending with the date of the application for certification under this part.

''(b) BOARD OF TRUSTEES.—The requirements of this subsection are met with respect to an association health plan if the following requirements are met:

''(1) FISCAL CONTROL.—The plan is operated, pursuant to a trust agreement, by a board of trustees which has complete fiscal control over the plan and which is responsible for all operations of the plan.

''(2) RULES OF OPERATION AND FINANCIAL CONTROLS.—The board of trustees has in effect rules of operation and financial controls, based on a 3-year plan of operation, adequate to carry out the terms of the plan and to meet all requirements of this title applicable to the plan.

''(3) RULES GOVERNING RELATIONSHIP TO PARTICIPATING EMPLOYERS AND TO CONTRACTORS.—

''(A) BOARD MEMBERSHIP.—

''(i) IN GENERAL.—Except as provided in clauses (ii) and (iii), the members of the board of trustees are individuals selected from individuals who are the owners, officers, directors, or employees of the participating employers or who are partners in the participating employers and actively participate in the business.

''(ii) LIMITATION.—

''(I) GENERAL RULE.—Except as provided in subclauses (II) and (III), no such member is an owner, officer, director, or employee of, or partner in, a contract administrator or other service provider to the plan.

''(II) LIMITED EXCEPTION FOR PROVIDERS OF SERVICES SOLELY ON BEHALF OF THE SPONSOR.—Officers or employees of a sponsor which is a service provider (other than a contract administrator) to the plan may be members of the board if they constitute not more than 25 percent of the membership of the board and they do not provide services to the plan other than on behalf of the sponsor.

''(III) TREATMENT OF PROVIDERS OF MEDICAL CARE.—In the case of a sponsor which is an association whose membership consists primarily of providers of medical care, subclause (I) shall not apply in the case of any service provider described in subclause (I) who is a provider of medical care under the plan.

''(iii) CERTAIN PLANS EXCLUDED.—Clause (i) shall not apply to an association health plan which is in existence on the date of the enactment of the Small Business Health Fairness Act of 2017.

''(B) SOLE AUTHORITY.—The board has sole authority under the plan to approve applications for participation in the plan and to contract with a service provider to administer the day-to-day affairs of the plan.

''(c) TREATMENT OF FRANCHISE NETWORKS.—In the case of a group health plan which is established and maintained by a franchiser for a franchise network consisting of its franchisees—

''(1) the requirements of subsection (a) and section 801(a) shall be deemed met if such requirements would otherwise be met if the franchiser were deemed to be the sponsor referred to in section 801(b), such network were deemed to be an association described in section 801(b), and each franchisee were deemed to be a member (of the association and the sponsor) referred to in section 801(b); and

''(2) the requirements of section 804(a)(1) shall be deemed met.

The Secretary may by regulation define for purposes of this subsection the terms 'franchiser', 'franchise network', and 'franchisee'.

"SEC. 804. PARTICIPATION AND COVERAGE REQUIREMENTS.

''(a) COVERED EMPLOYERS AND INDIVIDUALS.—The requirements of this subsection are met with respect to an association health plan if, under the terms of the plan—

''(1) each participating employer must be—

''(A) a member of the sponsor,

''(B) the sponsor, or

''(C) an affiliated member of the sponsor with respect to which the requirements of subsection (b) are met,

except that, in the case of a sponsor which is a professional association or other individual-based association, if at least one of the officers, directors, or employees of an employer, or at least one of the individuals who are partners in an employer and who actively participates in the business, is a member or such an affiliated member of the sponsor, participating employers may also include such employer; and

''(2) all individuals commencing coverage under the plan after certification under this part must be—

''(A) active or retired owners (including self-employed individuals), officers, directors, or employees of, or partners in, participating employers; or

''(B) the beneficiaries of individuals described in subparagraph (A).

''(b) COVERAGE OF PREVIOUSLY UNINSURED EMPLOYEES.—In the case of an association health plan in existence on the date of the enactment of the Small Business Health Fairness Act of 2017, an affiliated member of the sponsor of the plan may be offered coverage under the plan as a participating employer only if—

''(1) the affiliated member was an affiliated member on the date of certification under this part; or

''(2) during the 12-month period preceding the date of the offering of such coverage, the affiliated member has not maintained or contributed to a group health plan with respect to any of its employees who would otherwise be eligible to participate in such association health plan.

''(c) INDIVIDUAL MARKET UNAFFECTED.—The requirements of this subsection are met with respect to an association health plan if, under the terms of the plan, no participating employer may provide health insurance coverage in the individual market for any employee not covered under the plan which is similar to the coverage contemporaneously provided to employees of the employer under the plan, if such exclusion of the employee from coverage under the plan is based on a health status-related factor with respect to the employee and such employee would, but for such exclusion on such basis, be eligible for coverage under the plan.

''(d) PROHIBITION OF DISCRIMINATION AGAINST EMPLOYERS AND EMPLOYEES ELIGIBLE TO PARTICIPATE.—The requirements of this subsection are met with respect to an association health plan if—

''(1) under the terms of the plan, all employers meeting the preceding requirements of this section are eligible to qualify as participating employers for all geographically available coverage options, unless, in the case of any such employer, participation or contribution requirements of the type referred to in section 2711 of the Public Health Service Act are not met;

''(2) upon request, any employer eligible to participate is furnished information regarding all coverage options available under the plan; and

''(3) the applicable requirements of sections 701, 702, and 703 are met with respect to the plan.

"SEC. 805. OTHER REQUIREMENTS RELATING TO PLAN DOCUMENTS, CONTRIBUTION RATES, AND BENEFIT OPTIONS.

''(a) IN GENERAL.—The requirements of this section are met with respect to an association health plan if the following requirements are met:

''(1) CONTENTS OF GOVERNING INSTRUMENTS.—The instruments governing the plan include a written instrument, meeting the requirements of an instrument required under section 402(a)(1), which—

''(A) provides that the board of trustees serves as the named fiduciary required for plans under section 402(a)(1) and serves in the capacity of a plan administrator (referred to in section 3(16)(A));

''(B) provides that the sponsor of the plan is to serve as plan sponsor (referred to in section 3(16)(B)); and

''(C) incorporates the requirements of section 806.

''(2) CONTRIBUTION RATES MUST BE NONDISCRIMINATORY.—

''(A) The contribution rates for any participating small employer do not vary on the basis of any health status-related factor in relation to employees of such employer or their beneficiaries and do not vary on the basis of the type of business or industry in which such employer is engaged.

''(B) Nothing in this title or any other provision of law shall be construed to preclude an association health plan, or a health insurance issuer offering health insurance coverage in connection with an association health plan, from—

''(i) setting contribution rates based on the claims experience of the plan; or

''(ii) varying contribution rates for small employers in a State to the extent that such rates could vary using the same methodology employed in such State for regulating premium rates in the small group market with respect to health insurance coverage offered in connection with bona fide associations (within the meaning of section 2791(d)(3) of the Public Health Service Act),

subject to the requirements of section 702(b) relating to contribution rates.

''(3) FLOOR FOR NUMBER OF COVERED INDIVIDUALS WITH RESPECT TO CERTAIN PLANS.—If any benefit option under the plan does not consist of health insurance coverage, the plan has as of the beginning of the plan year not fewer than 1,000 participants and beneficiaries.

''(4) MARKETING REQUIREMENTS.—

''(A) IN GENERAL.—If a benefit option which consists of health insurance coverage is offered under the plan, State-licensed insurance agents shall be used to distribute to small employers coverage which does not consist of health insurance coverage in a manner comparable to the manner in which such agents are used to distribute health insurance coverage.

''(B) STATE-LICENSED INSURANCE AGENTS.—For purposes of subparagraph (A), the term 'State-licensed insurance agents' means one or more agents who are licensed in a State and are subject to the laws of such State relating to licensure, qualification, testing, examination, and continuing education of persons authorized to offer, sell, or solicit health insurance coverage in such State.

''(5) REGULATORY REQUIREMENTS.—Such other requirements as the applicable authority determines are necessary to carry out the purposes of this part, which shall be prescribed by the applicable authority by regulation.

''(b) ABILITY OF ASSOCIATION HEALTH PLANS TO DESIGN BENEFIT OPTIONS.—Subject to section 514(d), nothing in this part or any provision of State law (as defined in section 514(c)(1)) shall be construed to preclude an association health plan, or a health insurance issuer offering health insurance coverage in connection with an association health plan, from exercising its sole discretion in selecting the specific items and services consisting of medical care to be included as benefits under such plan or coverage, except (subject to section 514) in the case of (1) any law to the extent that it is not preempted under section 731(a)(1) with respect to matters governed by section 711, 712, or 713, or (2) any law of the State with which filing and approval of a policy type offered by the plan was initially obtained to the extent that such law prohibits an exclusion of a specific disease from such coverage.

''SEC. 806. MAINTENANCE OF RESERVES AND PROVISIONS FOR SOLVENCY FOR PLANS PROVIDING HEALTH BENEFITS IN ADDITION TO HEALTH INSURANCE COVERAGE.

''(a) IN GENERAL.—The requirements of this section are met with respect to an association health plan if—

''(1) the benefits under the plan consist solely of health insurance coverage; or

''(2) if the plan provides any additional benefit options which do not consist of health insurance coverage, the plan—

''(A) establishes and maintains reserves with respect to such additional benefit options, in amounts recommended by the qualified actuary, consisting of—

''(i) a reserve sufficient for unearned contributions;

''(ii) a reserve sufficient for benefit liabilities which have been incurred, which have not been satisfied, and for which risk of loss has not yet been transferred, and for expected administrative costs with respect to such benefit liabilities;

''(iii) a reserve sufficient for any other obligations of the plan; and

''(iv) a reserve sufficient for a margin of error and other fluctuations, taking into account the specific circumstances of the plan; and

''(B) establishes and maintains aggregate and specific excess/stop loss insurance and solvency indemnification, with respect to such additional benefit options for which risk of loss has not yet been transferred, as follows:

''(i) The plan shall secure aggregate excess/stop loss insurance for the plan with an attachment point which is not greater than 125 percent of expected gross annual claims. The applicable authority may by regulation provide for upward adjustments in the amount of such percentage in specified circumstances in which the plan specifically provides for and maintains reserves in excess of the amounts required under subparagraph (A).

''(ii) The plan shall secure specific excess/stop loss insurance for the plan with an attachment point which is at least equal to an amount recommended by the plan's qualified actuary. The applicable authority may by regulation provide for adjustments in the amount of such insurance in specified circumstances in which the plan specifically provides for and maintains reserves in excess of the amounts required under subparagraph (A).

''(iii) The plan shall secure indemnification insurance for any claims which the plan is unable to satisfy by reason of a plan termination. Any person issuing to a plan insurance described in clause (i), (ii), or (iii) of subparagraph (B) shall notify the Secretary of any failure of premium payment meriting cancellation of the policy prior to undertaking such a cancellation. Any regulations prescribed by the applicable authority pursuant to clause (i) or (ii) of subparagraph (B) may allow for such adjustments in the required levels of excess/stop loss insurance as the qualified actuary may recommend, taking into account the specific circumstances of the plan.

''(b) MINIMUM SURPLUS IN ADDITION TO CLAIMS RESERVES.—In the case of any association health plan described in subsection (a)(2), the requirements of this subsection are met if the plan establishes and maintains surplus in an amount at least equal to—

''(1) $500,000, or

''(2) such greater amount (but not greater than $2,000,000) as may be set forth in regulations prescribed by the applicable authority, considering the level of aggregate and specific excess/stop loss insurance provided with respect to such plan and other factors related to solvency risk, such as the plan's projected levels of participation or claims, the nature of the plan's liabilities, and the types of assets available to assure that such liabilities are met.

''(c) ADDITIONAL REQUIREMENTS.—In the case of any association health plan described in subsection (a)(2), the applicable authority may provide such additional requirements relating to reserves, excess/stop loss insurance, and indemnification insurance as the applicable authority considers appropriate. Such requirements may be provided by regulation with respect to any such plan or any class of such plans.

''(d) ADJUSTMENTS FOR EXCESS/STOP LOSS INSURANCE.—The applicable authority may provide for adjustments to the levels of reserves otherwise required under subsections (a) and (b) with respect to any plan or class of plans to take into account excess/stop loss insurance provided with respect to such plan or plans.

''(e) ALTERNATIVE MEANS OF COMPLIANCE.—The applicable authority may permit an association health plan described in subsection (a)(2) to substitute, for all or part of the requirements of this section (except subsection (a)(2)(B)(iii)), such security, guarantee, hold-harmless arrangement, or other financial arrangement as the applicable authority determines to be adequate to enable the plan to fully meet all its financial obligations on a timely basis and is otherwise no less protective of the interests of participants and beneficiaries than the requirements for which it is substituted. The applicable authority may take into account, for purposes of this subsection, evidence provided by the plan or sponsor which demonstrates an assumption of liability with respect to the plan. Such evidence may be in the form of a contract of indemnification, lien, bonding, insurance, letter of credit, recourse under applicable terms of the plan in the form of assessments of participating employers, security, or other financial arrangement.

''(f) MEASURES TO ENSURE CONTINUED PAYMENT OF BENEFITS BY CERTAIN PLANS IN DISTRESS.—

''(1) PAYMENTS BY CERTAIN PLANS TO ASSOCIATION HEALTH PLAN FUND.—

''(A) IN GENERAL.—In the case of an association health plan described in subsection (a)(2), the requirements of this subsection are met if the plan makes payments into the Association Health Plan Fund under this subparagraph when they are due. Such payments shall consist of annual payments in the amount of $5,000, and, in addition to such annual payments, such supplemental payments as the Secretary may determine to be necessary under paragraph (2). Payments under this paragraph are payable to the Fund at the time determined by the Secretary. Initial payments are due in advance of certification under this part. Payments shall continue to accrue until a plan's assets are distributed pursuant to a termination procedure.

''(B) PENALTIES FOR FAILURE TO MAKE PAYMENTS.—If any payment is not made by a plan when it is due, a late payment charge of not more than 100 percent of the payment which was not timely paid shall be payable by the plan to the Fund.

''(C) CONTINUED DUTY OF THE SECRETARY.—The Secretary shall not cease to carry out the provisions of paragraph (2) on account of the failure of a plan to pay any payment when due.

''(2) PAYMENTS BY SECRETARY TO CONTINUE EXCESS/STOP LOSS INSURANCE COVERAGE AND INDEMNIFICATION INSURANCE COVERAGE FOR CERTAIN PLANS.—In any case in which the applicable authority determines that there is, or that there is reason to believe that there will be: (A) A failure to take necessary corrective actions under section 809(a) with respect to an association health plan described in subsection (a)(2); or (B) a termination of such a plan under section 809(b) or 810(b)(8) (and, if the applicable authority is not the Secretary, certifies such determination to the Secretary), the Secretary shall determine the amounts necessary to make payments to an insurer (designated by the Secretary) to maintain in force excess/stop loss insurance coverage or indemnification insurance coverage for such plan, if the Secretary determines that there is a reasonable expectation that, without such payments, claims would not be satisfied by reason of termination of such coverage. The Secretary shall, to the extent provided in advance in appropriation Acts, pay such amounts so determined to the insurer designated by the Secretary.

''(3) ASSOCIATION HEALTH PLAN FUND.—

''(A) IN GENERAL.—There is established on the books of the Treasury a fund to be known as the 'Association Health Plan Fund'. The Fund shall be available for making payments pursuant to paragraph (2). The Fund shall be credited with payments received pursuant to paragraph (1)(A), penalties received pursuant to paragraph (1)(B); and earnings on investments of amounts of the Fund under subparagraph (B).

''(B) INVESTMENT.—Whenever the Secretary determines that the moneys of the fund are in excess of current needs, the Secretary may request the investment of such amounts as the Secretary determines advisable by the Secretary of the Treasury in obligations issued or guaranteed by the United States.

''(g) EXCESS/STOP LOSS INSURANCE.—For purposes of this section—

''(1) AGGREGATE EXCESS/STOP LOSS INSURANCE.—The term 'aggregate excess/stop loss insurance' means, in connection with an association health plan, a contract—

''(A) under which an insurer (meeting such minimum standards as the applicable authority may prescribe by regulation) provides for payment to the plan with respect to aggregate claims under the plan in excess of an amount or amounts specified in such contract;

''(B) which is guaranteed renewable; and

''(C) which allows for payment of premiums by any third party on behalf of the insured plan.

''(2) SPECIFIC EXCESS/STOP LOSS INSURANCE.—The term 'specific excess/stop loss insurance' means, in connection with an association health plan, a contract—

''(A) under which an insurer (meeting such minimum standards as the applicable authority may prescribe by regulation) provides for payment to the plan with respect to claims under the plan in connection with a covered individual in excess of an amount or amounts specified in such contract in connection with such covered individual;

''(B) which is guaranteed renewable; and

''(C) which allows for payment of premiums by any third party on behalf of the insured plan.

''(h) INDEMNIFICATION INSURANCE.—For purposes of this section, the term 'indemnification insurance' means, in connection with an association health plan, a contract—

''(1) under which an insurer (meeting such minimum standards as the applicable authority may prescribe by regulation) provides for payment to the plan with respect to claims under the plan which the plan is unable to satisfy by reason of a termination pursuant to section 809(b) (relating to mandatory termination);

''(2) which is guaranteed renewable and noncancellable for any reason (except as the applicable authority may prescribe by regulation); and

''(3) which allows for payment of premiums by any third party on behalf of the insured plan.

''(i) RESERVES.—For purposes of this section, the term 'reserves' means, in connection with an association health plan, plan assets which meet the fiduciary standards under part 4 and such additional requirements regarding liquidity as the applicable authority may prescribe by regulation.

''(j) SOLVENCY STANDARDS WORKING GROUP.—

''(1) IN GENERAL.—Within 90 days after the date of the enactment of the Small Business Health Fairness Act of 2017, the applicable authority shall establish a Solvency Standards Working Group. In prescribing the initial regulations under this section, the applicable authority shall take into account the recommendations of such Working Group.

''(2) MEMBERSHIP.—The Working Group shall consist of not more than 15 members appointed by the applicable authority. The applicable authority shall include among persons invited to membership on the Working Group at least one of each of the following:

''(A) A representative of the National Association of Insurance Commissioners.

''(B) A representative of the American Academy of Actuaries.

''(C) A representative of the State governments, or their interests.

''(D) A representative of existing self-insured arrangements, or their interests.

''(E) A representative of associations of the type referred to in section 801(b)(1), or their interests.

''(F) A representative of multiemployer plans that are group health plans, or their interests.

"SEC. 807. REQUIREMENTS FOR APPLICATION AND RELATED REQUIREMENTS.

''(a) FILING FEE.—Under the procedure prescribed pursuant to section 802(a), an association health plan shall pay to the applicable authority at the time of filing an application for certification under this part a filing fee in the amount of $5,000, which shall be available in the case of the Secretary, to the extent provided in appropriation Acts, for the sole purpose of administering the certification procedures applicable with respect to association health plans.

''(b) INFORMATION TO BE INCLUDED IN APPLICATION FOR CERTIFICATION.—An application for certification under this part meets the requirements of this section only if it includes, in a manner and form which shall be prescribed by the applicable authority by regulation, at least the following information:

''(1) IDENTIFYING INFORMATION.—The names and addresses of—

''(A) the sponsor; and

''(B) the members of the board of trustees of the plan.

''(2) STATES IN WHICH PLAN INTENDS TO DO BUSINESS.—The States in which participants and beneficiaries under the plan are to be located and the number of them expected to be located in each such State.

''(3) BONDING REQUIREMENTS.—Evidence provided by the board of trustees that the bonding requirements of section 412 will be met as of the date of the application or (if later) commencement of operations.

''(4) PLAN DOCUMENTS.—A copy of the documents governing the plan (including any bylaws and trust agreements), the summary plan description, and other material describing the benefits that will be provided to participants and beneficiaries under the plan.

''(5) AGREEMENTS WITH SERVICE PROVIDERS.—A copy of any agreements between the plan and contract administrators and other service providers.

''(6) FUNDING REPORT.—In the case of association health plans providing benefits options in addition to health insurance coverage, a report setting forth information with respect to such additional benefit options determined as of a date within the 120-day period ending with the date of the application, including the following:

''(A) RESERVES.—A statement, certified by the board of trustees of the plan, and a statement of actuarial opinion, signed by a qualified actuary, that all applicable requirements of section 806 are or will be met in accordance with regulations which the applicable authority shall prescribe.

''(B) ADEQUACY OF CONTRIBUTION RATES.—A statement of actuarial opinion, signed by a qualified actuary, which sets forth a description of the extent to which contribution rates are adequate to provide for the payment of all obligations and the maintenance of required reserves under the plan for the 12-month period beginning with such date within such 120-day period, taking into account the expected coverage and experience of the plan. If the contribution rates are not fully adequate, the statement of actuarial opinion shall indicate the extent to which the rates are inadequate and the changes needed to ensure adequacy.

''(C) CURRENT AND PROJECTED VALUE OF ASSETS AND LIABILITIES.—A statement of actuarial opinion signed by a qualified actuary, which sets forth the current value of the assets and liabilities accumulated under the plan and a projection of the assets, liabilities, income, and expenses of the plan for the 12-month period referred to in subparagraph (B). The income statement shall identify separately the plan's administrative expenses and claims.

''(D) COSTS OF COVERAGE TO BE CHARGED AND OTHER EXPENSES.—A statement of the costs of coverage to be charged, including an itemization of amounts for administration, reserves, and other expenses associated with the operation of the plan.

''(E) OTHER INFORMATION.—Any other information as may be determined by the applicable authority, by regulation, as necessary to carry out the purposes of this part.

''(c) FILING NOTICE OF CERTIFICATION WITH STATES.—A certification granted under this part to an association health plan shall not be effective unless written notice of such certification is filed with the applicable State authority of each State in which at least 25 percent of the participants and beneficiaries under the plan are located. For purposes of this subsection, an individual shall be considered to be located in the State in which a known address of such individual is located or in which such individual is employed.

''(d) NOTICE OF MATERIAL CHANGES.—In the case of any association health plan certified under this part, descriptions of material changes in any information which was required to be submitted with the application for the certification under this part shall be filed in such form and manner as shall be prescribed by the applicable authority by regulation. The applicable authority may require by regulation prior notice of material changes with respect to specified matters which might serve as the basis for suspension or revocation of the certification.

''(e) REPORTING REQUIREMENTS FOR CERTAIN ASSOCIATION HEALTH PLANS.—An association health plan certified under this part which provides benefit options in addition to health insurance coverage for such plan year shall meet the requirements of section 103 by filing an annual report under such section which shall include information described in subsection (b)(6) with respect to the plan year and, notwithstanding section 104(a)(1)(A), shall be filed with the applicable authority not later than 90 days after the close of the plan year (or on such later date as may be prescribed by the applicable authority). The applicable authority may require by regulation such interim reports as it considers appropriate.

''(f) ENGAGEMENT OF QUALIFIED ACTUARY.—The board of trustees of each association health plan which provides benefits options in addition to health insurance coverage and which is applying for certification under this part or is certified under this part shall engage, on behalf of all participants and beneficiaries, a qualified actuary who shall be responsible for the preparation of the materials comprising information necessary to be submitted by a qualified actuary under this part. The qualified actuary shall utilize such assumptions and techniques as are necessary to enable such actuary to form an opinion as to whether the contents of the matters reported under this part—

''(1) are in the aggregate reasonably related to the experience of the plan and to reasonable expectations; and

''(2) represent such actuary's best estimate of anticipated experience under the plan.

The opinion by the qualified actuary shall be made with respect to, and shall be made a part of, the annual report.

"SEC. 808. NOTICE REQUIREMENTS FOR VOLUNTARY TERMINATION.

''Except as provided in section 809(b), an association health plan which is or has been certified under this part may terminate (upon or at any time after cessation of accruals in benefit liabilities) only if the board of trustees, not less than 60 days before the proposed termination date—

''(1) provides to the participants and beneficiaries a written notice of intent to terminate stating that such termination is intended and the proposed termination date;

''(2) develops a plan for winding up the affairs of the plan in connection with such termination in a manner which will result in timely payment of all benefits for which the plan is obligated; and

''(3) submits such plan in writing to the applicable authority.

Actions required under this section shall be taken in such form and manner as may be prescribed by the applicable authority by regulation.

"SEC. 809. CORRECTIVE ACTIONS AND MANDATORY TERMINATION.

''(a) ACTIONS TO AVOID DEPLETION OF RESERVES.—An association health plan which is certified under this part and which provides benefits other than health insurance coverage shall continue to meet the requirements of section 806, irrespective of whether such certification continues in effect. The board of trustees of such plan shall determine quarterly whether the requirements of section 806 are met. In any case in which the board determines that there is reason to believe that there is or will be a failure to meet such requirements, or the applicable authority makes such a determination and so notifies the board, the board shall immediately notify the qualified actuary engaged by the plan,

and such actuary shall, not later than the end of the next following month, make such recommendations to the board for corrective action as the actuary determines necessary to ensure compliance with section 806. Not later than 30 days after receiving from the actuary recommendations for corrective actions, the board shall notify the applicable authority (in such form and manner as the applicable authority may prescribe by regulation) of such recommendations of the actuary for corrective action, together with a description of the actions (if any) that the board has taken or plans to take in response to such recommendations. The board shall thereafter report to the applicable authority, in such form and frequency as the applicable authority may specify to the board, regarding corrective action taken by the board until the requirements of section 806 are met.

''(b) MANDATORY TERMINATION.—In any case in which—

''(1) the applicable authority has been notified under subsection (a) (or by an issuer of excess/stop loss insurance or indemnity insurance pursuant to section 806(a)) of a failure of an association health plan which is or has been certified under this part and is described in section 806(a)(2) to meet the requirements of section 806 and has not been notified by the board of trustees of the plan that corrective action has restored compliance with such requirements; and

''(2) the applicable authority determines that there is a reasonable expectation that the plan will continue to fail to meet the requirements of section 806,

the board of trustees of the plan shall, at the direction of the applicable authority, terminate the plan and, in the course of the termination, take such actions as the applicable authority may require, including satisfying any claims referred to in section 806(a)(2)(B)(iii) and recovering for the plan any liability under subsection (a)(2)(B)(iii) or (e) of section 806, as necessary to ensure that the affairs of the plan will be, to the maximum extent possible, wound up in a manner which will result in timely provision of all benefits for which the plan is obligated.

"SEC. 810. TRUSTEESHIP BY THE SECRETARY OF INSOLVENT ASSOCIATION HEALTH PLANS PROVIDING HEALTH BENEFITS IN ADDITION TO HEALTH INSURANCE COVERAGE.

''(a) APPOINTMENT OF SECRETARY AS TRUSTEE FOR INSOLVENT PLANS.—Whenever the Secretary determines that an association health plan which is or has been certified under this part and which is described in section 806(a)(2) will be unable to provide benefits when due or is otherwise in a financially hazardous condition, as shall be defined by the Secretary by regulation, the Secretary shall, upon notice to the plan, apply to the appropriate United States district court for appointment of the Secretary as trustee to administer the plan for the duration of the insolvency. The plan may appear as a party and other interested persons may intervene in the proceedings at the discretion of the court. The court shall appoint such Secretary trustee if the court determines that the trusteeship is necessary to protect the interests of the participants and beneficiaries or providers of medical care or to avoid any unreasonable deterioration of the financial condition of the plan. The trusteeship of such Secretary shall continue until the conditions described in the first sentence of this subsection are remedied or the plan is terminated.

''(b) POWERS AS TRUSTEE.—The Secretary, upon appointment as trustee under subsection (a), shall have the power—

''(1) to do any act authorized by the plan, this title, or other applicable provisions of law to be done by the plan administrator or any trustee of the plan;

''(2) to require the transfer of all (or any part) of the assets and records of the plan to the Secretary as trustee;

''(3) to invest any assets of the plan which the Secretary holds in accordance with the provisions of the plan, regulations prescribed by the Secretary, and applicable provisions of law;

''(4) to require the sponsor, the plan administrator, any participating employer, and any employee organization representing plan participants to furnish any information with respect to the plan which the Secretary as trustee may reasonably need in order to administer the plan;

''(5) to collect for the plan any amounts due the plan and to recover reasonable expenses of the trusteeship;

''(6) to commence, prosecute, or defend on behalf of the plan any suit or proceeding involving the plan;

''(7) to issue, publish, or file such notices, statements, and reports as may be required by the Secretary by regulation or required by any order of the court;

''(8) to terminate the plan (or provide for its termination in accordance with section 809(b)) and liquidate the plan assets, to restore the plan to the responsibility of the sponsor, or to continue the trusteeship;

''(9) to provide for the enrollment of plan participants and beneficiaries under appropriate coverage options; and

''(10) to do such other acts as may be necessary to comply with this title or any order of the court and to protect the interests of plan participants and beneficiaries and providers of medical care.

''(c) NOTICE OF APPOINTMENT.—As soon as practicable after the Secretary's appointment as trustee, the Secretary shall give notice of such appointment to—

''(1) the sponsor and plan administrator;

''(2) each participant;

''(3) each participating employer; and

''(4) if applicable, each employee organization which, for purposes of collective bargaining, represents plan participants.

''(d) ADDITIONAL DUTIES.—Except to the extent inconsistent with the provisions of this title, or as may be otherwise ordered by the court, the Secretary, upon appointment as trustee under this section, shall be subject to the same duties as those of a trustee under section 704 of title 11, United States Code, and shall have the duties of a fiduciary for purposes of this title.

''(e) OTHER PROCEEDINGS.—An application by the Secretary under this subsection may be filed notwithstanding the pendency in the same or any other court of any bankruptcy, mortgage foreclosure, or equity receivership proceeding, or any proceeding to reorganize, conserve, or liquidate such plan or its property, or any proceeding to enforce a lien against property of the plan.

''(f) JURISDICTION OF COURT.—

''(1) IN GENERAL.—Upon the filing of an application for the appointment as trustee or the issuance of a decree under this section, the court to which the application is made shall have exclusive jurisdiction of the plan involved and its property wherever located with the powers, to the extent consistent with the purposes of this section, of a court of the United States having jurisdiction over cases under chapter 11 of title 11, United States Code. Pending an adjudication under this section such court shall stay, and upon appointment by it of the Secretary as trustee, such court shall continue the stay of, any pending mortgage foreclosure, equity receivership, or other proceeding to reorganize, conserve, or liquidate the plan, the sponsor, or property of such plan or sponsor, and any other suit against any receiver, conservator, or trustee of the plan, the sponsor, or property of the plan or sponsor. Pending such adjudication and upon the appointment by it of the Secretary as trustee, the court may stay any proceeding to enforce a lien against property of the plan or the sponsor or any other suit against the plan or the sponsor.

''(2) VENUE.—An action under this section may be brought in the judicial district where the sponsor or the plan administrator resides or does business or where any asset of the plan is situated. A district court in which such action is brought may issue process with respect to such action in any other judicial district.

''(g) PERSONNEL.—In accordance with regulations which shall be prescribed by the Secretary, the Secretary shall appoint, retain, and compensate accountants, actuaries, and other professional service personnel as may be necessary in connection with the Secretary's service as trustee under this section.

"SEC. 811. STATE ASSESSMENT AUTHORITY.

''(a) IN GENERAL.—Notwithstanding section 514, a State may impose by law a contribution tax on an association health plan described in section 806(a)(2), if the plan commenced operations in such State after the date of the enactment of the Small Business Health Fairness Act of 2017.

''(b) CONTRIBUTION TAX.—For purposes of this section, the term 'contribution tax' imposed by a State on an association health plan means any tax imposed by such State if—

''(1) such tax is computed by applying a rate to the amount of premiums or contributions, with respect to individuals covered under the plan who are residents of such State, which are received by the plan from participating employers located in such State or from such individuals;

''(2) the rate of such tax does not exceed the rate of any tax imposed by such State on premiums or contributions received by insurers or health maintenance organizations for health insurance coverage offered in such State in connection with a group health plan;

''(3) such tax is otherwise nondiscriminatory; and

''(4) the amount of any such tax assessed on the plan is reduced by the amount of any tax or assessment otherwise imposed by the State on premiums, contributions, or both received by insurers or health maintenance organizations for health insurance coverage, aggregate excess/stop loss insurance (as defined in section 806(g)(1)), specific excess/stop loss insurance (as defined in section 806(g)(2)), other insurance related to the provision of medical care under the plan, or any combination thereof provided by such insurers or health maintenance organizations in such State in connection with such plan.

"SEC. 812. DEFINITIONS AND RULES OF CONSTRUCTION.

''(a) DEFINITIONS.—For purposes of this part—

''(1) GROUP HEALTH PLAN.—The term 'group health plan' has the meaning provided in section 733(a)(1) (after applying subsection (b) of this section).

''(2) MEDICAL CARE.—The term 'medical care' has the meaning provided in section 733(a)(2).

''(3) HEALTH INSURANCE COVERAGE.—The term 'health insurance coverage' has the meaning provided in section 733(b)(1).

''(4) HEALTH INSURANCE ISSUER.—The term 'health insurance issuer' has the meaning provided in section 733(b)(2).

''(5) APPLICABLE AUTHORITY.—The term 'applicable authority' means the Secretary, except that, in connection with any exercise of the Secretary's authority regarding which the Secretary is required under section 506(d) to consult with a State, such term means the Secretary, in consultation with such State.

''(6) HEALTH STATUS-RELATED FACTOR.—The term 'health status-related factor' has the meaning provided in section 733(d)(2).

''(7) INDIVIDUAL MARKET.—

''(A) IN GENERAL.—The term 'individual market' means the market for health insurance coverage offered to individuals other than in connection with a group health plan.

''(B) TREATMENT OF VERY SMALL GROUPS.—

''(i) IN GENERAL.—Subject to clause (ii), such term includes coverage offered in connection with a group health plan that has fewer than 2 participants as current employees or participants described in section 732(d)(3) on the first day of the plan year.

''(ii) STATE EXCEPTION.—Clause (i) shall not apply in the case of health insurance coverage offered in a State if such State regulates the coverage described in such clause in the same manner and to the same extent as coverage in the small group market (as defined in section 2791(e)(5) of the Public Health Service Act) is regulated by such State.

''(8) PARTICIPATING EMPLOYER.—The term 'participating employer' means, in connection with an association health plan, any employer, if any individual who is an employee of such employer, a partner in such employer, or a self-employed individual who is such employer (or any dependent, as defined under the terms of the plan, of such individual) is or was covered under such plan in connection with the status of such individual as such an employee, partner, or self-employed individual in relation to the plan.

''(9) APPLICABLE STATE AUTHORITY.—The term 'applicable State authority' means, with respect to a health insurance issuer in a State, the State insurance commissioner or official or officials designated by the State to enforce the requirements of title XXVII of the Public Health Service Act for the State involved with respect to such issuer.

''(10) QUALIFIED ACTUARY.—The term 'qualified actuary' means an individual who is a member of the American Academy of Actuaries.

''(11) AFFILIATED MEMBER.—The term 'affiliated member' means, in connection with a sponsor—

''(A) a person who is otherwise eligible to be a member of the sponsor but who elects an affiliated status with the sponsor,

''(B) in the case of a sponsor with members which consist of associations, a person who is a member of any such association and elects an affiliated status with the sponsor, or

''(C) in the case of an association health plan in existence on the date of the enactment of the Small Business Health Fairness Act of 2017, a person eligible to be a member of the sponsor or one of its member associations.

''(12) LARGE EMPLOYER.—The term 'large employer' means, in connection with a group health plan with respect to a plan year, an employer who employed an average of at least 51 employees on business days during the preceding calendar year and who employs at least 2 employees on the first day of the plan year.

''(13) SMALL EMPLOYER.—The term 'small employer' means, in connection with a group health plan with respect to a plan year, an employer who is not a large employer.

''(b) RULES OF CONSTRUCTION.—

''(1) EMPLOYERS AND EMPLOYEES.—For purposes of determining whether a plan, fund, or program is an employee welfare benefit plan which is an association health plan, and for purposes of applying this title in connection with such plan, fund, or program so determined to be such an employee welfare benefit plan—

''(A) in the case of a partnership, the term 'employer' (as defined in section 3(5)) includes the partnership in relation to the partners, and the term 'employee' (as defined in section 3(6)) includes any partner in relation to the partnership; and

''(B) in the case of a self-employed individual, the term 'employer' (as defined in section 3(5)) and the term 'employee' (as defined in section 3(6)) shall include such individual.

''(2) PLANS, FUNDS, AND PROGRAMS TREATED AS EMPLOYEE WELFARE BENEFIT PLANS.—In the case of any plan, fund, or program which was established or is maintained for the purpose of providing medical care (through the purchase of insurance or otherwise) for employees (or their dependents) covered thereunder and which demonstrates to the Secretary that all requirements for certification under this part would be met with respect to such plan, fund, or program if such plan, fund, or program were a group health plan, such plan, fund, or program shall be treated for purposes of this title as an employee welfare benefit plan on and after the date of such demonstration.''.

(b) CONFORMING AMENDMENTS TO PREEMPTION RULES.—

(1) Section 514(b)(6) of such Act (29 U.S.C. 1144(b)(6)) is amended by adding at the end the following new subparagraph:

''(E) The preceding subparagraphs of this paragraph do not apply with respect to any State law in the case of an association health plan which is certified under part 8.''.

(2) Section 514 of such Act (29 U.S.C. 1144) is amended—

(A) in subsection (b)(4), by striking ''Subsection (a)'' and inserting ''Subsections (a) and (f)'';

(B) in subsection (b)(5), by striking ''subsection (a)'' in subparagraph (A) and inserting ''subsection (a) of this section and subsections (a)(2)(B) and (b) of section 805'', and by striking ''subsection (a)'' in subparagraph (B) and inserting ''subsection (a) of this section or subsection (a)(2)(B) or (b) of section 805''; and

(C) by adding at the end the following new subsection:

''(f)(1) Except as provided in subsection (b)(4), the provisions of this title shall supersede any and all State laws insofar as they may now or hereafter preclude, or have the effect of precluding, a health insurance issuer from offering health insurance coverage in connection with an association health plan which is certified under part 8.

''(2) Except as provided in paragraphs (4) and (5) of subsection (b) of this section—

''(A) In any case in which health insurance coverage of any policy type is offered under an association health plan certified under part 8 to a participating employer operating in such State, the provisions of this title shall supersede any and all laws of such State insofar as they may preclude a health insurance issuer from offering health insurance coverage of the same policy type to other employers operating in the State which are eligible for coverage under such association health plan, whether or not such other employers are participating employers in such plan.

''(B) In any case in which health insurance coverage of any policy type is offered in a State under an association health plan certified under part 8 and the filing, with the applicable State authority (as defined in section 812(a)(9)), of the policy form in connection with such policy type is approved by such State authority, the provisions of this title shall supersede any and all laws of any other State in which health insurance coverage of such type is offered, insofar as they may preclude, upon the filing in the same form and manner of such policy form with the applicable State authority in such other State, the approval of the filing in such other State.

''(3) Nothing in subsection (b)(6)(E) or the preceding provisions of this subsection shall be construed, with respect to health insurance issuers or health insurance coverage, to supersede or impair the law of any State—

''(A) providing solvency standards or similar standards regarding the adequacy of insurer capital, surplus, reserves, or contributions, or

''(B) relating to prompt payment of claims.

''(4) For additional provisions relating to association health plans, see subsections (a)(2)(B) and (b) of section 805.

''(5) For purposes of this subsection, the term 'association health plan' has the meaning provided in section 801(a), and the terms 'health insurance coverage', 'participating employer', and 'health insurance issuer' have the meanings provided such terms in section 812, respectively.''.

(3) Section 514(b)(6)(A) of such Act (29 U.S.C. 1144(b)(6)(A)) is amended—

(A) in clause (i)(II), by striking ''and'' at the end;

(B) in clause (ii), by inserting ''and which does not provide medical care (within the meaning of section 733(a)(2)),'' after ''arrangement,'', and by striking ''title.'' and inserting ''title, and''; and

(C) by adding at the end the following new clause:

''(iii) subject to subparagraph (E), in the case of any other employee welfare benefit plan which is a multiple employer welfare arrangement and which provides medical care (within the meaning of section 733(a)(2)), any law of any State which regulates insurance may apply.''.

(4) Section 514(d) of such Act (29 U.S.C. 1144(d)) is amended—

(A) by striking ''Nothing'' and inserting ''(1) Except as provided in paragraph (2), nothing''; and

(B) by adding at the end the following new paragraph:

''(2) Nothing in any other provision of law enacted on or after the date of the enactment of the Small Business Health Fairness Act of 2017 shall be construed to alter, amend, modify, invalidate, impair, or supersede any provision of this title, except by specific cross-reference to the affected section.''.

(c) PLAN SPONSOR.—Section 3(16)(B) of such Act (29 U.S.C. 102(16)(B)) is amended by adding at the end the following new sentence: ''Such term also includes a person serving as the sponsor of an association health plan under part 8.''.

(d) DISCLOSURE OF SOLVENCY PROTECTIONS RELATED TO SELF-INSURED AND FULLY INSURED OPTIONS UNDER ASSOCIATION HEALTH PLANS.—Section 102(b) of such Act (29 U.S.C. 102(b)) is amended by adding at the end the following: ''An association health plan shall include in its summary plan description, in connection with each benefit option, a description of the form of solvency or guarantee fund protection secured pursuant to this Act or applicable State law, if any.''.

(e) SAVINGS CLAUSE.—Section 731(c) of such Act is amended by inserting ''or part 8'' after ''this part''.

(f) REPORT TO THE CONGRESS REGARDING CERTIFICATION OF SELF-INSURED ASSOCIATION HEALTH PLANS.—Not later than January 1, 2022, the Secretary of Labor shall report to the Committee on Education and the Workforce of the House of Representatives and the Committee on Health, Education, Labor, and Pensions of the Senate the effect association health plans have had, if any, on reducing the number of uninsured individuals.

(g) CLERICAL AMENDMENT.—The table of contents in section 1 of the Employee Retirement Income Security Act of 1974 is amended by inserting after the item relating to section 734 the following new items:

''PART 8. RULES GOVERNING ASSOCIATION HEALTH PLANS

''801. Association health plans.
''802. Certification of association health plans.
''803. Requirements relating to sponsors and boards of trustees.
''804. Participation and coverage requirements.
''805. Other requirements relating to plan documents, contribution rates, and benefit options.
''806. Maintenance of reserves and provisions for solvency for plans providing health benefits in addition to health insurance coverage.
''807. Requirements for application and related requirements.
''808. Notice requirements for voluntary termination.
''809. Corrective actions and mandatory termination.
''810. Trusteeship by the Secretary of insolvent association health plans providing health benefits in addition to health insurance coverage.

''811. State assessment authority.
''812. Definitions and rules of construction.''.

SEC. 3. CLARIFICATION OF TREATMENT OF SINGLE EMPLOYER ARRANGEMENTS.

Section 3(40)(B) of the Employee Retirement Income Security Act of 1974 (29 U.S.C. 1002(40)(B)) is amended—

(1) in clause (i), by inserting after ''control group,'' the following: ''except that, in any case in which the benefit referred to in subparagraph (A) consists of medical care (as defined in section 812(a)(2)), two or more trades or businesses, whether or not incorporated, shall be deemed a single employer for any plan year of such plan, or any fiscal year of such other arrangement, if such trades or businesses are within the same control group during such year or at any time during the preceding 1-year period,'';

(2) in clause (iii), by striking ''(iii) the determination'' and inserting the following:

''(iii)(I) in any case in which the benefit referred to in subparagraph (A) consists of medical care (as defined in section 812(a)(2)), the determination of whether a trade or business is under 'common control' with another trade or business shall be determined under regulations of the Secretary applying principles consistent and coextensive with the principles applied in determining whether employees of two or more trades or businesses are treated as employed by a single employer under section 4001(b), except that, for purposes of this paragraph, an interest of greater than 25 percent may not be required as the minimum interest necessary for common control, or

''(II) in any other case, the determination'';

(3) by redesignating clauses (iv) and (v) as clauses (v) and (vi), respectively; and

(4) by inserting after clause (iii) the following new clause:

''(iv) in any case in which the benefit referred to in subparagraph (A) consists of medical care (as defined in section 812(a)(2)), in determining, after the application of clause (i), whether benefits are provided to employees of two or more employers, the arrangement shall be treated as having only one participating employer if, after the application of clause (i), the number of individuals who are employees and former employees of any one participating employer and who are covered under the arrangement is greater than 75 percent of the aggregate number of all individuals who are employees or former employees of participating employers and who are covered under the arrangement,''.

SEC. 4. ENFORCEMENT PROVISIONS RELATING TO ASSOCIATION HEALTH PLANS.

(a) CRIMINAL PENALTIES FOR CERTAIN WILLFUL MISREPRESENTATIONS.—Section 501 of the Employee Retirement Income Security Act of 1974 (29 U.S.C. 1131) is amended by adding at the end the following new subsection:

''(c) Any person who willfully falsely represents, to any employee, any employee's beneficiary, any employer, the Secretary, or any State, a plan or other arrangement established or maintained for the purpose of offering or providing any benefit described in section 3(1) to employees or their beneficiaries as—

''(1) being an association health plan which has been certified under part 8;

''(2) having been established or maintained under or pursuant to one or more collective bargaining agreements which are reached pursuant to collective bargaining described in section 8(d) of the National Labor Relations Act (29 U.S.C. 158(d)) or paragraph Fourth of section 2 of the Railway Labor Act (45 U.S.C. 152, paragraph Fourth) or which are reached pursuant to labor-management negotiations under similar provisions of State public employee relations laws; or

''(3) being a plan or arrangement described in section 3(40)(A)(i),

shall, upon conviction, be imprisoned not more than 5 years, be fined under title 18, United States Code, or both.''.

(b) CEASE ACTIVITIES ORDERS.—Section 502 of the Employee Retirement Income Security Act of 1974 (29 U.S.C. 1132) is amended by adding at the end the following new subsection:

''(n) ASSOCIATION HEALTH PLAN CEASE AND DESIST ORDERS.—

''(1) IN GENERAL.—Subject to paragraph (2), upon application by the Secretary showing the operation, promotion, or marketing of an association health plan (or similar arrangement providing benefits consisting of medical care (as defined in section 733(a)(2))) that—

''(A) is not certified under part 8, is subject under section 514(b)(6) to the insurance laws of any State in which the plan or arrangement offers or provides benefits, and is not licensed, registered, or otherwise approved under the insurance laws of such State; or

''(B) is an association health plan certified under part 8 and is not operating in accordance with the requirements under part 8 for such certification,

a district court of the United States shall enter an order requiring that the plan or arrangement cease activities.

''(2) EXCEPTION.—Paragraph (1) shall not apply in the case of an association health plan or other arrangement if the plan or arrangement shows that—

''(A) all benefits under it referred to in paragraph (1) consist of health insurance coverage; and

''(B) with respect to each State in which the plan or arrangement offers or provides benefits, the plan or arrangement is operating in accordance with applicable State laws that are not superseded under section 514.

''(3) ADDITIONAL EQUITABLE RELIEF.—The court may grant such additional equitable relief, including any relief available under this title, as it deems necessary to protect the interests of the public and of persons having claims for benefits against the plan.''.

(c) RESPONSIBILITY FOR CLAIMS PROCEDURE.—Section 503 of the Employee Retirement Income Security Act of 1974 (29 U.S.C. 1133) is amended by inserting ''(a) IN GENERAL.—'' before ''In accordance'', and by adding at the end the following new subsection:

''(b) ASSOCIATION HEALTH PLANS.—The terms of each association health plan which is or has been certified under part 8 shall require the board of trustees or the named fiduciary (as applicable) to ensure that the requirements of this section are met in connection with claims filed under the plan.''.

SEC. 5. COOPERATION BETWEEN FEDERAL AND STATE AUTHORITIES.

Section 506 of the Employee Retirement Income Security Act of 1974 (29 U.S.C. 1136) is amended by adding at the end the following new subsection:

''(d) CONSULTATION WITH STATES WITH RESPECT TO ASSOCIATION HEALTH PLANS.—

''(1) AGREEMENTS WITH STATES.—The Secretary shall consult with the State recognized under paragraph (2) with respect to an association health plan regarding the exercise of—

''(A) the Secretary's authority under sections 502 and 504 to enforce the requirements for certification under part 8; and

''(B) the Secretary's authority to certify association health plans under part 8 in accordance with regulations of the Secretary applicable to certification under part 8.

''(2) RECOGNITION OF PRIMARY DOMICILE STATE.—In carrying out paragraph (1), the Secretary shall ensure that only one State will be recognized, with respect to any particular association health plan, as the State with which consultation is required. In carrying out this paragraph—

''(A) in the case of a plan which provides health insurance coverage (as defined in section 812(a)(3)), such State shall be the State with which filing and approval of a policy type offered by the plan was initially obtained, and

''(B) in any other case, the Secretary shall take into account the places of residence of the participants and beneficiaries under the plan and the State in which the trust is maintained.''.

SEC. 6. EFFECTIVE DATE AND TRANSITIONAL AND OTHER RULES.

(a) EFFECTIVE DATE.—The amendments made by this Act shall take effect 1 year after the date of the enactment of this Act. The Secretary of Labor shall first issue all regulations necessary to carry out the amendments made by this Act within 1 year after the date of the enactment of this Act.

(b) TREATMENT OF CERTAIN EXISTING HEALTH BENEFITS PROGRAMS.—

(1) IN GENERAL.—In any case in which, as of the date of the enactment of this Act, an arrangement is maintained in a State for the purpose of providing benefits consisting of medical care for the employees and beneficiaries of its participating employers, at least 200 participating employers make contributions to such arrangement, such arrangement has been in existence for at least 10 years, and such arrangement is licensed under the laws of one or more States to provide such benefits to its participating employers, upon the filing with the applicable authority (as defined in section 812(a)(5) of the Employee Retirement Income Security Act of 1974 (as amended by this subtitle)) by the arrangement of an application for certification of the arrangement under part 8 of subtitle B of title I of such Act—

(A) such arrangement shall be deemed to be a group health plan for purposes of title I of such Act;

(B) the requirements of sections 801(a) and 803(a) of the Employee Retirement Income Security Act of 1974 shall be deemed met with respect to such arrangement;

(C) the requirements of section 803(b) of such Act shall be deemed met, if the arrangement is operated by a board of directors which—

(i) is elected by the participating employers, with each employer having one vote; and

(ii) has complete fiscal control over the arrangement and which is responsible for all operations of the arrangement;

(D) the requirements of section 804(a) of such Act shall be deemed met with respect to such arrangement; and

(E) the arrangement may be certified by any applicable authority with respect to its operations in any State only if it operates in such State on the date of certification.

The provisions of this subsection shall cease to apply with respect to any such arrangement at such time after the date of the enactment of this Act as the applicable requirements of this subsection are not met with respect to such arrangement.

(2) DEFINITIONS.—For purposes of this subsection, the terms ''group health plan'', ''medical care'', and ''participating employer'' shall have the meanings provided in section 812 of the Employee Retirement Income Security Act of 1974, except that the reference in paragraph (7) of such section to an ''association health plan'' shall be deemed a reference to an arrangement referred to in this subsection.

The SPEAKER pro tempore. The bill shall be debatable for 1 hour equally divided and controlled by the chair and

ranking minority member of the Committee on Education and the Workforce.

After 1 hour of debate, it shall be in order to consider the further amendment printed in House Report 115–51, if offered by the Member designated in the report, which shall be considered read and shall be separately debatable for the time specified in the report equally divided and controlled by the proponent and an opponent.

The gentlewoman from North Carolina (Ms. FOXX) and the gentleman from Virginia (Mr. SCOTT) each will control 30 minutes.

The Chair recognizes the gentlewoman from North Carolina.

GENERAL LEAVE

Ms. FOXX. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and include extraneous material on H.R. 1101.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from North Carolina?

There was no objection.

Ms. FOXX. Mr. Speaker, I yield myself such time as I may consume.

I rise today in support of H.R. 1101, the Small Business Health Fairness Act of 2017.

Mr. Speaker, this week marks 7 years since ObamaCare was signed into law. We all remember the promises former President Obama and Washington Democrats made at the time.

Families were promised that their healthcare costs would go down. They were promised more choices and more competition. Small businesses and their employees were promised greater access to affordable health care.

But for 7 years, we have watched as all of those promises were broken. For 7 years, we have heard from families and small businesses across the country that have seen their healthcare costs skyrocket and their choices diminish.

Members of the House Education and the Workforce Committee recently heard from Scott Bollenbacher, an Indiana small-business owner with 11 full-time employees. The company has been forced to switch healthcare plans twice now under ObamaCare, and their only viable option this year was a plan with a 78 percent premium increase.

Mr. Bollenbacher is one of countless small-business owners struggling to make ends meet under a failed government takeover of health care. Because of ObamaCare, 300,000 small-business jobs have been destroyed, including nearly 8,000 in my home State of North Carolina.

□ 1400

Additionally, an estimated 10,000 small businesses nationwide have closed their doors, and small business employees have lost $19 billion each year in wages.

It should come as no surprise that, since 2008, the share of small businesses with fewer than 10 employees offering health coverage has dropped 36 percent. It is not that they don't want to; it is that onerous mandates and regulations have made it simply unaffordable to do so.

Fortunately, relief is on the way. This week we are not only moving to repeal ObamaCare, we are also advancing positive reforms that promote affordable coverage for working families, including the Small Business Health Fairness Act.

As its title implies, this important legislation is about fairness for small businesses and their employees. Today, small businesses are on an unfair playing field with larger companies and unions when it comes to health care. Large businesses have the ability to negotiate for more affordable healthcare costs for their employees, but small businesses do not have the same advantage. Because of their size, small businesses have limited bargaining power, which means their employees can end up paying more for health insurance.

With millions of Americans employed by a small business, it is long past time to level the playing field. That is exactly what this commonsense legislation is about. This bill would empower small businesses to band together through association health plans, or AHPs, to purchase high-quality health care at a lower cost for workers.

This bill represents a first step toward a more competitive health insurance market that crosses State lines. Under H.R. 1101, small businesses in different States could join together through a group health plan. These plans would have strong protections and solvency requirements to ensure workers can count on healthcare coverage when they and their families need it.

What does all of this mean: more choices, more freedom, and more affordable health care for working families and small-business owners like Scott Bollenbacher. This is a better way, one that stands in stark contrast to ObamaCare's failed approach. Instead of more mandates, this bill empowers individuals to access the high-quality, affordable healthcare plan that meets their needs.

I want to thank my colleague Representative SAM JOHNSON for championing, for years, the positive reforms in this bill.

I urge Members to vote ''yes'' on H.R. 1101 so we can level the playing field for small businesses and expand affordable health coverage for working families.

Mr. Speaker, I reserve the balance of my time.

Mr. SCOTT of Virginia. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, today we are considering a bill that purports to make it easier for small businesses to obtain coverage, and tomorrow we will vote on a bill that will take away health insurance coverage for 24 million Americans and force everyone else to pay more for less. So not only are we considering a bill today that will make things worse, we are considering it a day before we vote on ruining health security for working families in order to provide tax cuts for the wealthy.

As we debate the possible replacement of the Affordable Care Act, I think it is instructive that we look back at what the situation was before the ACA passed.

Listening to some, you would think that the costs weren't going up at all. In fact, costs were going through the roof before the ACA, and small businesses, particularly, were having spectacular cost increases—and that is until somebody got sick. At that point, you were unlikely to be able to afford any insurance at all.

Every year before the ACA, small businesses were dropping insurance right and left, particularly after somebody got sick. Also, before the Affordable Care Act, people with preexisting conditions couldn't get insurance. Women were paying more than men. Millions of people were losing their insurance every year.

Since then, the costs have continued to go up, but at the lowest rate in the last 50 years. People with preexisting conditions can get insurance at the standard rate. Small businesses can cover their employees through the Affordable Care Act at the average cost, whether or not anybody in their small business has cancer or diabetes. Women are not paying more than men. Instead of millions of people losing their insurance every year, 20 million more people have insurance.

In addition to that, families now enjoy strong consumer protections. The full name of the Affordable Care Act is the Patient Protection and Affordable Care Act. Now there are no caps on what an insurance company pays, and they can't cancel your policy for anything other than nonpayment. Preventive services such as cancer screenings are available with no copay or deductible. Those up to 26 can stay on their parents' policy, and the doughnut hole is being closed.

The ACA did not cure every problem, but it went a long way to making Americans healthier and giving them some economic security. It could have gone further if, in the past 7 years, Republicans would have been willing to work with Democrats to build on the progress instead of forcing over 60 votes to repeal all parts of the Affordable Care Act.

If we do anything now, we ought to improve the situation, not make it worse. The Republican plan makes things worse. The CBO analysis concluded that 24 million fewer people will have insurance, and most of those that get insurance in the future will be paying more for policies that don't deliver as much.

For seniors, particularly, the costs will skyrocket. And, in fact, the prediction that the rates will go down in

the future are a result of the conclusion that so few seniors will be able to buy insurance that they will no longer be in the insurance pool.

The insurance pool would be younger, and, therefore, the costs would go down. But that is only because seniors won't be able to afford the insurance. Therefore, the insurance pool will be younger and cheaper for those who can actually afford it, but that is not a good thing for seniors who need the insurance and can't afford it.

So today we are considering another failed policy. The association plan ideas have been studied for years, and it has been concluded that it is a bad idea. Under the Affordable Care Act, essentially everybody pays average. If you change that arithmetic so some can pay a little less, then arithmetic matters. Everybody else is going to pay a little more.

In the association plans, quite frankly, I will admit, they will always work for the few that can get into them. That is because, if you can draw out your own group, if they are healthier than average and can pay less, they will pay less and the association will work. But if you pull out a group and it turns out they are a little sicker than average and the bids come in above average, then the association will dissolve and everybody will go back into the insurance pool.

So if you can pull out a group, they will always pay less until somebody gets sick, and then everybody jumps back into the insurance pool. The higher cost groups will be left behind. The lower cost groups will segment out, and then the rates will go down for a few and up for everybody else.

This is exactly why the American Academy of Actuaries has said that expanding association plans ''could result in unintended consequences such as market segmentation that could threaten . . . viability and make it more difficult for high-cost individuals and groups to obtain coverage.''

One of the other problems is a lack of regulation. If a group is allowed to circumvent State regulations, that policy may be cheaper because the policy is not as good.

There are a lot of ways that you can save money. You can pull out a group of just young men and save on maternity benefits. That would be cheaper for them but more expensive for everybody else.

And what happens when a new spouse needs coverage and tries to get it as an optional benefit? They won't be able to afford it.

Workers and businessowners are likely to get fewer benefits under the association approach and will be disadvantaged compared to those in the regular pool getting comprehensive benefits.

This is exactly why Consumers Union has stated that the legislation is ''likely . . . to provide minimal and nonuniform benefits.''

Mr. Speaker, this bill will make it easier to set up these kinds of associations and let them avoid State regulations, which could require solvency, nice solvency requirements, and consumer protections. The protections in this bill are not sufficient to protect consumers, and most States would require stronger capital requirements than the bill requires.

Much like the Republican replacement bill, this bill goes in the wrong direction, so I urge my colleagues to vote ''no.''

Mr. Speaker, I reserve the balance of my time.

Ms. FOXX. Mr. Speaker, I yield 6 minutes to the gentleman from Texas (Mr. SAM JOHNSON), the author of the bill.

Mr. SAM JOHNSON of Texas. Mr. Speaker, I thank the gentlewoman for yielding.

I would like to start off by thanking Chairwoman FOXX and Chairman WALBERG for their strong support of my bill, the Small Business Health Fairness Act.

Mr. Speaker, the legislation before us today is on an issue that has long been near and dear to my heart: association health plans. Association health plans would allow small businesses to join together and provide healthcare coverage just like large corporations and unions do today.

Association health plans are also a central part of replacing ObamaCare with commonsense solutions.

You know, ObamaCare has been an absolute disaster. My constituents in Collin County, Texas, have shared with me their negative experiences with it since it became law nearly 7 years ago.

One of the groups hardest hit by ObamaCare is small businesses, the backbone of our economy. Since 2008, over one-third of businesses with fewer than 10 employees offering health insurance have dropped insurance; and, you know, that is just wrong.

Because ObamaCare is failing, we need to repeal it and replace it with better solutions for the American people. One of these solutions is my association health plan bill.

What my bill does is simply allow small businesses to join together through trade or professional organizations. As we all know, the basic rule of insurance is the bigger the risk pool, the lower the cost.

Furthermore, my bill allows small businesses to join together across State lines. My bill would also free small businesses from costly and burdensome State and Federal requirements. This isn't anything different from what large employers and unions already do. My bill is simply about leveling the playing field for small businesses and their hardworking employees.

This bill also has wide support from the business community, including the United States Chamber of Commerce, the National Federation of Independent Business, the National Retail Federation, and the International Franchise Association.

Not everyone knows this, but I was a small-business owner myself between my time in the Air Force and coming to Congress. In fact, I established a home building business in north Texas from scratch, so I can understand where small businesses are coming from.

For example, Bob Gibbons and his wife own a commercial real estate business in my hometown of Plano, Texas. They have had a tough time obtaining good, affordable health insurance, a problem that has gotten worse since ObamaCare.

Bob sums up this entire issue pretty well in two sentences: ''Why should someone's status as an employee give them preferential right to decent group health coverage? Entrepreneurs are penalized when they start a small business because they can't get comparable coverage.''

□ 1415

Bob's experience underscores the entire point behind the Small Business Health Fairness Act.

Mr. Speaker, I include Bob's letter in the RECORD, along with letters from the cities of Frisco, Richardson, and Anna in my district.

REATA COMMERCIAL REALTY, INC.,
Plano, TX, March 2, 2017.

Re Association Health Plans.

Hon. SAM JOHNSON,
House of Representatives,
Washington, DC.

DEAR REPRESENTATIVE JOHNSON: I would like to register my support of your recently introduced bill, H.R. 1101, which would provide for association health plans. I am a small business owner in your district in Plano, Texas. My wife and I have been on a roller coaster of health coverage over the years. We were covered by employer plans when I was an employee (pre-ACA). Then we had to negotiate for an individual plan when I started my own business (pre-ACA). Then we were again covered by an employer plan when my wife went to work (post-ACA). And now that she works with me, we must navigate the purchase of an individual plan again, but in the post-ACA failure environment.

I have always thought it was ridiculous that the only decent health coverage was available to employees of companies that provided it. Why should someone's status as an employee give them a preferential right to decent group health coverage? Entrepreneurs are penalized when they start a small business because they can't get comparable coverage.

I was thrilled when I ran into Gabi Pate at a Plano Chamber of Commerce Public Policy Committee meeting yesterday and heard you were trying to help. Association health plans would be a step in the right direction. At least then I could get in on a group plan through trade associations, a chamber of commerce or another qualified group. I truly hope that the bill will allow for portability of that health coverage, however, so I can leave the association if I choose and still have coverage.

Thank you for your leadership in this area. Please don't hesitate to contact me if you have any questions.

Sincerely,

BOB GIBBONS.

FRISCO CHAMBER OF COMMERCE,
Frisco, TX, March 22, 2017.

On behalf of the Frisco Chamber of Commerce in Frisco, Texas, I write in strong support of the Small Business Health Fairness Act. The Frisco Chamber of Commerce provides advocacy support for over 1,300 businesses of all sizes. We consistently hear from our small business members about the hardship in providing appropriate and adequate healthcare for their employees at an affordable price. This legislation will increase small businesses' bargaining power with health insurance providers and ensure a level playing field for smaller entities that want to help their workers and families with healthcare costs.

Locally owned small businesses are a huge contributor in the fabric of a business community. It is through the small and medium businesses that we see the greatest job growth. It is through the small and medium businesses that we see the greatest increase in retail spending in the local communities. However, while many see the benefit of a strong small business community, they have been neglected in being able to negotiate for competitive pricing in healthcare costs.

For these reasons, the Frisco Chamber of Commerce strongly supports the Small Business Health Fairness Act, which will allow small businesses the opportunity to band together to provide their employees with better, more affordable health insurance coverage. With rising medical costs being a top concern of both individuals and employers, the impact of this increased availability of affordable insurance would be significant.

Sincerely,

TONY FELKER,
President/CEO.

RICHARDSON, TEXAS,
CHAMBER OF COMMERCE,
Richardson, TX, March 21, 2017.

Re Association Health Plans.

Hon. SAM JOHNSON,
House of Representatives,
Washington DC.

DEAR CHAIRMAN JOHNSON: On behalf of the Richardson Chamber of Commerce, a 5-star chamber, I write in strong support of the Small Business Health Fairness Act. This legislation will increase small businesses' bargaining power with health insurance providers and ensure a level playing field for smaller entities that want to help their workers and families with health care costs. The Richardson Chamber of Commerce commends you for your longstanding leadership on this important issue to the small business community. With more than 650 member organizations, the Richardson Chamber of Commerce continues the goal of its founding fathers to serve as the cornerstone of economic and community development for the city of Richardson. In order to continue that growth, our small businesses must be allowed to offer affordable healthcare to their employees.

While the small business community's economic output is great, its negotiating power in the health care market is at a competitive disadvantage. The federal Employee Retirement Income Security Act, which currently permits large corporations and labor organizations to ''self-insure'' and offer insurance with certain exemptions from state law, does not provide small business with the same advantage. The law must be reformed to empower small employers with the ability to obtain and offer competitively priced health insurance.

For these reasons, the Richardson Chamber of Commerce and our member companies, strongly support the Small Business Health Fairness Act, which will allow small businesses the opportunity to band together to provide their employees with better, more affordable health insurance coverage. With rising medical costs being a top concern of both individuals and employers, the impact of this increased availability of affordable insurance would be significant.

The Richardson Chamber commends your efforts to provide small businesses with health care options in a thoughtful and constructive manner. We look forward to working with you on this key legislation.

Sincerely,

WILLIAM C. SPROULL,
President and CEO.

GREATER ANNA
CHAMBER OF COMMERCE,
Anna, TX, March 21, 2017.

Hon. SAM JOHNSON,
House of Representatives,
Washington, DC.

DEAR REPRESENTATIVE JOHNSON: On behalf of the Greater Anna Chamber of Commerce and our more than 200 members, including a majority of small business, I would like to show our support of the H.R. 101, the Small Business Health Fairness Act. There are many small businesses in our community that cannot currently economically and efficiently afford healthcare for their employees. We hope this legislation will help ease that affordability on both our businesses and employees.

With better access to healthcare, employees could be more willing to work at these smaller businesses instead of only working for larger corporations. This will help our local community by keeping our employees closer to their home, families and children's schools. Again, we support for Small Business Health Fairness Act and look forward to a better solution to our current healthcare problem.

Best Regards,

KEVIN HALL,
Executive Director,
Greater Anna Chamber of Commerce.

Mr. SAM JOHNSON of Texas. Mr. Speaker, by allowing small businesses to band together, they can collectively purchase more affordable health insurance for their employees.

Let's get this commonsense plan passed. Let's help those who power our economy be able to get the health care they want, need, and deserve for themselves and their workers.

Mr. Speaker, I urge all my colleagues to vote in favor of H.R. 1101.

Mr. SCOTT of Virginia. Mr. Speaker, I yield 4 minutes to the gentleman from New York (Mr. ESPAILLAT).

Mr. ESPAILLAT. Mr. Speaker, I rise today in opposition to H.R. 1101, the Small Business Health Fairness Act.

Mr. Speaker, the concept of association health plans, AHPs, is nothing new. Versions of this bill have been around for many years. They don't work.

Currently, AHPs are regulated by the States, ensuring the ability to protect consumers. H.R. 1101, however, will yank association health plans from the realm of State oversight by federally certifying them and holding them to few, if any, regulatory requirements. This would strip the States of the ability and fidelity to regulate beneficiary protections that exist to protect their citizens.

Federally certifying AHPs will allow selective choice of which benefits are provided and which persons can enroll. This is a complete and total disservice to all individuals and citizens in a State's health insurance market. Association health plans currently exist and operate in New York State, serving many thousands of beneficiaries and avail New Yorkers' protections, benefits guarantees, and avenues for appeal through the Department of Financial Services.

This bill does nothing to offer guaranteed affirmative coverage. It would permit preexisting conditions as a legitimate reason to exclude individuals. It has no minimum threshold for anything resembling essential health benefits, and it fails to offer a requirement for the actuarial value of the insurance product to cover total health costs.

What then remains is not a health plan. In fact, what remains is strikingly similar to what the American Health Care Act purports to offer millions of Americans: less coverage for those enrolled and more expense for those who are too sick, too old, and too poor to be approached by an AHP.

AHPs would lead to higher costs for seniors and individuals who are sicker and will dilute the risk pool of entire States, leading to higher premiums and out-of-pocket expenses. Where the American Health Care Act will unilaterally hurt all Americans, H.R. 1101 would accomplish the same harm directed at the sickest and most underserved in a more prejudicial manner.

Mr. Speaker, I offered an amendment to this bill, which was germane, yet not made in order. My amendment would have protected the rights of the States to regulate association health plans, to include regulation of benefits, consumer protections, and rating restrictions. The goal of my amendment was to ensure that all States and their constituents have the same security and protections that my constituents have benefited from over the past 7 years: consumer protections against surprise billing and adverse selection, provider protection for prompt claim payment and preauthorization, protection for local and regional insurers so that large national insurance companies cannot cherry-pick the good risk.

I certainly believe and would hope that my colleagues on the other side of the aisle support program integrity and protecting our constituents, which is what my amendment would have made clear.

Lastly, I would like to be clear that I am supportive of increasing access to health care that is comprehensive and affordable for all Americans. The bill before us does not do that. The American Health Care Act certainly does not do that.

Mr. Speaker, I urge my colleagues to strongly oppose this rolling back of health care.

Ms. FOXX. Mr. Speaker, I yield 2 minutes to the gentleman from Michigan (Mr. WALBERG), the chairman of the Subcommittee on Health, Employment, Labor, and Pensions.

Mr. WALBERG. Mr. Speaker, I rise today in support of H.R. 1101, the Small Business Health Fairness Act, a bill that will help people in Michigan and across the country by expanding affordable coverage for workers and their families.

I thank our colleague, Representative SAM JOHNSON of Texas, for introducing this legislation. I really enjoyed hearing the gentleman from Texas and his comments about this being common sense. Representative SAM JOHNSON of Texas defines common sense and patriotism. He has tirelessly championed this bill for years, and it is a pleasure to join him in pushing for these positive reforms.

Mr. Speaker, health care in this country has become simply unaffordable for far too many small businesses and working families. The Patient Protection and Affordable Care Act has proved to be an utter failure for most people in the United States. It is snowballing out of control and rolling over working families and small businesses.

Ninety-five percent of small businesses have reported increased health insurance costs over the past 5 years. A 2015 study by the National Federation of Independent Businesses found that the cost of health insurance is the principal reason that small businesses do not offer coverage.

As a result, since 2008, 36 percent of small businesses with fewer than 10 employees have stopped offering healthcare coverage to their employees. It is not that they don't want to offer healthcare benefits. The truth of the matter is that small businesses have been hit especially hard by the government takeover of health care. Under ObamaCare, the working families I speak to in my district are paying more for less and finding they have fewer options for coverage.

H.R. 1101 is a key part of the third phase of our efforts to reform our healthcare system so it works for all Americans. It aims to increase the negotiating power of small businesses so they can bring down health insurance costs for their employees.

Right now, small businesses are often on an unequal playing field with larger companies and unions. Because they have few employees, small businesses have limited bargaining power when it comes to negotiating for lower insurance costs for their workers.

The SPEAKER pro tempore (Mr. ROGERS of Kentucky). The time of the gentleman from Michigan has expired.

Ms. FOXX. Mr. Speaker, I yield an additional 15 seconds to the gentleman.

Mr. WALBERG. Mr. Speaker, this bill levels the playing field for small businesses, allowing them to band together through association health plans and negotiate the best deals to provide health care at a lower cost. It also represents an important step toward purchasing health insurance across State lines.

Today's vote is an immediate first step to help job creators provide affordable healthcare options to their employees and a transition toward a patient-centered healthcare system.

Mr. Speaker, I urge my colleagues to support this legislation.

Mr. SCOTT of Virginia. Mr. Speaker, I yield 4 minutes to the gentleman from Connecticut (Mr. COURTNEY).

Mr. COURTNEY. Mr. Speaker, again, as someone who was a small-business employer for 27 years and provided health benefits for my staff, I am acutely aware of the challenges in the small-business market which long predate passage of the Affordable Care Act and which is still something that we can do better in terms of helping folks deal with this issue, which, again, is so important because small businesses are the job creators in the American economy.

What I want to sort of point out is that this legislation, in my opinion, is just a complete misfire. Let's, first of all, remind everyone that there are over 670 association health plans existing in America today.

The notion that the Affordable Care Act somehow is smothering or stifling association health plans is, in fact, just factually false. There are many that are in business, providing coverage, as has been said by some of the prior speakers, for people in industries like restaurants, et cetera. Again, we are not talking about some existential threat that is out there in terms of association health plans today.

The guts of this bill—and it is quite extraordinary coming from, again, the Republican Party—is to preempt State Governments from having any say over the solvency and the benefit design of plans that operate under association health plans.

Back in the 1990s, there was a spate of problems with association health plans going belly up because, again, there was no State insurance solvency standards to make sure that there were funds set aside to pay the bills of people who were employed in the businesses that these plans were set up to serve.

As a result, Congress acted. We basically said that the Federal Government was doing a lousy job in terms of protecting patients. And we gave States the ability, through their State insurance departments, to make sure that certain solvency standards were met and, as was stated earlier, that they weren't able to cherry-pick just the healthiest and leave the rest for the other segments of the health insurance industry.

As a result of the fact that we made this change, again, the State insurance commissioners all across America, Republican States and Democratic States, have weighed in. They sent a letter on February 28 pleading with Congress not to do this, not to pass this bill which eliminates their ability to protect the citizens of their States.

So this bill is actually an anti-states' rights bill because it is basically saying the Federal Government is just going to step in and wipe out the way in which these plans operate and just lead, again, a race to the bottom, the lowest threshold of protections for patients; and that is considered healthcare reform or somehow advancing the ball in terms of helping small businesses.

There are many other ways to deal with this issue, and this is not the right one. Again, this is not some new idea that we are debating. This has been back and forth over the years, in the 1990s and the early 2000s. It predates the Affordable Care Act by decades, and it is just an old chestnut that is being thrown out in the floor in the name of some idea to sound like we are doing something for small businesses.

Again, under the Affordable Care Act, we set up a 50 percent tax credit for businesses that qualify for it to make health insurance affordable.

I did two townhalls back in my district. I had a plumber from the next town over who, again, took advantage of that 50 percent tax credit. He saved thousands of dollars in terms of providing health benefits for his small business.

We can expand that tax credit to get a wider universe of small businesses, and that is what we should be doing. We should be building on what is successful, again, not watering down existing patient protection and consumer protection laws that ensure that plans are actually going to have enough funds to pay the bills when people get sick or go to the hospital and certainly not be able to cherry-pick what benefits are considered essential or not.

The SPEAKER pro tempore. The time of the gentleman from Connecticut has expired.

Mr. SCOTT of Virginia. Mr. Speaker, I yield an additional 1 minute to the gentleman.

Mr. COURTNEY. Mr. Speaker, we should not be allowing health plans to decide we are not going to cover maternity or that they can pick and choose what essential benefits that, again, the rest of the universe of businesses have to provide now under the Affordable Care Act, which are, again, based on sound medical research, not political decisions or not just the whims of people who are running health plans, like association health plans.

Again, this is the wrong approach. This is, again, turning the clock backwards. It is not going to provide any protections, and it certainly is not responding to some existential threat of association health plans. There are 672 in operation today. Let's help them with programs like tax credits. Let's not just sort of turn that whole sector of the health insurance marketplace into the Wild West because it is patients who are going to lose. Our citizens are going to lose. We can do better than that as a Congress.

Mr. Speaker, again, I strongly urge a ''no'' vote on this measure.

Ms. FOXX. Mr. Speaker, I yield 2 minutes to the gentleman from Tennessee (Mr. ROE), a distinguished colleague, a member of the committee, and the chair of the Veterans' Affairs Committee.

□ 1430

Mr. ROE of Tennessee. Mr. Speaker, I rise today in strong support of H.R. 1101, the Small Business Health Fairness Act, sponsored by my good friend and true American hero, SAM JOHNSON. I encourage all of my colleagues to do the same. This bill is an important tool to help empower small businesses to offer more affordable healthcare options to their employees.

Mr. Speaker, as a former small-business owner myself, I know that most small-business owners want to do the right thing and offer health insurance to their employees. We did so in my practice.

But many of these businesses are struggling with the cost and complexities of offering health insurance to their employees. ObamaCare has exacerbated this problem for small businesses. Thousands of jobs and thousands of small businesses have closed.

We have a better way. We are going to start by passing the American Health Care Act, which will repeal many of ObamaCare's taxes and mandates and replace it with free market reforms.

But there is much more that can be done. Perhaps the only thing that has prevented ObamaCare from causing even more widespread damage was the success of ERISA, employer-sponsored health insurance.

We believe small businesses deserve the same protections that large businesses do, and that is why we are passing this legislation today. The Small Business Health Fairness Act takes positive steps toward creating a more competitive healthcare marketplace, lowering insurance costs for many small employers.

Mr. Speaker, why would anybody care if association health plans got together and allowed me to purchase insurance across a State line?

I have a community in my district where the State line on one side of the street is Bristol, Virginia, on the other side is Bristol, Tennessee. Why would it matter? Why couldn't I purchase that insurance across the State line if it helped my employees and lowered costs?

And, by the way, Mr. Speaker, the Affordable Care Act is working so well for consumers that 18 out of 23 of the co-ops went broke, leaving hundreds of thousands of people to search for insurance coverage.

For the past 8 years, House Republicans have engaged the administration and encouraged them to work with us to implement a more patient-centered healthcare system; but, instead of working with us on a common goal, they have layered on additional costs for small businesses.

I again want to encourage my colleagues to support H.R. 1101.

Mr. SCOTT of Virginia. Mr. Speaker, would the Chair advise us how much time is available on both sides?

The SPEAKER pro tempore. The gentleman from Virginia has 14½ minutes remaining, and the gentlewoman from North Carolina has 16¾ minutes remaining.

Mr. SCOTT of Virginia. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I just wanted to point out a few letters that we have received, one from the Diabetes Association, which includes, in part: ''The Association has serious concerns that AHPs would lead to a two-tiered market, in which AHPs offer inadequate coverage to healthy groups only, while State-regulated plans provide adequate coverage with consumer protections but at an increasingly higher premiums. For these reasons, we urge you to oppose the Small Business Health Fairness Act of 2017, H.R. 1101.''

We have also received a letter, Mr. Speaker, from the National Association of Insurance Commissioners. They said in their letter: ''The legislation as written would eliminate all State consumer protections and solvency standards that ensure consumers receive the coverage for which they pay their monthly premium. These protections are the very core of a State regulatory system that has protected consumers for nearly 150 years . . . history has demonstrated that AHP-type entities have done more harm than good to small businesses.''

Mr. Speaker, we also received a letter from The Main Street Alliance, which said: ''In short, H.R. 1101 would result in higher premiums and poorer coverage for the most vulnerable small-business owners, would destabilize the small group market, and would lead small-business owners and employees to assume unnecessary financial risks.''

We also heard from the Consumers Union: ''Consumer's Union has long raised the inadequacies of AHPs . . . and urges Congress to reject them as likely to fragment the insurance risk pool and provide minimal and nonuniform benefits exempt from State benefit mandates.''

We also heard from a long coalition of consumer groups, providers, and labor unions which said that this bill would just move backward to a two-tiered system that makes it harder to purchase comprehensible, affordable coverage for all but a minority of small businesses.

Mr. Speaker, I include in the RECORD these letters.

AMERICAN DIABETES ASSOCIATION,
March 21, 2017.

Hon. PAUL RYAN,
Speaker, House of Representatives,
Washington, DC.
Hon. NANCY PELOSI,
Democratic Leader, House of Representatives,
Washington, DC.

DEAR SPEAKER RYAN AND LEADER PELOSI: On behalf of the nearly 30 million Americans living with diabetes and the 86 million more with prediabetes, the American Diabetes Association (Association) is writing to express our strong opposition to the Small Business Health Fairness Act (H.R. 1101). This legislation is nearly identical to legislation considered by previous Congresses and that last passed the House of Representatives in 2003. The Association opposed that legislation and writes now to express our strong concerns with this bill and the impact it will have for people with, and at risk for, diabetes.

The legislation would create federally certified association health plans (AHPs) with the goal of making coverage more affordable for small businesses by allowing them to band together to purchase coverage on behalf of a larger insurance pool. We share the goal of making coverage more affordable, but not at the expense of required consumer protections, signed into law in 47 states, which ensure people with diabetes have access to the services and financial protection they need.

H.R. 1101 would broadly exempt AHPs from critical state benefit standards, solvency rules, and consumer protections, including requirements to cover health services essential to those with diabetes. Specifically, H.R. 1101 would confer on AHPs wide authority to:

Determine benefits to be covered: Other than requiring AHPs to meet limited federal requirements for ERISA-governed plans, H.R. 1101 would give AHPs broad discretion to omit important health benefits.

Determine eligibility for coverage: While H.R. 1101 would require AHPs to comply with ERISA non-discrimination provisions, the AHP board would retain sole discretion to approve applications for participation in the plan and to set premiums based on an employer's health care claims experience.

Maintain inadequate reserves: H.R. 1101 applies federally determined solvency standards that are weaker than state standards, exposing plan members to the risk of insolvency and unpaid medical bills.

Because AHPs would compete with state-regulated plans on an uneven playing field, they would likely cherry-pick healthy small employer groups, making the risk pool in the state-regulated market less healthy and more costly. In addition, those who obtain coverage through an AHP would likely have benefits that lack coverage for essential services and would expose them to higher out-of-pocket costs and potential plan insolvencies. In fact, numerous AHPs offered in the past have gone insolvent and left consumers uninsured and with unpaid medical bills.

The Association has serious concerns that AHPs would lead to a two-tiered market, in which AHPs offer inadequate coverage to healthy groups only, while state-regulated plans provide adequate coverage with consumer protections but at increasingly higher premiums. For these reasons, we urge you to oppose the Small Business Health Fairness Act of 2017, H.R. 1101.

If you have questions or would like to discuss this issue, please contact Rob Goldsmith, Director, Federal Government Affairs.

Sincerely,
LASHAWN MCIVER, MD, MPH,
Senior Vice President of Advocacy,
American Diabetes Association.

NATIONAL ASSOCIATION OF INSURANCE COMMISSIONERS & THE CENTER FOR INSURANCE POLICY AND RESEARCH,

February 28, 2017.

Hon. VIRGINIA FOXX,
Chair, Committee on Education and the Workforce, House of Representatives, Washington, DC.
Hon. ROBERT C. SCOTT,
Ranking Member, Committee on Education and the Workforce, House of Representatives, Washington, DC.

DEAR MADAME CHAIRWOMAN AND MR. RANKING MEMBER: The U.S. House Education and the Workforce Committee is once again scheduled to consider legislation that would allow a new category of health insurance company, ''Association Health Plans (AHPs),'' to form and operate outside the authority of state regulators and beyond the reach of proven state consumer protections and solvency laws. This bill, H.R. 1101, would adversely impact consumers and the National Association of Insurance Commissioners (NAIC) urges you to oppose it.

The NAIC, which represents the nation's insurance regulators, shares the sponsors' concern for the growing number of small business owners and employees who cannot afford adequate coverage. However, the root cause of this problem is the steadily rising cost of healthcare merely reflected in premiums, and this legislation would do nothing to address that reality. In fact, we fear the legislation could actually increase the cost of insurance for many small businesses whose employees are not members of an AHP.

Even more troubling than prescribing a treatment that does not address the underlying disease, the legislation would actually harm consumers by further segmenting the small group market, eliminating critical state consumer protections, and could lead to increased fraud and plan failures. This legislation would encourage AHPs to ''cherry-pick'' healthy groups by designing benefit packages and setting rates so that unhealthy groups are disadvantaged. This, in turn, would make existing state risk pools even riskier and more expensive for insurance carriers, thus making it even harder for sick groups to afford insurance. In addition, the legislation as written would eliminate all state consumer protections and solvency standards that ensure consumers receive the coverage for which they pay their monthly premium. These protections are the very core of a state regulatory system that has protected consumers for nearly 150 years. As we have already seen in the past when such plans were allowed under federal law, consumers will be left with unpaid claims and nowhere to turn when they are harmed. A prior law along the lines of H.R. 1101 was repealed because it was found to harm consumers; the same mistake should not be made again.

We recognize that supporters of AHPs are well intentioned, looking for solutions to the same problems we are seeking to address, but history has demonstrated that AHP-type entities have done more harm than good to small businesses. A far broader approach to the existing problems—one that addresses healthcare spending, allows more innovation, and permits more state flexibility—is necessary to bring real relief to small businesses. The federal government and the states need to work with healthcare providers, insurers and consumers to implement effective reforms that will curb spending and make insurance more affordable to small businesses. Rehashing strategies that have failed would not be a step forward. It is time to move on and find more effective solutions.

Sincerely,

TED NICKEL,
NAIC President, Commissioner, Wisconsin Office of the Commissioner of Insurance.
ERIC A. CIOPPA,
NAIC Vice President, Superintendent, Maine Bureau of Insurance.
JULIE MIX MCPEAK,
NAIC President-Elect, Commissioner, Tennessee Department of Commerce & Insurance.
DAVID C. MATTAX,
NAIC Secretary-Treasurer, Commissioner of Insurance, Texas Department of Insurance.

THE MAIN STREET ALLIANCE,
Washington, DC, March 8, 2017.

Chairwoman VIRGINIA FOXX,
Washington, DC.
Ranking Member BOBBY SCOTT,
Washington, DC.

DEAR CHAIRWOMAN FOXX, RANKING MEMBER SCOTT, AND MEMBERS OF THE HOUSE EDUCATION AND WORKFORCE COMMITTEE: On behalf of the Main Street Alliance, I write to express opposition to the ''Small Business Health Fairness Act'' (H.R. 1101). The Main Street Alliance is a national network of small business owners across the country. Access to affordable, high-quality health coverage has been a core concern for small businesses for years, and slowing the skyrocketing rate increases continues to be a top priority for our membership. Unfortunately, the proposed legislation would erode important gains in premium stabilization while causing our business owners to assume unnecessary financial risks.

As you may know, prior to the Affordable Care Act (ACA) small business owners paid substantially more on average for health coverage and received fewer comprehensive benefits than larger companies. They also experienced broad unpredictability in costs, with premiums varying wildly from year to year. One employee's expensive illness could cause the insurance rates for the whole firm to spike in subsequent years.

Critical market reforms instituted through the ACA addressed many of these concerns. Insurance companies in the individual and small-group market—including association health plans—can no longer charge small firms higher premiums based on their business sector, an employee's health status, age, or gender. Nor can they offer sub-par plans that exclude essential services, such as maternity care or pediatric care. Instead, they must now base their pricing on the cost of covering all individuals in the market, not just one firm. Participating in this larger risk pool means that small business owners, like their larger counterparts, are no longer vulnerable to sharp swings in their rates based on the health of a few employees. It also means that they can expect a basic quality assurance with any health plan they select.

H.R. 1101 would undermine these protections by allowing small employer groups and individuals to join together to obtain health insurance through an unregulated association health plan (AHP). These plans would be exempt from the ACA reforms identified above, along with any state laws. This would allow them to ''cherry pick'' good risk through the design of the benefit package or choice of service area. AHPs could also have limited risk simply due to the types of businesses that belong to the association. While AHPs may save money in the short-term by avoiding costs of consumer protections, enrollees would receive less robust coverage and may be left without important protections right when they need them the most.

Furthermore, the bill would destabilize the small group and individual market by exacerbating adverse selection, driving up costs for the most vulnerable enrollees. Under the proposed legislation, AHPs would compete with other small group and individual market plans. The proposed legislation would allow employers with younger, healthier workforces to withdraw their employees from a state's small group market thus leaving behind small businesses with older and sicker employees. While the rates may drop for those businesses that belong to associations, which offer health coverage, premiums will increase for the remaining. This adverse selection would make it harder for higher-cost individuals or groups to obtain coverage.

Finally, the proposed legislation could expose employers and employees to financial ruin. The proposed legislation would allow certain AHPs to self-insure and accept insurance risk. Because of the current regulatory void, AHPs are not subject to state solvency requirements that are in place to ensure insurance companies have sufficient resources to avoid financial failure. As with unregulated multiple employer welfare arrangements, AHPs could experience bankruptcies—leaving millions of small employers and workers without health coverage due to insolvencies.

In short, H.R. 1101 would result in higher premiums and poorer coverage for the most vulnerable small business owners, would destabilize the small group market, and would lead small business owners and employees to assume unnecessary financial risks. The Main Street Alliance strongly urges you to oppose the legislation.

Please feel free to contact Michelle Sternthal, Policy Director for the Main Street Alliance, with any questions.

Sincerely,

AMANDA BALLANTYNE,
National Director.

CONSUMERSUNION,
March 21, 2017.

HOUSE OF REPRESENTATIVES,
Washington, DC.

DEAR REPRESENTATIVE: We are writing today to oppose the Small Business Health Fairness Act (H.R. 1101) and the proposed rules for association health plans.

Today, small businesses are already able to join together to purchase coverage through Association Health Plans (AHPs). These AHPs are currently regulated by the states, just like other insurance in the small group market. H.R. 1101 would allow an AHP to be entirely exempt from state regulation by being self-insured or following the rules of a single state nationwide.

ConsumersUnion has long raised the inadequacies of AHPs as a solution to improving access and strengthening the health of insurance markets, and urges Congress to reject them as likely to fragment the insurance risk pool and to provide minimal and non-uniform benefits exempt from state benefit mandates. These plans would split the healthy from the sick and drive up costs for those who do not enroll in them.

As a non-partisan, independent organization that has advocated for the best consumer products and policies for more than 80 years, we believe that altering the rules for AHPs as proposed in this bill would undermine consumers' access to fairly priced, quality health coverage.

Our objections are that:

AHPs would be offered alongside other small group and individual market plans.

However, they would operate under different rules. Past experience shows this is likely to lead to cherry-picking, adverse selection, and increased costs for sicker individuals and small businesses. Put another way, this would lead to health risk being segmented with the less healthy consumers excluded from the AHP risk pool. A core, long-held ConsumersUnion principle is to support broad pooling of risk as fairer and more cost-effective for consumers. We do not support lower rates for healthiest consumers at the expense of older or sicker consumers.

This Act would undermine state consumer protection laws by restricting the ability of states to regulate AHPs. This loss of protections could lead to increased fraud, inadequate coverage and consumer-unfriendly benefit designs. In July 2003, Consumer Reports profiled similar plans in a story entitled Phony Health Insurance. The story noted that fraudulent sales and financial instability stiffed consumers for $65 million in unpaid medical bills.

This Act would give AHPs sole discretion to select what type of care they will and will not include in their products; this is a departure from current policy, which only permits AHPs that meet insurance standards set for the individual and small group market. Consumers who buy into these plans will lose the guarantees of care created by the ACA's essential health benefits and actuarial value requirements—likely unknowingly—and will have difficulty knowing what AHPs cover.

It is unlikely that these AHPs will be able to attract enough members to be able to negotiate more effectively with providers, compared to large insurers already operating in these states. Consequently, we do not believe that these designs will lower costs for consumers.

Multiple Employer Welfare Arrangements (MEWAs) once operated in a regulatory vacuum similar to the one proposed through H.R. 1101. Self-funded MEWAs had no clear regulatory authority, as initially it appeared that ERISA exempted them from state-level regulatory oversight. Multiple MEWA bankruptcies resulted, and consumers had limited avenue for redress. In the absence of clear regulatory authority over AHPs, insolvencies could leave millions of small employers and workers without health coverage or redress. Current state solvency standards have a 150 year track record of protecting consumers and should not be undermined.

We believe there are much better, time-tested ways to increase the availability, affordability, and accessibility of health insurance for consumers—approaches that rely on the wise and accepted insurance principles of broad pooling of risks and avoidance of risk selection—without resorting to the detrimental effects of H.R. 1101. We note that the National Association of Insurance Commissioners, as well as the American Academy of Actuaries, has similar, grave concerns about this Act.

Sincerely,

LAURA MACCLEERY,
Vice President, Consumer Policy and Mobilization, Consumer Reports.

LYNN QUINCY,
Associate Director, Health Policy, Consumer Policy and Mobilization, Consumer Reports.

Mr. SCOTT of Virginia. Mr. Speaker, I reserve the balance of my time.

Ms. FOXX. Mr. Speaker, I now yield 1½ minutes to the gentleman from Ohio (Mr. CHABOT), the distinguished chairman of the Small Business Committee.

Mr. CHABOT. Mr. Speaker, I want to thank the gentlewoman from North Carolina for her leadership on this issue.

Mr. Speaker, I rise to voice my strong support for H.R. 1101, the Small Business Health Fairness Act. I thank my colleagues from Ways and Means and from the Education and the Workforce Committee for getting this great idea onto paper and moving this bill forward today.

As chairman of the House Small Business Committee, I am always very appreciative to see Members from across this body find solutions for small businesses. That is exactly what this bill is.

For virtually any one of us in this Chamber, it can be said that hundreds of thousands of our constituents depend on small businesses for their livelihoods. They have been looking to those same small businesses for options, as ObamaCare has done the opposite of what it was supposed to do and it has diminished choices for workers.

By allowing small businesses to join together through association health plans, the Small Business Health Fairness Act would give small business employees at least as many choices as those who happen to work for larger companies.

Association health plans have long been a solution suggested by small businesses that share their views with me and other members of the Small Business Committee. This bill puts that idea finally into action.

Mr. Speaker, in our current state of affairs, there are fewer and fewer healthcare options available for hardworking Americans. This bill addresses that problem for our hardest hit small businesses and communities.

While we begin the hard work of making health care not only affordable but worth buying at all, this bill is an important step in giving Americans the certainty and choices that they want. I would urge my colleagues on both sides of the aisle to support this bill.

Mr. SCOTT of Virginia. Mr. Speaker, I reserve the balance of my time.

Ms. FOXX. Mr. Speaker, I yield 2 minutes to the distinguished gentleman from Georgia (Mr. ALLEN), a member of our committee.

Mr. ALLEN. Mr. Speaker, I thank the chairwoman for her leadership on this important bill.

Mr. Speaker, today I rise in support of H.R. 1101, the Small Business Health Fairness Act.

Since 2008, the number of small businesses offering health insurance to its employees has dwindled nearly 36 percent. The culprit? Well, ObamaCare.

You know, the American people deserve choice. I have lived this reality. I owned and operated a small business for over 40 years back home in Georgia. I know how ObamaCare premium increases hurt and, in some cases, affect a business' ability to provide health care for its employees.

I believe the greatest gift God gave me as a small-business owner was the ability to give others a good job along with the dignity and respect they deserve to provide for their family, their community, their church, and, yes, this Nation.

All hardworking American small-business owners should be able to give their employees these same opportunities. For this reason, I am a strong supporter of the Small Business Health Fairness Act legislation, which would allow small businesses to band together and purchase health care for workers and their families at a lower cost.

Folks, this is innovation. This is what the small business community does. Small businesses are the backbone of America. I will fight for their strength and their survival.

Mr. SCOTT of Virginia. Mr. Speaker, I reserve the balance of my time.

Ms. FOXX. Mr. Speaker, I now yield 2 minutes to the distinguished gentleman from Michigan (Mr. MITCHELL), a member of the committee.

Mr. MITCHELL. I thank the gentlewoman from North Carolina for yielding me time.

Mr. Speaker, I rise in support of the Small Business Health Fairness Act. We have all talked a lot about our plan to repeal and replace ObamaCare. This legislation is a key component of our rescue mission for health care in America.

Small businesses have been hit particularly hard by ObamaCare's mandates, skyrocketing costs, and limited choices. Small-business owners, many of whom want to provide health care for their employees, have told me that they are struggling to do so because of ObamaCare.

This legislation would level the playing field for small businesses by allowing them to band together to increase bargaining power to lower costs. It would expand affordable care for families trying to secure health insurance through their employer and lower costs for small businesses with limited resources.

In addition, this bill includes strong protections for patients with preexisting conditions, a top priority of mine and many of my colleagues as we work for healthcare reform in America.

Today we are acting on our promises to deliver relief from ObamaCare. We are returning power where it belongs, choice where it belongs: to patients and doctors, not Washington.

I urge you to support the Small Business Health Fairness Act.

Mr. SCOTT of Virginia. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, the bad idea in this plan has been exposed in one of the letters that I mentioned. I said there are a lot of consumer groups, and I just want to name the groups that signed the letter. The American Nurses Association; the Alliance for Retired Americans; the American Cancer Society Cancer Action Network; the American Diabetes Association; the American Federation

of State, County and Municipal Employees; the Association of Reproductive Health Professionals; Bazelon Center for Mental Health Law; Community Catalyst; Consumers Union; Families USA; International Union, United Automobile, Aerospace and Agricultural Implement Workers of America—the UAW; NARAL Pro-Choice America; the National Council of La Raza; the National Education Association; the National Institute for Reproductive Health; National Partnership for Women and Families; National Women's Health Network; Raising Women's Voices for the Health Care We Need; and the Service Employees International Union all oppose this legislation.

Mr. Speaker, I reserve the balance of my time.

Ms. FOXX. Mr. Speaker, I yield 2 minutes to the distinguished gentleman from Minnesota (Mr. LEWIS), a member of our committee.

Mr. LEWIS of Minnesota. Mr. Speaker, I thank the gentlewoman from North Carolina for her leadership here and on the committee as well.

Mr. Speaker, I rise today in support of H.R. 1101, the Small Business Health Fairness Act.

It is amazing as a freshman in this body to watch this debate over what we are trying to do on this side when we know what has already transpired, what has been done:

The Affordable Care Act was going to lower our premiums $2,500. That is what the President said. But they went up by $4,800.

In my home State of Minnesota, we have seen back-to-back increases of 55 and 67 percent, 100,000 people thrown off their plan.

We have got 1,000 counties in this country with just one insurer.

The exchanges are imploding. As young, healthy people can't afford the premiums, they drop out, and the pools only have the older and the sicker.

We have job lock, where people trying to start a small business can't get the same tax advantages or purchasing power as those in big companies.

So what to do? We are going to stabilize the insurance markets through choice and competition, and that is what H.R. 1101 does. It lowers premiums. It enlarges pools. We do that. We must do that to save the health insurance markets and health care in America. That is the agenda of H.R. 1101. That is the agenda of what we are trying to do in global healthcare reform.

So today, as we debate how to fix health care in America, let us not forget the status quo and the debacle it is. So I stand and I urge my colleagues to support this bill, and I further urge my colleagues to finish the job over what we are starting on real healthcare reform.

Mr. SCOTT of Virginia. Mr. Speaker, I just want to quote from another letter that we received from Blue Cross Blue Shield Association. They say: ''We have very serious concerns that H.R. 1101 would create preferential rules that would allow an AHP to be entirely exempt from State regulation by being self-insured or follow the rules of a single State nationwide. Research clearly shows that creating special rules for AHPs and exempting them from State regulation would lead to major problems, including . . . increased insolvency risk . . . increased costs for older, sicker workers.'' Therefore, they are also in opposition to this legislation.

I include in the RECORD the entire letter.

BLUECROSS BLUESHIELD ASSOCIATION,
Washington, DC, March 7, 2017.

Hon. VIRGINIA FOXX,
Chair, Committee on Education and the Workforce, House of Representatives, Washington, DC.

Hon. ROBERT C. SCOTT,
Ranking Member, Committee on Education and the Workforce, House of Representatives, Washington, DC.

DEAR MADAM CHAIRWOMAN AND MR. RANKING MEMBER: The Blue Cross and Blue Shield Association shares your commitment to ensuring small employers are able to provide their employees with high quality, affordable health coverage. However, we are concerned that H.R. 1101, the ''Small Business Health Fairness Act'' would not accomplish this critical goal, as it does not reflect key principles that are essential to ensuring a viable private health insurance market: (1) all competitors should abide by the same set of rules; and (2) states should have clear authority to regulate.

Today, small businesses are able to join together to purchase coverage through association health plans (AHPs). AHPs are currently regulated by the states, just like other insurance in the small group market, and can be a good option for small employers who want to provide their employees with affordable coverage.

We have very serious concerns that H.R. 1101 would create preferential rules that would allow an AHP to be entirely exempt from state regulation by being self-insured or follow the rules of a single state nationwide. Research clearly shows that creating special rules for AHPs and exempting them from state regulation would lead to major problems, including:

Increased insolvency risk: The legislation as drafted would allow for some AHPs to be entirely exempt from state regulation, and instead operate under very limited federal rules and oversight. Past experiences with these kinds of arrangements left millions without health coverage and unpaid claims due to insolvencies.

Increased costs for older, sicker workers: Ultimately, H.R. 1101 would make it much harder for small employers with older, sicker workers to obtain coverage. This is because lower-cost groups would move to a more loosely regulated AHP with fewer benefit and rating rules, while older and/or high-cost groups would remain in traditional insurance plans.

Attached is a compendium of research findings, which provides overwhelming evidence that AHP legislation would make health insurance less accessible, less affordable and less secure for small employers and individual consumers.

We look forward to working with you on solutions that can be taken to improve access and affordability for small employers.

Sincerely,

ALISSA FOX,
Senior Vice President.

□ 1445

Mr. SCOTT of Virginia. Mr. Speaker, I reserve the balance of my time.

Ms. FOXX. Mr. Speaker, I have no further speakers, and I reserve the balance of my time.

Mr. SCOTT of Virginia. Mr. Speaker, I yield myself the balance of my time.

Mr. Speaker, association plans will help the fortunate few who can get in so long as the members of that association remain healthier than average. But everybody else will pay more. Furthermore, these plans, when they are formed under the bill, will evade important State regulations that could improve solvency and provide important consumer protections.

This is not unlike the philosophy, I guess, on the other replace bill where 24 million fewer people will have insurance; the rest will pay more and get less; while millionaires benefit with huge tax cuts. In this, the fortunate few benefit to the expense of everybody else.

I would hope we would defeat the legislation.

Mr. Speaker, I yield back the balance of my time.

Ms. FOXX. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, some of our colleagues on the other side of the aisle have spent a lot of their time extolling ObamaCare and indicating that we should just stay with what we have, but we all know that ObamaCare is failing.

Republicans are on a rescue mission. We truly do have a better way. As some of my colleagues have stated, we will be passing the American Health Care Act tomorrow. What we are doing here with this bill is something we could not include in that legislation that will round out what it is we want to do with keeping our promise in what we promised last year in our program called A Better Way.

Let me just talk a little bit about the failures of ObamaCare. As my colleagues have said, all the promises were broken: if you wanted to keep your doctor, you could keep your doctor; if you wanted to keep your healthcare plan, you could keep your healthcare plan. Those promises were the most obvious ones that went away. The cost of health care would be going down, and none of that happened.

Mr. Speaker, in addition to that, there is a 25 percent average increase in premiums this year for millions of Americans trapped in ObamaCare, healthcare.gov exchanges. Nearly one-third of U.S. counties have only one insurer offering exchange plans; 4.7 million Americans were kicked off their healthcare plans by ObamaCare. There was $1 trillion in new taxes, mostly falling on families and job creators; 18 failed ObamaCare co-ops out of 23, which my colleague from Tennessee so eloquently pointed out.

These were established as an alternative to the public option. Those healthcare co-ops collapsed, costing

taxpayers nearly 1.9 billion and forcing patients to find new insurance; $53 billion in new regulations requiring more than 176,800,000 hours of paperwork. ObamaCare regulations are driving up healthcare premiums and costing small-business employees at least $19 billion annually.

As I said in the hearing that we had on this bill, the Democrats want a coercive system. Republicans want a system based on freedom.

Today we have an opportunity to make a real difference in the lives of hardworking men and women who are employed by small business. We have an opportunity to deliver much-needed relief to small-business owners who are trying to do the right thing and provide high-quality healthcare coverage for their employees. This legislation represents a truly positive reform that will help lower healthcare costs for working families and put small businesses on a fair and level playing field.

Small businesses are the backbone of our Nation's economy, and there is no reason why they should be at a disadvantage when it comes to finding an affordable healthcare plan. They should be treated in the same fashion as larger businesses and have the ability to craft healthcare plans that meet the needs of their employees. If we want to encourage small businesses to offer health care at a lower cost to workers, this is one commonsense step we can make.

Again, I thank our colleague, Congressman SAM JOHNSON, a true patriot and servant of this country, for his longtime support of this legislation.

I urge my colleagues to vote ''yes'' on H.R. 1101, the Small Business Health Fairness Act, which will help more Americans access high-quality, affordable health care.

Mr. Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. All time for debate on the bill has expired.

AMENDMENT NO. 1 OFFERED BY MS. HERRERA BEUTLER

Ms. HERRERA BEUTLER. Mr. Speaker, I have an amendment at the desk.

The SPEAKER pro tempore. The Clerk will designate the amendment.

The text of the amendment is as follows:

Add at the end of section 6 the following:

(c) COORDINATION WITH EXISTING LAW.—Nothing in this Act shall require plans to become certified under section 802 of the Employee Retirement Income Security Act of 1974, as amended by this Act, or require plans that are not certified under such section to comply with the requirements under part 8 of such Act, except to the extent provided in section 809 of such Act.

The SPEAKER pro tempore. Pursuant to House Resolution 210, the gentlewoman from Washington (Ms. HERRERA BEUTLER) and a Member opposed each will control 5 minutes.

The Chair recognizes the gentlewoman from Washington.

Ms. HERRERA BEUTLER. Mr. Speaker, I thank Chairwoman FOXX and the Committee on Education and the Workforce for their work on this important bill that will benefit small businesses and the families who work for them.

My amendment to the Small Business Health Fairness Act provides a straightforward clarification to ensure that existing association health plans can continue to operate and provide high-quality, affordable care to as many people as possible.

This amendment safeguards association health plans that have been successfully operating under State and Federal law—many of them for decades. We will be making certain that they would not inadvertently be disadvantaged by new Federal legislation or regulation or vulnerable to efforts to restrict access and limit choices.

Why do we need this amendment?

Because I fear what happened in my State will happen in others, where the insurance commissioner attempted to reject 42 out of about 60 association health plans. His office interpreted ObamaCare as giving him a mandate as justification for attempting to eliminate virtually all of these popular plans. By adopting my amendment, it will make crystal clear in the underlying bill that this won't be tolerated, and it will support both existing and future association health plans.

Talk to one of the nearly 400,000 individuals in my home State of Washington who get their care from an association plan, and you will find out why so many Washington businesses renew their plans every year.

Our State has been fortunate to have a robust AHP market that has become essential to providing cost-effective choices to small-business employers, thanks to bipartisan legislation enacted in the mid-1990s. In the case of one association plan operating in my State, roughly 40 percent of participating small-business employers did not previously offer health coverage.

My amendment is supported by the U.S. Chamber of Commerce. In its letter to me, which I include in the RECORD, the U.S. Chamber indicated that it shares my interest in making sure that State-based association health plans that currently exist are able to continue operating in accordance with existing State and Federal law. My amendment is also supported by the Association of Washington Business.

CHAMBER OF COMMERCE OF THE UNITED STATES OF AMERICA,
Washington, DC, March 20, 2017.

Hon. JAIME HERRERA BEUTLER,
House of Representatives,
Washington, DC.

DEAR CONGRESSWOMAN HERRERA BEUTLER: Thank you for your attention to the concerns raised by the Association of Washington Businesses regarding H.R. 1101, the ''Small Business Health Fairness Act.'' The U.S. Chamber of Commerce has several state chambers of commerce members that provide state-based quality health care coverage to their member companies. The Chamber shares your interest in making sure that the state-based Association Health Plans that currently exist are able to continue to operate in accordance with existing state and federal law without being disadvantaged by this new federal legislation.

The Chamber appreciates your commitment to small businesses and to ensuring that current affordable coverage options continue to be available alongside new options in a nondiscriminatory and fair environment. Thank you for your dedication and efforts, and we look forward to continuing to work with you to advance the priorities and interest of business.

Sincerely,

RANDEL K. JOHNSON.

Ms. HERRERA BEUTLER. Mr. Speaker, I am confident that the underlying legislation before us today will improve the ability of small businesses to access affordable, high-quality health coverage in every State across the country. However, first, this body should, as clearly as possible, ensure that those States that already have successfully operating association health plans are not disrupted, which is what my amendment would do.

I urge my colleagues to support this amendment, and I thank the chairwoman for her work on this.

Mr. Speaker, I reserve the balance of my time.

Mr. SCOTT of Virginia. Mr. Speaker, I ask unanimous consent to claim the time in opposition, although I am not opposed to the amendment.

The SPEAKER pro tempore. Is there objection to the request of the gentleman?

There was no objection.

The SPEAKER pro tempore. The gentleman is recognized for 5 minutes.

Mr. SCOTT of Virginia. Mr. Speaker, I appreciate the intent of the amendment offered by the gentlewoman from Washington, which seems to allow health association plans that are currently in existence to continue to operate under existing State and Federal law. In fact, giving States the ability to regulate association plans is very important. That is why I oppose the underlying bill.

The amendment also points out another interesting fact, and that is associations currently exist under current law, and the underlying bill simply unravels most of the regulations that apply to them, and this amendment would at least maintain State regulations.

We know that this bill creates winners and losers. The winners are those who are young and healthy enough to be invited into an association. The losers are small businesses and employers who are older, sicker, or just have more costly health bills. There is no guarantee that plans under this legislation will have the standard level of benefits or consumer protections, and that is why I am disappointed that the majority failed to rule any Democratic amendments submitted to the Rules Committee in order, although each and every one was germane.

The gentleman from New York (Mr. ESPAILLAT), who is a member of the committee, offered an amendment that

would have protected the ability of the States to regulate any association health plan, including regulation related to benefits, consumer protections, and rating restrictions. Representative TORRES from California offered an amendment to ensure that association plans cover 10 essential health benefits under the Patient Protection and Affordable Care Act.

One amendment was offered by Representatives SUSAN DAVIS of California and SUZANNE BONAMICI from Oregon—both committee members—would have required association plans to provide for women's health benefits, including maternity care.

Representatives BONAMICI, DAVIS, and WILSON also offered an amendment to prevent this legislation from taking effect if it would lead to increased premiums for older workers. These older workers will not be able to get into the associations because they would increase average costs of the association, and the point of the association is to get away from high-cost enrollees like older Americans. So these older people will be left out of the pool with other older and sicker workers where they will necessarily be paying more.

It is simple arithmetic. Their amendment would have been particularly important because we know that the Republican replacement plan contains an age tax that will severely disadvantage older populations.

None of the Democratic amendments, although germane, were allowed under the rule, and there does not seem to be any earnest attempt to look to try to correct the shortcomings of the bill. So while I do not intend to oppose this amendment, I do not think the amendment is enough of an improvement of the bill, nor does it change the underlying fact that the legislation does not adequately protect small businesses, workers, and their families, nor does it help those left behind who are not invited into the association who will necessarily be paying more.

Mr. Speaker, if those on the other side of the aisle want to go on a rescue mission, they ought to improve things, not make things worse. For most Americans, this bill will make things worse, and, tomorrow, 24 million Americans will be left out while many others will be paying more for less while millionaires get huge tax cuts. That is not an improvement.

Mr. Speaker, I reserve the balance of my time.

Ms. HERRERA BEUTLER. Mr. Speaker, how much time do I have remaining?

The SPEAKER pro tempore. The gentlewoman has 2½ minutes remaining.

Ms. HERRERA BEUTLER. Mr. Speaker, I would just like to say that part of the reason this underlying bill is so critical is because we just don't believe one size fits all. When it comes to health coverage, we need to make sure that there are many different options for families, individuals, and businesses. We are clarifying basically a technical change here that allows continued existing plans to operate.

Who can be opposed to existing plans operating and offering more options and more plans?

This is exactly what Republicans are doing right now. We are fighting to make sure that the families and the people we represent have those options and their choices, that they can keep their doctor, that their health premiums will come down, that they can maybe get a plan through their work, or maybe they will be able to get into the individual market and self-insure—options—because one size does not fit all, which is why this bill is crucial and why my amendment to this bill makes it better. That is why we are going to move forward and make sure that more Americans have access to care—not just on paper—but care that gets them to in to the doctor, that gets them the care that they need, whether it is a specialist or a primary care doctor.

Mr. Speaker, I yield back the balance of my time.

Mr. SCOTT of Virginia. Mr. Speaker, I would point out that when one size fits all, everybody can benefit; but when you start picking and choosing winners and losers, some will benefit and many others will lose. Under this bill, a fortunate few who get into association plans will benefit; everybody else loses.

Mr. Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. All time for debate has expired.

Pursuant to the rule, the previous question is ordered on the bill, as amended, and on the amendment offered by the gentlewoman from Washington (Ms. HERRERA BEUTLER).

The question is on the amendment by the gentlewoman from Washington (Ms. HERRERA BEUTLER).

The amendment was agreed to.

The SPEAKER pro tempore. The question is on the engrossment and third reading of the bill.

The bill was ordered to be engrossed and read a third time, and was read the third time.

□ 1500

MOTION TO RECOMMIT

Ms. SHEA-PORTER. Mr. Speaker, I have a motion to recommit at the desk.

The SPEAKER pro tempore. Is the gentlewoman opposed to the bill?

Ms. SHEA-PORTER. I am opposed in its current form.

The SPEAKER pro tempore. The Clerk will report the motion to recommit.

The Clerk read as follows:

Ms. Shea-Porter moves to recommit the bill H.R. 1101 to the Committee on Education and the Workforce, with instructions to report the same back to the House forthwith with the following amendment:

Page 15, after line 22, insert the following:

''(6) SUBSTANCE USE DISORDER TREATMENT.—Notwithstanding subsection (b), the plan provides for coverage for substance use disorder treatment, including opioid use disorder treatment, consistent with the substance use disorder services defined as an essential health benefit by the Secretary under subparagraph (E) of section 1302(b)(1) of the Patient Protection and Affordable Care Act (42 U.S.C. 18022(b)(1)).''.

Ms. SHEA-PORTER (during the reading). Mr. Speaker, I ask unanimous consent to dispense with the reading.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from New Hampshire?

There was no objection.

The SPEAKER pro tempore. The gentlewoman from New Hampshire is recognized for 5 minutes.

Ms. SHEA-PORTER. Mr. Speaker, this is the final amendment to the bill, which will not kill the bill or send it back to committee. If adopted, the bill will immediately proceed to final passage, as amended.

Mr. Speaker, I rise today on behalf of the families and communities across the Nation that are confronting a public health threat of our time: the heroin, fentanyl, and prescription opioid crisis.

This motion would simply ensure that the health insurance plans that today's bill would permit must still cover substance use disorder treatment, including for opioids, as an essential health benefit.

Under current law, we require insurers to cover this treatment. Before the Affordable Care Act, many insurers either didn't cover treatment at all or imposed onerous requirements that blocked people from getting needed care.

H.R. 1101 would roll back that guarantee. It would allow association health plans to return to the kind of skimpy coverage that left so many people struggling with an opioid disorder in dire straits at critical moments. We know there is often a narrow window of opportunity—after an overdose, for example—for someone to commit to treatment, and these are the moments when being able to make a single phone call can make all the difference.

This week's debate about health care is extremely important. Will we decide to work together to improve the American people's access to quality, affordable health care or weaken benefits and kick 24 million or more of our constituents off their plans? We all need to speak up on behalf of those whose lives have been turned around because they can now access health care.

As I talk to families, medical professionals, and law enforcement officials in my district, I hear stories that highlight the dramatic impact that improved access to coverage has had in making treatment a real option for people with substance use disorder. This week, we see that base of coverage is under serious threat. In fact, experts estimate that repealing the Affordable Care Act's coverage provisions would cause about 2.8 million Americans with a substance use disorder to lose some or all of their coverage. The quality of that coverage is also at risk.

Thanks to the Affordable Care Act, insurance must now cover treatment for behavioral health and substance use disorder, just the same as it would cover any other medical service. These parity protections mean insurers must cover treatment for substance use disorder with comparable cost-sharing, with no surprises like annual visit limits, higher copays, or frequent preauthorization requirements and medical necessity reviews.

Badly needed facilities are opening because plans now cover these services. I recently visited a recovery home for pregnant women and new mothers in my district. They were able to open the doors this year in my hometown only because it could rely on Medicaid expansion. Legislation like H.R. 1101 would cause fewer people to have this coverage, meaning fewer facilities can open and treat.

Many of you know that my home State of New Hampshire is on the front lines of the heroin, fentanyl, and prescription opioid crisis. Our communities are struggling, and helping people get treatment is key to turning the tide. I have met people who couldn't be in a recovery facility without Medicaid expansion.

Today, Members of Congress can say to my constituents in New Hampshire and their constituents across this great Nation: we hear you. We know your sons and daughters, your nieces and nephews, your neighbors and friends are struggling, and we have your back.

We believe all Americans deserve good health insurance they can count on when they need it most. We aren't going to pull the rug out from under people who are about to turn their lives around.

I urge my colleagues to support this motion, which would not delay passage of the underlying bill.

Mr. Speaker, I yield back the balance of my time.

Ms. FOXX. Mr. Speaker, I rise in opposition to the motion to recommit.

The SPEAKER pro tempore. The gentlewoman from North Carolina is recognized for 5 minutes.

Ms. FOXX. Mr. Speaker, this motion is nothing more than a last-ditch attempt to defeat a commonsense bill that will help expand access to affordable healthcare coverage for working families. In fact, this motion represents the same failed approach to health care we have experienced in recent years.

We have seen what happens when the Federal Government dictates the kind of health insurance individuals can and cannot buy. Healthcare costs skyrocket and patients have fewer choices.

While our Democrat colleagues offer a motion that doubles down on a failed approach to health care, my Republican colleagues and I are offering the American people a better way.

The Small Business Health Fairness Act is about empowering individuals, families, and small-business owners so more Americans have access to affordable healthcare coverage. By rejecting this motion and supporting the underlying bill, we can take an important step in keeping our promise to deliver free-market, patient-centered healthcare solutions.

I urge my colleagues to vote ''no'' on the motion to recommit and ''yes'' on the Small Business Health Fairness Act.

Mr. Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. Without objection, the previous question is ordered on the motion to recommit.

There was no objection.

The SPEAKER pro tempore. The question is on the motion to recommit.

The question was taken; and the Speaker pro tempore announced that the noes appeared to have it.

Ms. SHEA-PORTER. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 and clause 9 of rule XX, this 15-minute vote on the motion to recommit will be followed by 5-minute votes on passage of the bill, if ordered; and the motion to suspend the rules and pass H.R. 1238.

The vote was taken by electronic device, and there were—yeas 179, nays 233, not voting 17, as follows:

[Roll No. 185]

YEAS—179

Adams
Aguilar
Barragán
Beatty
Bera
Beyer
Bishop (GA)
Blumenauer
Blunt Rochester
Bonamici
Boyle, Brendan F.
Brady (PA)
Brownley (CA)
Bustos
Butterfield
Capuano
Carbajal
Cárdenas
Cartwright
Castor (FL)
Castro (TX)
Chu, Judy
Cicilline
Clark (MA)
Clarke (NY)
Clay
Cleaver
Cohen
Connolly
Conyers
Cooper
Correa
Costa
Courtney
Crist
Crowley
Cuellar
Cummings
Davis (CA)
Davis, Danny
DeFazio
DeGette
Delaney
DeLauro
DelBene
Demings
DeSaulnier
Deutch
Dingell
Doggett
Doyle, Michael F.
Duncan (TN)
Ellison
Engel
Eshoo
Espaillat
Esty
Evans
Foster
Frankel (FL)
Fudge
Gabbard
Gallego
Garamendi
Gonzalez (TX)
Gottheimer
Green, Al
Green, Gene
Grijalva
Gutiérrez
Hanabusa
Hastings
Heck
Higgins (NY)
Himes
Hoyer
Huffman
Jackson Lee
Jayapal
Jeffries
Johnson (GA)
Johnson, E. B.
Jones
Kaptur
Keating
Kelly (IL)
Kennedy
Khanna
Kihuen
Kildee
Kilmer
Kind
Krishnamoorthi
Kuster (NH)
Langevin
Larsen (WA)
Lawson (FL)
Lee
Levin
Lewis (GA)
Lipinski
Loebsack
Lofgren
Lowenthal
Lowey
Lujan Grisham, M.
Luján, Ben Ray
Lynch
Maloney, Carolyn B.
Maloney, Sean
Matsui
McCollum
McGovern
McNerney
Meeks
Meng
Moulton
Murphy (FL)
Nadler
Napolitano
Neal
Nolan
Norcross
O'Halleran
O'Rourke
Pallone
Panetta
Pascrell
Pelosi
Perlmutter
Peters
Peterson
Pingree
Pocan
Polis
Price (NC)
Quigley
Raskin
Rice (NY)
Rosen
Roybal-Allard
Ruiz
Ruppersberger
Ryan (OH)
Sánchez
Sarbanes
Schakowsky
Schiff
Schneider
Schrader
Scott (VA)
Scott, David
Serrano
Sewell (AL)
Shea-Porter
Sherman
Sires
Smith (WA)
Soto
Speier
Suozzi
Swalwell (CA)
Thompson (CA)
Thompson (MS)
Titus
Tonko
Torres
Vargas
Veasey
Vela
Velázquez
Visclosky
Walz
Wasserman Schultz
Waters, Maxine
Watson Coleman
Welch
Wilson (FL)
Yarmuth

NAYS—233

Abraham
Aderholt
Allen
Amash
Amodei
Arrington
Babin
Bacon
Banks (IN)
Barletta
Barr
Barton
Bergman
Biggs
Bilirakis
Bishop (MI)
Bishop (UT)
Black
Blackburn
Blum
Bost
Brady (TX)
Brat
Bridenstine
Brooks (AL)
Brooks (IN)
Buchanan
Buck
Bucshon
Budd
Burgess
Byrne
Calvert
Carter (GA)
Carter (TX)
Chabot
Chaffetz
Cheney
Coffman
Cole
Collins (GA)
Collins (NY)
Comer
Comstock
Conaway
Cook
Costello (PA)
Cramer
Crawford
Culberson
Curbelo (FL)
Davidson
Davis, Rodney
Denham
Dent
DeSantis
DesJarlais
Diaz-Balart
Donovan
Duffy
Duncan (SC)
Dunn
Emmer
Farenthold
Faso
Ferguson
Fitzpatrick
Fleischmann
Flores
Fortenberry
Foxx
Franks (AZ)
Frelinghuysen
Gaetz
Gallagher
Garrett
Gibbs
Gohmert
Goodlatte
Gosar
Gowdy
Granger
Graves (GA)
Graves (LA)
Graves (MO)
Griffith
Grothman
Guthrie
Harper
Harris
Hartzler
Hensarling
Herrera Beutler
Hice, Jody B.
Higgins (LA)
Hill
Holding
Hollingsworth
Hudson
Huizenga
Hultgren
Hunter
Hurd
Issa
Jenkins (KS)
Jenkins (WV)
Johnson (LA)
Johnson (OH)
Johnson, Sam
Jordan
Joyce (OH)
Katko
Kelly (MS)
Kelly (PA)
King (IA)
King (NY)
Kinzinger
Knight
Kustoff (TN)
Labrador
LaHood
LaMalfa
Lamborn
Lance
Latta
Lewis (MN)
LoBiondo
Long
Loudermilk
Love
Lucas
Luetkemeyer
MacArthur
Marchant
Marino
Marshall
Massie
Mast
McCarthy
McCaul
McClintock
McHenry
McKinley
McMorris Rodgers
McSally
Meadows
Meehan
Messer
Mitchell
Moolenaar
Mooney (WV)
Mullin
Murphy (PA)
Newhouse
Noem
Olson
Palazzo
Palmer
Paulsen
Pearce
Perry
Pittenger
Poe (TX)
Poliquin
Posey
Ratcliffe
Reed
Reichert
Renacci
Rice (SC)
Roby
Roe (TN)
Rogers (AL)
Rogers (KY)
Rohrabacher
Rokita
Rooney, Francis
Rooney, Thomas J.
Ros-Lehtinen
Roskam
Ross
Rothfus
Rouzer
Royce (CA)
Russell
Rutherford
Sanford
Scalise
Schweikert
Scott, Austin
Sensenbrenner
Sessions
Shimkus
Shuster
Simpson
Smith (MO)
Smith (NE)
Smith (NJ)
Smith (TX)
Smucker
Stefanik
Stewart
Stivers
Taylor
Tenney
Thompson (PA)
Thornberry
Tiberi
Tipton
Trott
Turner
Upton
Valadao
Wagner
Walberg
Walden
Walker
Walorski
Walters, Mimi
Weber (TX)
Webster (FL)
Wenstrup
Westerman
Williams
Wilson (SC)
Wittman
Womack
Woodall
Yoder
Yoho
Young (AK)
Young (IA)
Zeldin

NOT VOTING—17

Bass
Brown (MD)
Carson (IN)
Clyburn
Larson (CT)
Lawrence
Lieu, Ted
McEachin
Moore
Nunes
Payne
Richmond
Rush
Sinema
Slaughter
Takano
Tsongas

□ 1530

Mr. BISHOP of Michigan, Ms. GRANGER, Messrs. GOSAR, and YOUNG of Alaska changed their vote from ''yea'' to ''nay.''

So the motion to recommit was rejected.

The result of the vote was announced as above recorded.

Stated for:

Mr. LARSON of Connecticut. Mr. Speaker, on March 22nd, 2017—I was not present for rollcall vote 185. If I had been present for this vote, I would have voted "yea."

The SPEAKER pro tempore. The question is on the passage of the bill.

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

RECORDED VOTE

Mr. SCOTT of Virginia. Mr. Speaker, I demand a recorded vote.

A recorded vote was ordered.

The SPEAKER pro tempore. This is a 5-minute vote.

The vote was taken by electronic device, and there were—ayes 236, noes 175, not voting 18, as follows:

[Roll No. 186]

AYES—236

Abraham
Aderholt
Allen
Amash
Amodei
Arrington
Babin
Bacon
Banks (IN)
Barletta
Barr
Barton
Bergman
Biggs
Bilirakis
Bishop (MI)
Bishop (UT)
Black
Blackburn
Blum
Bost
Brady (TX)
Brat
Bridenstine
Brooks (AL)
Brooks (IN)
Buchanan
Buck
Bucshon
Budd
Burgess
Byrne
Calvert
Carter (GA)
Carter (TX)
Chabot
Chaffetz
Cheney
Coffman
Cole
Collins (GA)
Collins (NY)
Comer
Comstock
Conaway
Cook
Costello (PA)
Cramer
Crawford
Cuellar
Culberson
Curbelo (FL)
Davidson
Davis, Rodney
Denham
Dent
DeSantis
DesJarlais
Diaz-Balart
Donovan
Duffy
Duncan (SC)
Duncan (TN)
Dunn
Emmer
Farenthold
Faso
Ferguson
Fitzpatrick
Fleischmann
Flores
Foxx
Franks (AZ)
Frelinghuysen
Gaetz
Gallagher
Garrett
Gibbs
Gohmert
Goodlatte
Gosar
Gottheimer
Gowdy
Granger
Graves (LA)
Graves (MO)
Griffith
Grothman
Guthrie
Harper
Harris
Hartzler
Hensarling
Herrera Beutler
Hice, Jody B.
Higgins (LA)
Hill
Holding
Hollingsworth
Huizenga
Hultgren
Hunter
Hurd
Issa
Jenkins (KS)
Jenkins (WV)
Johnson (LA)
Johnson (OH)
Johnson, Sam
Jones
Jordan
Joyce (OH)
Katko
Kelly (MS)
Kelly (PA)
King (IA)
King (NY)
Kinzinger
Knight
Kustoff (TN)
Labrador
LaHood
LaMalfa
Lamborn
Lance
Latta
Lewis (MN)
LoBiondo
Long
Loudermilk
Love
Lucas
Luetkemeyer
MacArthur
Marchant
Marino
Marshall
Massie
Mast
McCarthy
McCaul
McClintock
McHenry
McKinley
McMorris Rodgers
McSally
Meadows
Meehan
Messer
Mitchell
Moolenaar
Mooney (WV)
Mullin
Murphy (PA)
Newhouse
Noem
Nunes
Olson
Palazzo
Palmer
Paulsen
Pearce
Perry
Peterson
Pittenger
Poe (TX)
Poliquin
Posey
Ratcliffe
Reed
Reichert
Renacci
Rice (SC)
Roby
Roe (TN)
Rogers (AL)
Rogers (KY)
Rohrabacher
Rokita
Rooney, Francis
Rooney, Thomas J.
Ros-Lehtinen
Roskam
Ross
Rothfus
Rouzer
Royce (CA)
Russell
Rutherford
Sanford
Scalise
Schrader
Schweikert
Scott, Austin
Sensenbrenner
Sessions
Shimkus
Shuster
Simpson
Smith (MO)
Smith (NE)
Smith (NJ)
Smith (TX)
Smucker
Stefanik
Stewart
Stivers
Taylor
Tenney
Thompson (PA)
Thornberry
Tiberi
Tipton
Trott
Turner
Upton
Valadao
Wagner
Walberg
Walden
Walker
Walorski
Walters, Mimi
Weber (TX)
Webster (FL)
Wenstrup
Westerman
Williams
Wilson (SC)
Wittman
Womack
Woodall
Yoder
Young (AK)
Young (IA)
Zeldin

NOES—175

Adams
Aguilar
Barragán
Beatty
Bera
Beyer
Bishop (GA)
Blumenauer
Blunt Rochester
Bonamici
Boyle, Brendan F.
Brady (PA)
Brownley (CA)
Bustos
Butterfield
Capuano
Carbajal
Cárdenas
Cartwright
Castor (FL)
Castro (TX)
Chu, Judy
Cicilline
Clark (MA)
Clarke (NY)
Clay
Cleaver
Cohen
Connolly
Conyers
Cooper
Correa
Costa
Courtney
Crist
Crowley
Cummings
Davis (CA)
Davis, Danny
DeFazio
DeGette
Delaney
DeLauro
DelBene
Demings
DeSaulnier
Deutch
Dingell
Doggett
Doyle, Michael F.
Ellison
Engel
Eshoo
Espaillat
Esty
Evans
Foster
Frankel (FL)
Fudge
Gabbard
Gallego
Garamendi
Gonzalez (TX)
Green, Al
Green, Gene
Grijalva
Gutiérrez
Hanabusa
Hastings
Heck
Higgins (NY)
Himes
Hoyer
Huffman
Jackson Lee
Jayapal
Jeffries
Johnson (GA)
Johnson, E. B.
Kaptur
Keating
Kelly (IL)
Kennedy
Khanna
Kihuen
Kildee
Kilmer
Kind
Krishnamoorthi
Kuster (NH)
Langevin
Larsen (WA)
Larson (CT)
Lawson (FL)
Lee
Levin
Lewis (GA)
Lipinski
Loebsack
Lofgren
Lowenthal
Lowey
Lujan Grisham, M.
Luján, Ben Ray
Lynch
Maloney, Carolyn B.
Maloney, Sean
Matsui
McCollum
McEachin
McGovern
McNerney
Meeks
Meng
Moulton
Murphy (FL)
Nadler
Napolitano
Neal
Nolan
Norcross
O'Halleran
O'Rourke
Pallone
Panetta
Pascrell
Pelosi
Perlmutter
Peters
Pingree
Pocan
Polis
Price (NC)
Quigley
Raskin
Rice (NY)
Rosen
Roybal-Allard
Ruiz
Ruppersberger
Ryan (OH)
Sánchez
Sarbanes
Schakowsky
Schiff
Schneider
Scott (VA)
Scott, David
Serrano
Sewell (AL)
Shea-Porter
Sherman
Sires
Smith (WA)
Soto
Speier
Suozzi
Swalwell (CA)
Thompson (CA)
Thompson (MS)
Titus
Tonko
Torres
Vargas
Veasey
Vela
Velázquez
Visclosky
Walz
Wasserman Schultz
Waters, Maxine
Watson Coleman
Welch
Wilson (FL)
Yarmuth

NOT VOTING—18

Bass
Brown (MD)
Carson (IN)
Clyburn
Fortenberry
Graves (GA)
Hudson
Lawrence
Lieu, Ted
Moore
Payne
Richmond
Rush
Sinema
Slaughter
Takano
Tsongas
Yoho

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore (during the vote). There are 2 minutes remaining.

□ 1539

Mr. CLEAVER changed his vote from ''aye'' to ''no.''

So the bill was passed.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

Stated for:

Mr. YOHO. Mr. Speaker, I was unavoidably detained. Had I been present, I would have voted "yea" on rollcall No. 186.

Mr. FORTENBERRY. Mr. Speaker, I was inadvertently detained. Had I been present, I would have voted "yea" on rollcall No. 186.

SECURING OUR AGRICULTURE AND FOOD ACT

The SPEAKER pro tempore. The unfinished business is the vote on the motion to suspend the rules and pass the bill (H.R. 1238) to amend the Homeland Security Act of 2002 to make the Assistant Secretary of Homeland Security for Health Affairs responsible for coordinating the efforts of the Department of Homeland Security related to food, agriculture, and veterinary defense against terrorism, and for other purposes, on which the yeas and nays were ordered.

The Clerk read the title of the bill.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from New York (Mr. DONOVAN) that the House suspend the rules and pass the bill.

This is a 5-minute vote.

The vote was taken by electronic device, and there were—yeas 406, nays 6, not voting 17, as follows:

[Roll No. 187]

YEAS—406

Abraham
Adams
Aderholt
Aguilar
Allen
Amodei
Arrington
Babin
Bacon
Banks (IN)
Barletta
Barr
Barragán
Barton
Beatty
Bera
Bergman
Beyer
Biggs
Bilirakis
Bishop (GA)
Bishop (MI)
Bishop (UT)
Black
Blackburn
Blum
Blumenauer
Blunt Rochester
Bonamici
Bost
Boyle, Brendan F.
Brady (PA)
Brady (TX)
Brat
Bridenstine
Brooks (AL)
Brooks (IN)
Brownley (CA)
Buchanan
Buck
Bucshon
Budd
Burgess
Bustos
Butterfield
Byrne
Calvert
Capuano
Carbajal
Cárdenas
Carter (GA)
Carter (TX)
Cartwright
Castor (FL)
Castro (TX)
Chabot
Chaffetz
Cheney
Chu, Judy
Cicilline
Clark (MA)
Clarke (NY)
Clay
Cleaver
Coffman
Cohen
Cole
Collins (GA)
Collins (NY)
Comer
Comstock
Conaway
Connolly
Conyers
Cook
Cooper
Correa
Costa
Costello (PA)
Courtney
Cramer
Crawford
Crist
Crowley
Cuellar
Culberson
Cummings
Curbelo (FL)
Davidson
Davis (CA)
Davis, Danny
Davis, Rodney
DeFazio
DeGette
Delaney
DeLauro
DelBene
Demings
Denham
Dent
DeSantis
DeSaulnier
DesJarlais
Deutch
Diaz-Balart
Dingell
Doggett
Donovan
Doyle, Michael F.
Duffy
Duncan (SC)
Duncan (TN)
Dunn
Ellison
Emmer
Engel
Eshoo
Espaillat
Esty
Evans
Farenthold

Faso
Ferguson
Fitzpatrick
Fleischmann
Flores
Fortenberry
Foster
Foxx
Frankel (FL)
Franks (AZ)
Frelinghuysen
Fudge
Gabbard
Gallagher
Gallego
Garamendi
Gibbs
Gohmert
Gonzalez (TX)
Goodlatte
Gosar
Gottheimer
Gowdy
Granger
Graves (GA)
Graves (LA)
Graves (MO)
Green, Al
Green, Gene
Griffith
Grijalva
Grothman
Guthrie
Gutiérrez
Hanabusa
Harper
Harris
Hartzler
Hastings
Heck
Hensarling
Herrera Beutler
Hice, Jody B.
Higgins (NY)
Hill
Himes
Holding
Hollingsworth
Hoyer
Hudson
Huffman
Huizenga
Hultgren
Hunter
Hurd
Issa
Jackson Lee
Jayapal
Jeffries
Jenkins (KS)
Jenkins (WV)
Johnson (GA)
Johnson (LA)
Johnson (OH)
Johnson, E. B.
Johnson, Sam
Jordan
Joyce (OH)
Kaptur
Katko
Keating
Kelly (IL)
Kelly (MS)
Kelly (PA)
Kennedy
Khanna
Kihuen
Kildee
Kilmer
Kind
King (IA)
King (NY)
Kinzinger
Knight
Krishnamoorthi
Kuster (NH)
Kustoff (TN)
Labrador
LaHood
LaMalfa
Lamborn
Lance
Langevin
Larsen (WA)
Larson (CT)
Latta
Lawson (FL)
Lee
Levin
Lewis (GA)
Lewis (MN)
Lipinski
LoBiondo
Lofgren
Long
Loudermilk
Love
Lowenthal
Lowey
Lucas
Luetkemeyer
Lujan Grisham, M.
Luján, Ben Ray
MacArthur
Maloney, Carolyn B.
Maloney, Sean
Marchant
Marino
Marshall
Mast
Matsui
McCarthy
McCaul
McClintock
McCollum
McEachin
McGovern
McHenry
McKinley
McMorris Rodgers
McNerney
McSally
Meadows
Meehan
Meeks
Meng
Messer
Mitchell
Moolenaar
Mooney (WV)
Moulton
Mullin
Murphy (FL)
Murphy (PA)
Nadler
Napolitano
Neal
Newhouse
Noem
Nolan
Norcross
Nunes
O'Halleran
O'Rourke
Olson
Palazzo
Pallone
Palmer
Panetta
Pascrell
Paulsen
Pearce
Pelosi
Perlmutter
Perry
Peters
Peterson
Pingree
Pittenger
Pocan
Poe (TX)
Poliquin
Polis
Posey
Price (NC)
Quigley
Raskin
Ratcliffe
Reed
Reichert
Renacci
Rice (NY)
Rice (SC)
Roby
Roe (TN)
Rogers (AL)
Rogers (KY)
Rohrabacher
Rokita
Rooney, Francis
Rooney, Thomas J.
Ros-Lehtinen
Rosen
Roskam
Ross
Rothfus
Rouzer
Roybal-Allard
Royce (CA)
Ruiz
Ruppersberger
Russell
Rutherford
Ryan (OH)
Sánchez
Sarbanes
Scalise
Schakowsky
Schiff
Schneider
Schrader
Schweikert
Scott (VA)
Scott, Austin
Scott, David
Sensenbrenner
Serrano
Sessions
Sewell (AL)
Shea-Porter
Sherman
Shimkus
Shuster
Simpson
Sires
Smith (MO)
Smith (NE)
Smith (NJ)
Smith (TX)
Smith (WA)
Smucker
Soto
Speier
Stefanik
Stewart
Stivers
Suozzi
Swalwell (CA)
Taylor
Tenney
Thompson (CA)
Thompson (MS)
Thompson (PA)
Thornberry
Tiberi
Tipton
Titus
Tonko
Torres
Trott
Turner
Upton
Valadao
Vargas
Veasey
Vela
Velázquez
Visclosky
Wagner
Walberg
Walden
Walker
Walorski
Walters, Mimi
Walz
Wasserman Schultz
Waters, Maxine
Watson Coleman
Weber (TX)
Webster (FL)
Welch
Wenstrup
Westerman
Williams
Wilson (FL)
Wilson (SC)
Wittman
Womack
Woodall
Yarmuth
Yoder
Yoho
Young (AK)
Young (IA)
Zeldin

NAYS—6

Amash
Gaetz
Garrett
Jones
Massie
Sanford

NOT VOTING—17

Bass
Brown (MD)
Carson (IN)
Clyburn
Higgins (LA)
Lawrence
Lieu, Ted
Loebsack
Lynch
Moore
Payne
Richmond
Rush
Sinema
Slaughter
Takano
Tsongas

□ 1547

So (two-thirds being in the affirmative) the rules were suspended and the bill was passed.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

MESSAGE FROM THE PRESIDENT

A message in writing from the President of the United States was communicated to the House by Mr. Brian Pate, one of his secretaries.

HOUR OF MEETING ON TOMORROW

Mr. WOMACK. Mr. Speaker, I ask unanimous consent that when the House adjourns today, it adjourn to meet at 9 a.m. tomorrow.

The SPEAKER pro tempore (Mr. LEWIS of Minnesota). Is there objection to the request of the gentleman from Arkansas?

There was no objection.

COMMUNICATION FROM THE DEMOCRATIC LEADER

The SPEAKER pro tempore laid before the House the following communication from the Honorable NANCY PELOSI, Democratic Leader:

MARCH 21, 2017.

Hon. PAUL D. RYAN,
Speaker of the House of Representatives, U.S. Capitol, Washington, DC.

DEAR SPEAKER RYAN: Pursuant to section 803(a) of the Congressional Recognition for Excellence in Arts Education Act (2 U.S.C. 803(a)), I am pleased to reappoint the Honorable Debbie Dingell of Michigan to the Congressional Award Board.

Thank you for your consideration of this appointment.

Sincerely,

NANCY PELOSI,
Democratic Leader.

CONTINUATION OF NATIONAL EMERGENCY WITH RESPECT TO SOUTH SUDAN—MESSAGE FROM THE PRESIDENT OF THE UNITED STATES (H. DOC. NO. 115–25)

The SPEAKER pro tempore laid before the House the following message from the President of the United States; which was read and, together with the accompanying papers, referred to the Committee on Foreign Affairs and ordered to be printed:

To the Congress of the United States:

Section 202(d) of the National Emergencies Act (50 U.S.C. 1622(d)) provides for the automatic termination of a national emergency unless, within 90 days prior to the anniversary date of its declaration, the President publishes in the *Federal Register* and transmits to the Congress a notice stating that the emergency is to continue in effect beyond the anniversary date. In accordance with this provision, I have sent to the *Federal Register* for publication the enclosed notice stating that the national emergency declared in Executive Order 13664 of April 3, 2014, with respect to South Sudan is to continue in effect beyond April 3, 2017.

The situation in and in relation to South Sudan, which has been marked by activities that threaten the peace, security, or stability of South Sudan and the surrounding region, including widespread violence and atrocities, human rights abuses, recruitment and use of child soldiers, attacks on peacekeepers and humanitarian workers, and obstruction of humanitarian operations, continues to pose an unusual and extraordinary threat to the national security and foreign policy of the United States. For this reason, I have determined that it is necessary to continue the national emergency declared in Executive Order 13664 with respect to South Sudan.

DONALD J. TRUMP.
THE WHITE HOUSE, *March 22, 2017.*

CONGRATULATIONS TO ORONO GIRLS BASKETBALL

(Mr. PAULSEN asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. PAULSEN. Mr. Speaker, I want to congratulate the Orono girls basketball team for recently winning the Minnesota High School State Championship.

After falling short of high expectations to win it all last year, the Spartans bounced back this season with an impressive 27–4 record and the top seed, despite many thinking that they had missed their window. That didn't stop these girls though. They were determined to finish the job this season as they stormed through the playoffs. Led by senior Tori Andrew, the team played selflessly. Andrew, the only returning starter from last season, made it a point to give her teammates the recognition that they deserved.

The Spartans went on to beat Winona 65–47 in the State title game.

Orono's resilience, Mr. Speaker, in response to the previous season, speaks highly of their character and their program led by Coach Lavesa Glover in her very first season with the team. These girls showed that they give their all in everything they do, whether it is for their team, their school, their families, or their community.

Mr. Speaker, we are so proud of the Orono girls basketball team. Congratulations on the State title.

RUSSIA AND TRUMP, SUBTLE ENTRAPMENT

(Ms. KAPTUR asked and was given permission to address the House for 1 minute.)

Ms. KAPTUR. Mr. Speaker, years from now, history books could well describe entrapment of a United States President by a foreign adversary. Allow me to update my colleagues on the Trump administration's foreign policy.

Recently, the State Department avoided committing Secretary Rex Tillerson to a NATO meeting next month with our tried and true allies in Europe. Yet, the administration has no problem flying Secretary Tillerson to Moscow to meet with Putin in April. This is no April Fools' joke. Since when is the Kremlin more important than our NATO partners? Never.

Several reports now say Trump's former campaign chair, Paul Manafort, secretly worked for a Russian billionaire to advance Putin's interests and undermine anti-Russian opposition across Europe. This contradicts assertions by the Trump administration and Manafort that he never worked for Russian interests. Congress needs to get to the bottom of these shady connections, and Paul Manafort should testify to the House Intelligence Committee, under oath.

Russia has consistently and unabashedly attempted to disrupt Democratic elections and promote propaganda in order to strengthen its own strategic interests.

The Trump administration is pushing our Nation to the verge of a national security crisis. How much leverage does Putin have over Trump and his associates? Our great Nation can't be their collateral damage.

BRAIN INJURY AWARENESS DAY

(Mr. THOMPSON of Pennsylvania asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. THOMPSON of Pennsylvania. Mr. Speaker, today is Brain Injury Awareness Day, and I welcome those who are in Washington today to share their stories.

This is near and dear to my heart. I spent nearly 30 years in healthcare rehabilitation services, and this was one of my areas of practice and expertise. I served as a board member for the Brain Injury Association of Pennsylvania, and I helped form a brain injury support group for the patients and their families that I served.

The theme for this year's campaign is ''Not Alone.'' This is a platform for educating the general public about the incidence of brain injury, and the needs of people with brain injuries and their families. The campaign also works to destigmatize the injury, empower those who have survived, and promote the many types of support that are available.

The need to raise awareness is great: more than 3.5 million children and adults sustain an acquired brain injury each year, but the incidence is unknown.

Mr. Speaker, everyone recovers at a different pace, but the support the patient receives can actually let them know that they are not alone in this fight.

OPPOSING AMERICANS LOSING THEIR HEALTH CARE

(Mr. CRIST asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. CRIST. Mr. Speaker, I rise today in opposition to 24 million Americans losing their health insurance, including 60,000 residents in my home of Pinellas County, Florida. Florida is the number one State with Affordable Care Act enrollments—number one. We stand to lose the most with this repeal.

But what we are debating this week is far worse than just a repeal. It is how the new bill treats the least among us. Medicaid, which the poor and disabled depend on, would be devastated, leaving an estimated 3.5 million children and 720,000 disabled Americans without care.

There are a lot of people here today in the Nation's Capital in wheelchairs, trying to make this point to all of us. What could be more cruel than taking away health care for all of them?

This is a misguided proposal. We must work together to improve health care, bring down costs, expand access, and protect the most vulnerable in our society.

Mr. Speaker, people's lives are on the line with this vote tomorrow. Let's do the right thing. Reject this bill.

TAKE YOUR CRIMINALS BACK OR LOSE VISAS

(Mr. POE of Texas asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. POE of Texas. Mr. Speaker, Florida Police Officer Andrew Widman was murdered, shot in the face while trying to resolve a dispute. His death was preventable, however. The murderer of Officer Widman was an illegal immigrant and convicted felon. He did not belong here. He should have been sent back home to his native country, Cuba, after he served his sentence, but Cuba would not take him back.

Cuba is one of about 30 countries that refuse to take back their convicted citizens after they are legally ordered deported. Then, unfortunately, they are released back on our streets to commit more crimes. These days need to end. No more get-out-of-jail-free cards. There must be consequences to these nations that flaunt our laws.

My bill, the Timely Repatriation Act, restricts diplomatic visas to countries that deny or delay the repatriation of a foreign national whose removal has been legally ordered.

Take your criminals back or lose diplomatic visas.

And that is just the way it is.

SALUTING UNIVERSAL HEALTH CARE ACTION NETWORK

(Mrs. BEATTY asked and was given permission to address the House for 1 minute.)

Mrs. BEATTY. Mr. Speaker, I rise today to salute the Universal Health Care Action Network, also known as UHCAN, for their energy and advocacy to protect the Affordable Care Act.

I was honored to join UHCAN in a town hall where we presented our message to men, women, families, and children from across central Ohio who were eager to organize. Do you know why? To save the health care for more than 22 million newly insured Americans, including nearly 1 million Ohioans, who gained coverage under the Affordable Care Act.

We heard personal stories, stories from Laura, Mindy, Rachel, and Kevin Rhodes—who was my guest at the joint session of Congress right here—on how the Affordable Care Act was saving their lives.

Mr. Speaker, yet, here we are tomorrow, on the seventh anniversary of the Affordable Care Act, preparing to repeal and replace it with Republican care; legislation which would push 24 million Americans off their healthcare coverage, and give massive tax breaks to 400 superwealthy families, while the rest of us, we pay more for less.

Mr. Speaker, I join my constituents and Americans across the country who oppose Republican care. Join me tomorrow and say ''no.''

□ 1600

OPPOSE THE EFFORT TO REPEAL AND REPLACE

(Mr. SWALWELL of California asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. SWALWELL of California. Mr. Speaker, I rise in opposition of the effort to repeal and replace the Affordable Care Act.

Simply, my constituents will be stuck paying more. And if they are not losing their coverage, they will know somebody who is going to lose their coverage. And if they are over the age of 50 and not on Medicare yet, they are going to suffer a very cruel age tax.

I think not of politics when the President said some are going to pay a political price if they don't support this, I think about what they are going to pay at the doctor's office.

John Cameron of Dublin, California, told me that, before the Affordable Care Act, he could not get the double hip surgery that he needed. Because of it, he was able to get it last week. We need hardworking small-business owners like John to keep working and have affordable insurance.

Mr. Speaker, when this President put his name on a casino, he left its workers in the dust. When he put his name on a university, he left its students out in the cold. And when he puts his name on this healthcare plan, TrumpCare, he is going to leave all of us sicker and poorer.

ACCESS TO AFFORDABLE HEALTH CARE

(Mr. VEASEY asked and was given permission to address the House for 1 minute.)

Mr. VEASEY. Mr. Speaker, 7 years ago today, President Barack Obama signed the Affordable Care Act into law. Since then, the ACA has helped millions of Americans gain access to affordable healthcare insurance.

We all know what is at stake in this Republican bill. It is a bill that actually has a big old tax in it called the age tax that makes our seniors pay more.

In addition to that, it prohibits Medicaid reimbursement for Planned Parenthood, and Republicans are actively working hard to make access to reproductive care even tougher for low-income women.

Let me tell you this about Texas: In 2014, Planned Parenthood had 34 centers that served over 120,000 women. Additionally, these centers in my home State of Texas provided birth control to over 93,000 women, conducted over 134,000 STD tests, 16,000 pap smears, and 16,000 mammograms.

These crucial services allow women across Texas to take control of their own health care and help them plan for a family when they are ready.

Republicans claim that their replacement plan puts patients first, but limiting a woman's ability to seek care when she seems fit directly contradicts that goal.

COMPOUNDING DEVASTATING CUTS AND ACCESS TO HEALTH CARE

(Mr. SUOZZI asked and was given permission to address the House for 1 minute.)

Mr. SUOZZI. Mr. Speaker, I rise in opposition to the Republicans' American Health Care Act and specifically the provision that purports to shift billions of Medicaid costs from New York's counties to the State.

In addition to the AHCA's age tax, increasing premiums, and millions losing their insurance, this provision will compound the devastating cuts and leave countless New Yorkers without access to health care while decimating New York State's finances.

This amendment requires the State to shoulder an additional $2.3 billion on top of the $1 billion cut proposed in the AHCA. Meanwhile, this proposal excludes New York City and only gives New York State 2 years to assume this burden.

As a former mayor, county executive, and former chairman of the New York State Commission on Property Tax Relief, I understand that New York counties shoulder a larger share of the Medicaid burden than in any other State. Asking the State to relieve some of this burden from the counties that they bear from the Medicaid cost is a worthwhile idea that should be further explored, but in conjunction with State officials.

The short turnaround time in the current proposal would cripple the State's budget, resulting in catastrophic cuts, and leaves countless New Yorkers without access to health care.

Additionally, marrying this proposal to the misguided Republican AHCA plan and excluding New York City prevents bipartisan cooperation. Rushing this amendment without debate or full consideration of the consequences and without a plan for implementation will negate any positives.

I call upon my Republican colleagues to work in a bipartisan manner on this critical issue.

HEALTH MATTERS

(Mr. CLEAVER asked and was given permission to address the House for 1 minute.)

Mr. CLEAVER. Mr. Speaker, yesterday I spoke with a dynamic, impressive young woman, Maryn White, from Lee's Summit, Missouri.

Maryn is a 16-year-old sophomore at Lee's Summit West High School. When she was 10 years old, she was diagnosed with ulcerative colitis. Despite a lot of pain and a number of major surgeries, Maryn is active in her high school and is raising money for a cure.

Maryn was the winner of the Dream Factory of Kansas City. Instead of going on a cruise ship or some tour to an exotic place, she came to Washington to talk to people who are about to vote on her health. She is absolutely infuriated that money is not going to the NIH to continue to do research for a cure.

There are thousands of similar stories all over the country. This is not a political matter, this is a matter of life and death for people all over this country.

Yes, I am saying that TrumpCare will make America ache again.

FOCUS OUR ATTENTION ON MAKING A DIFFERENCE

(Mr. BLUMENAUER asked and was given permission to address the House for 1 minute.)

Mr. BLUMENAUER. Mr. Speaker, there was a television program some years ago that Monty Hall had: ''Let's Make a Deal.''

Well, up in the Rules Committee, we are acting out a congressional version of ''Let's Make a Deal.'' People aren't dressing up like radishes and jumping up and down, but they are trying to contort the flawed Republican repeal of the Affordable Care Act into something that can somehow thread the needle and get votes through the House of Representatives. Well, Mr. Speaker, it is unfortunate.

This week we are commemorating the seventh anniversary of the passage of the Affordable Care Act. We don't need costumes and jumping up and down. It has reduced the uninsured rate to the lowest in our history. It has strengthened rural and small town hospitals across the country. It has extended coverage to people who otherwise would not have it. Repeal of this amazing accomplishment would be unprecedented. It would be sad, and it would be wrong.

I sincerely hope that we are going to be able to focus our attention on something that will make a difference, not forcing Americans to pay more for inferior coverage and deny it to many others.

OPPOSING TRUMPCARE

(Mr. GENE GREEN of Texas asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. GENE GREEN of Texas. Mr. Speaker, I rise to speak against TrumpCare.

TrumpCare will take health insurance away from 24 million Americans. That is basically the amount of people that live in the State of Texas.

For the lucky ones who don't have their health care ripped away, TrumpCare forces families to pay increased out-of-pocket costs and higher deductibles and cuts the financial assistance they get today to afford their insurance.

It has a crushing age tax. TrumpCare forces Americans who are aged 50 to 64 to pay premiums five times higher than younger people pay for health insurance.

This, combined with a slash in financial assistance to help people pay for coverage, will literally mean that there will be people who now have to pay more for their premiums annually than they actually earn in a year. That is unacceptable.

TrumpCare cuts Medicare and will shorten the life of the program by 3 years. It is hard to find someone this bill helps, but the people that it will hurt can be counted in the millions.

I urge my colleagues to vote against this horrible plan and to work with us to expand access and lower cost.

THE IMPACT OF TRUMPCARE

The SPEAKER pro tempore. Under the Speaker's announced policy of January 3, 2017, the gentlewoman from Washington (Ms. JAYAPAL) is recognized for 60 minutes as the designee of the minority leader.

GENERAL LEAVE

Ms. JAYAPAL. Mr. Speaker, I ask unanimous consent that all Members have 5 legislative days to revise and extend their remarks and include extraneous material on the subject of my Special Order.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from Washington?

There was no objection.

Ms. JAYAPAL. Mr. Speaker, tomorrow we will be voting on the American Health Care Act. We are doing this in spite of the fact that we just found out that there is an even more dire and harsh plan. We still have not received the Congressional Budget Office's estimates of what that plan will do, but we do know that TrumpCare will throw at least 24 million people off of their health care.

Tonight, for the next hour, I am proud to help lead our Congressional Progressive Caucus Special Order hour with my distinguished members from the caucus.

I yield to the gentlewoman from New Jersey (Mrs. WATSON COLEMAN).

Mrs. WATSON COLEMAN. Mr. Speaker, as the gentlewoman from New Jersey said, my colleagues and I will show and prove our true intentions in occupying our seats here in Congress.

We will have the chance to stand with the 24 million Americans who have health coverage thanks to the Affordable Care Act or cosign billion-dollar tax cuts to the wealthy. We will have the chance to reject the attacks on the health of women and older Americans or force Americans to pay more for less. We will have the chance to choose between what is best for all or what is best for some. We will choose between right and wrong.

Changes to the current law proposed in the un-American Health Care Act, also known as TrumpCare, could result in cuts to benefits, increased costs, or reduced coverage for older Americans.

According to the 2016 Medicare Trustees Report, the Medicare part A trust fund is solvent until 2028. This is 11 years longer than predicted in 2009, due in large part to the changes made in the ACA.

Repealing the additional 0.9 percent payroll tax on high-income workers, as proposed in this new bill, would remove $117.3 billion from the Hospital Insurance Trust Fund over the next 10 years. It would hasten the insolvency of Medicare by up to 4 years and diminish Medicare's ability to pay for services in the future.

Additionally, provisions of the un-American Health Care Act that create a per capita cap financing structure in the Medicaid program is equally dangerous. These provisions would endanger the health, safety, and care of millions of individuals who depend on the essential services provided through Medicaid.

The CBO found that the bill would cut Medicaid funding by $880 billion over 2017 to 2026. Medicare and Medicaid must be protected and strengthened for older Americans and future generations.

Any healthcare legislation presented must take into consideration future generations of men and women who will take our seats in this Chamber, future generations that will produce our first woman President, future generations of women that hopefully will not have to fight against men meddling in their healthcare decisions.

This bill is a war on women, and, quite frankly, there is nothing pro-life about it. This bill attacks women's access to reproductive health care from every angle, undermining not just contraception access and abortion coverage, but also making it much harder for women to receive maternity coverage when they do give birth.

The abortion rate is at a historic low, and most analysts say the principal reason is that the ACA made contraception cheaper and easier to obtain. The CBO report was all-encompassing, but most strikingly pointed out a provision that would undermine Planned Parenthood, a critical provider for women's health care.

□ 1615

This provision would bar women on Medicaid from using their coverage to go to Planned Parenthood, immediately resulting in many of these women losing access to contraception and leading to closing of clinics nationwide.

The CBO estimated that 15 percent of women living in low-income and otherwise underserved areas would lose their access to services to prevent pregnancy. In short, local access to reproductive health care dries up.

In short, this is unacceptable. Just as I opened, I am going to close. Tomorrow my colleagues and I will show and prove our true intentions in occupying our seats here in Congress. We will have the chance to stand with the 24 million Americans who have healthcare coverage thanks to the Affordable Care Act, or cosign billion-dollar tax cuts to the wealthy as proposed under the Trump healthcare bill.

We will have the chance to reject the attacks on the health of women and the working families or force Americans to pay far more for far less, and we will have the chance to choose between what is best for all or what is best for some. Tomorrow, with the votes cast on this bill, we will get the chance to choose between right and wrong.

Ms. JAYAPAL. Mr. Speaker, I thank Mrs. WATSON COLEMAN for her excellent statement.

Mr. Speaker, it is my great pleasure to yield to the distinguished gentleman from Rhode Island (Mr. CICILLINE).

Mr. CICILLINE. Mr. Speaker, I thank the gentlewoman for yielding.

In a very short number of weeks here in Congress, she has already made her mark as a passionate advocate not only for her State, but in this important fight to protect access to affordable, quality health care, and she has been an extraordinary member of the Judiciary Committee. It has been an honor to serve with her, and I thank her for yielding and thank her for her great leadership.

Mr. Speaker, we are here to continue our fight to protect access to quality, affordable health care and to defeat TrumpCare.

TrumpCare will produce higher costs for our constituents, forcing families to pay higher premiums, higher deductibles, and higher out-of-pocket expenses.

It also will provide less Americans coverage. According to the nonpartisan Congressional Budget Office, 24 million Americans will lose their health insurance when TrumpCare becomes law.

Thirdly, it imposes a crushing age tax. TrumpCare allows individuals age 50 to 64 to pay premiums five times higher than others pay for health care, no matter how healthy they are.

It is higher premiums, higher deductibles, higher out-of-pocket expenses, 24 million people will lose insurance, older people will pay an age tax. And TrumpCare, in addition to all of those terrible things, shortens the life of the Medicare trust fund by 3 years and ransacks the funds that seniors depend on, particularly, to get their long-term care. And finally, the best estimates are that it will destroy nearly 2 million jobs in this country if passed.

So why is this happening? Why would someone construct a bill that does this?

Well, in large part, it is to finance an extraordinarily big tax cut, a tax cut for the wealthiest people in this country. The richest 400 families will receive a tax cut, each, of about $7 million. Then there are tax cuts for drug companies, insurance company CEOs.

And to finance this tax cut, which totals $600 billion over the decade, in order to finance that, this bill robs 24 million Americans of health insurance, cheats seniors out of the care that they deserve in nursing homes, imposes higher premiums and higher deductibles on working families, and imposes a crushing age tax on older Americans. This is wrong.

And, you know, the President ran on a campaign of helping working people and being for the middle class. This piece of legislation is a gift to the richest people in this country and the most powerful special interests and a betrayal of the promise to work for middle class and working families.

I want to end, with the indulgence of the gentlewoman from Washington, you know, we talk about these numbers, and they are staggering: 24 million, $600 billion. Behind each of those numbers are real people whose lives will be affected by TrumpCare and by the repeal of the Affordable Care Act, individuals whose lives will be devastated, families who will be ruined because they no longer have access to the care that they need. In the richest, most powerful country in the world, this does not have to be the case, and I want to give you two examples.

Just this week I heard from Sara from, Woonsocket, Rhode Island. She wrote to me:

I am writing to you to encourage you to vote against the American Health Care Act proposed by Paul Ryan and the Republican Party. My brother has developmental disabilities and relies on Medicaid for insurance.

Experts who have reviewed this bill have determined that it will ultimately cut funding for people like my brother, but the working class in this country cannot afford the burden that this bill would impose. And the wealthiest among us do not need any more handouts from the Federal Government.

Please vote against this bill.

I had correspondence, again, with another constituent, who talks about the important services that the ACA provided to her family. She was heartbroken at the death of her son Anthony who passed away on August 9 due to an overdose, and she describes Anthony as a compassionate and deep person who, unfortunately, like many Americans, suffered from severe anxiety and depression. To deal with his condition, he started self-medicating with prescription drugs. After returning home from a sober house, he, unfortunately, relapsed and took some designer drugs that he had ordered online, causing him to overdoes.

She called me just this week. Anthony's sister Cara also suffers from anxiety and depression, in part because of the post-traumatic stress disorder that she suffered after discovering her brother who had died. Thanks to the ACA, she is able to receive coverage for critical mental health services since her mother doesn't have coverage through her employer.

Like many of my constituents, Cara relies on the coverage she has gained, and she writes:

I am worried for my future without my support system. The discontinuation of coverage would be detrimental to our efforts to combat mental health disorders and the opioid epidemic which continues to plague families and has been such a support to my family.

These are just two examples. We have millions of examples all across this country of people whose lives have been protected and saved and helped because of access to quality, affordable health care. This will undo all of that progress. We have to do everything we can to stop it.

Mr. Speaker, I thank the gentlewoman for yielding and for leading this Special Order hour tonight so we can continue to make sure the voices of the American people are heard and we defeat TrumpCare and protect access to affordable, quality health care in this country.

Ms. JAYAPAL. Mr. Speaker, I thank my good friend from Rhode Island for his incredible leadership on so many issues and for reminding us again that 24 million is just a number, but behind that number are all of the people and all of the stories that will be impacted.

Mr. Speaker, now it is my great honor to yield to the gentlewoman from California (Ms. JUDY CHU), my good friend, the chair of the Asian Pacific American Caucus here in the House.

Ms. JUDY CHU of California. Mr. Speaker, I rise today to voice my strong opposition to the American Health Care Act, or TrumpCare.

TrumpCare would result in 24 million people losing healthcare coverage. In my Pasadena, California, district, nearly 70,000 people will lose coverage. In Los Angeles County, about 1 million people will lose the coverage they have through Medicaid expansion.

Worst of all, this bill would result in skyrocketing healthcare costs, especially for older Americans. It would hurt people like my constituent Patty from Claremont. Patty is 62 and never had to worry about health care because her husband was a union member with a good job, but in one moment, Patty's life was turned upside down.

Last September, Patty's husband passed away, suddenly. In the blink of an eye, Patty was forced to find new insurance for herself and her 20-year-old son who suffers from a preexisting condition. She couldn't afford COBRA and is a few years away from being eligible for Medicare.

Well, thank goodness the ACA came along and she was finally able to get affordable healthcare insurance. She was so relieved.

But what will happen to Patty's insurance under TrumpCare? We only have to look at the CBO's estimate that a 64-year-old making $26,500 a year could see their health insurance premiums skyrocket from $1,700 a year to $14,600. That amounts to over half their income.

For Patty, these changes could mean thousands in out-of-pocket expenses for her hypertension medication, which she needs to take consistently or face life-threatening consequences. Patty would face a situation that so many older Americans would face: premiums that would rise by 20 to 25 percent by 2026. The premiums rise because, in this bill, the GOP created an age tax which allows older Americans to be charged five times more than younger Americans.

Now, in this bill, there is no concrete plan to help older Americans like Patty deal with the rising cost of premiums under TrumpCare. And certainly nothing in this bill will address the enormous deductibles or out-of-pocket costs that they will face if insurance companies can once again offer substandard plans with limited benefits. You know, so many people like Patty are just one accident away from losing coverage.

Why is she and 24 million other Americans going to suffer so that, in this bill, health insurance executives earning over $500,000 can get a tax break? so that the wealthy can get $600 billion wealthier? so that 400 of the Nation's richest families can get a $7 million tax cut every year?

You know, the term ''coverage loss'' isn't some political tool. It has real life-threatening consequences for people of all ages and incomes across the country.

The bill before us today has been crafted behind closed doors. We have had no hearings on this legislation, and Republicans have not accepted a single Democratic amendment to the bill.

There are just too many American lives at stake. I urge my colleagues to oppose TrumpCare.

Ms. JAYAPAL. I thank the gentlewoman from California.

Now it is my tremendous honor to introduce and yield to the co-chair of the Progressive Caucus, the gentleman from Arizona (Mr. GRIJALVA), a dear friend and somebody that has been on the streets and been a leader on so many issues, from immigration reform to healthcare.

Mr. GRIJALVA. Mr. Speaker, I thank the gentlewoman for not only managing the time, but her leadership and great work in Congress.

Mr. Speaker, I rise to speak about the millions of Americans who will suffer under this oxymoron called TrumpCare. This bill will result in higher costs and less coverage for hard-working Americans, especially the poor and the elderly. The only winners in this bill are the wealthy who are getting their $600 billion tax cut.

Earlier this week, an official with the American College of Physicians put it best when he said:

In 38 years of advocating for doctors and patients, I have never seen a bill that will do more harm than the AHCA.

This is a powerful statement.

You know, Mr. Speaker, what I can't figure out is what problem this bill is trying to solve. If the Republicans were looking to cover fewer people, make insurance more expensive, and give tax cuts to the rich, then I guess this Republican bill is the answer.

Let's take a quick look at what this bill does or, as my Republican colleagues refer to it, promises kept.

First and foremost, 24 million Americans are going to lose coverage. Let me repeat that, 24 million. That is not only unacceptable, it is cruel.

And even for those lucky enough not to lose coverage, things are not going to be very good.

Under the Republican healthcare scheme, older Americans will be paying five times more. In what world does anyone think that it is a good idea to make health care even more expensive for the elderly? This is one of those crazy but true things about this bill. So this is what the GOP calls promises kept.

Well, let's take a moment to remember what promises were actually made. In an interview with ''60 Minutes'' in 2015, President Trump promised:

Everybody is going to be covered. I am going to take care of everybody. I don't care if it costs me votes or not, everybody is going to be taken care of much better than they are being taken care of now.

Then just 2 days before the election, Trump went to Sioux City, Iowa, and said:

I am going to protect and save your Social Security and your Medicare. You made a deal a long, long time ago.

□ 1630

So how does this repeal bill stack up with those promises? Premiums will spike 750 percent with far fewer tax credits to help shoulder that burden; 30 million Americans with preexisting conditions would lose the certainty of coverage they have enjoyed under ObamaCare; Medicare will be slashed by $170 billion; Medicaid will be cut 25 percent. That is $880 billion being ripped away from the most vulnerable Americans, resulting in 14 million people losing coverage immediately.

So who wins here with TrumpCare? The rich, who will reap $600 billion in tax cuts at the expense of medical treatment for the most vulnerable and working folks in this country; Big Pharma is a winner who can now look forward to more obscene profits and less oversight; and, of course, the private health insurance companies, who, once again, will be in total charge of America's health care.

Who loses? Hardworking, regular folks who simply can't afford to underwrite a tax cut for the rich at the expense of their health.

Take my constituent, Shawn, for example. He wrote me to share his ACA story. In 2006, Shawn was diagnosed with HIV and a rare heart condition, and his premiums skyrocketed from $123 a month in 2005, all the way up to $1,473 a month in 2012. That is an average increase of between 35 and 40 percent per year. At the same time, his deductible climbed to $2,900, meaning his insurance wouldn't offer him a dime until he coughed up nearly $3,000 first.

When ObamaCare kicked in in 2014, Shawn had at least a dozen plans to choose from. He selected a platinum plan which delivered better coverage than he previously had for only half the price that he had previously been paying. Let me repeat: because of ObamaCare, Shawn started paying half the price for a better plan. How was it better? As Shawn put it, he no longer faced lifetime caps; he had free wellness visits included in his coverage; instead of a nearly $3,000 deductible, he now had just a small copay.

If the ACA is repealed, Shawn will be uninsured for the first time in his life. For the first time in 54 years, Shawn will be forced to pay out of his own pocket for lifesaving medications. His HIV medications alone cost nearly $30,000 per year—that is three times as much as he pays right now for all of his medical expenses. If he is hospitalized for his heart condition—which has occurred already twice—he will incur tens of thousands of dollars in additional charges. In short, under the Republican's healthcare scheme, Shawn will be financially ruined.

Mr. Speaker, this is utterly unacceptable. The American people deserve access to affordable, accessible, and high quality health care. TrumpCare achieves the opposite. It is a bad deal and a threat to the well-being of our Nation and our people. Beyond that, it is shameful and inhumane.

Mr. Speaker, I urge my colleagues to oppose TrumpCare in its entirety and vote it down tomorrow.

Ms. JAYAPAL. Mr. Speaker, I thank Representative GRIJALVA.

I am so proud to introduce my colleague from Massachusetts, Representative JOE KENNEDY.

Two weeks ago, during the Energy and Commerce markup on TrumpCare, the gentleman actually forced Republican lawmakers to admit that the bill—their bill, the TrumpCare bill—would not guarantee essential healthcare benefits for the millions who are covered under Medicaid expansion, and, later, the gentleman went on to give an incredibly compelling speech about this bill not being an act of mercy but being an act of malice. I hope that the gentleman is now going to tell the American people exactly why he said what he did.

Mr. Speaker, I yield to the gentleman from the State of Massachusetts (Mr. KENNEDY).

Mr. KENNEDY. Mr. Speaker, I want to thank my colleague for adding her voice on such an important issue before our country today and for leading our efforts here this afternoon on the House floor.

There are an awful lot of important components to this bill that we are debating now and that will supposedly come before us tomorrow afternoon. One of the critical pieces of it is how we are going to treat people suffering from mental illness.

Now, the bill itself does a number of things across insurance marketplaces and across Medicaid and Medicaid expansion, but I think it is critically important that we look at this through the framework of what health care is supposed to be all about. Health care, at least from my understanding, boils down to one simple principle. It is how we treat each other in our time of need and this commitment that we make as a country to each other, that, yes, I care about you and your family and want to make sure that you get the care that you need when you need it. Because with health care, at some point, I am going to need that same care as well: a loved one of mine, my children, my family members, and I hope that you would be there for me the same way that I would be there for you.

So if you look at this bill through that prism, one of the pieces that stands out is the fact that, for the Medicaid expansion population, about 11 million people across our country, this bill strips what is called the essential healthcare benefits from those 11 million people. Now, that is a bureaucratic term, but it means some of the most basic aspects of health care: maternal care and newborn care, preventive services, wellness, ambulatory care, and, yes, mental health services and addiction, behavioral health.

So what does that actually mean? It means that because of existing legislation, the Federal law, mental health parity, which says that if mental health benefits are, in fact, offered as part of a healthcare package, insurance package, that it has to be offered in the same way that physical health care is. You should treat your access to behavioral health care the same way we would treat access to health care if you needed cancer treatment or a broken leg. But the mental health parity law does not require mental health benefits to be offered at all. The Affordable Care Act, however, says that in order for a plan to be qualified, it does have to offer an essential health benefits package, included in that being access to mental health care.

So those two laws together work in tandem to have created a massive increase in access to behavioral health and mental health services, including, critically for the moment that we are in our country, access to opioid treatment.

What this bill does is strip those essential benefits, including access to addiction services and mental health care, from that essential benefits package and says to the States: Good luck, you can pay for them if you want to, providing nowhere near the sufficient funding to cover all of the demands that our Republican colleague says the funding will be there for.

Now, to make matters even more convoluted in this, it was clear, during the debate in our committee 2 weeks ago for 28 straight hours, that some of our colleagues actually thought these protections were maintained when we pointed out that, in fact, they were stripped. There was then a different version of this bill that was brought forth for consideration called the manager's amendment. That manager's amendment happened to reinstate those benefits, which was great, and I applaud my Republican colleagues for doing so, aside from the fact that they then realized that they included those benefits and they offered an amendment to strip them back out, just in the past 36 hours, recognizing that there was a bill that they thought offered these benefits—the package of essential health benefits—for 11 million people to begin with, they found out that it didn't, in fact, offer it; they fixed it and put them back in a bill, realized they did it inadvertently and took it out again and are now laying that bill supposedly before our consideration tomorrow.

If health care is, in fact, that commitment we make to each other in our time of need, how does this bill answer that question? The average cost of a birth in this country is roughly $10,000. Medicaid itself pays for half of the births in our Nation. Maternal care and newborn care are covered under the essential health benefits, but not anymore for the Medicaid expansion population. For that population, having a child could very literally bring you to bankruptcy. That is the bill that this Republican Congress is putting forward for your consideration tomorrow.

That is one of the many reasons why I urge my colleagues to vote ''no.''

Ms. JAYAPAL. Mr. Speaker, I thank Representative KENNEDY so much. As the gentleman was talking, I was thinking about the simple rule that we are all better off when we are all better off. I appreciate everything that you just said.

Mr. Speaker, it is a great honor for me to yield to the gentleman from the great State of Minnesota (Mr. NOLAN).

Mr. NOLAN. Mr. Speaker, I thank the gentlewoman for that introduction.

I want to thank my colleagues for presenting their profound thoughts on this most important legislation that we will consider tomorrow. The simple truth is that what this bill does is it removes 24 million people and takes them away from having affordable health care and health insurance, while, at the same time, giving $600 billion in tax cuts for the richest people in America. Some pundits have described it as one of the biggest transfers of wealth and travesties perpetuated upon the American people in American history.

I am calling upon the Republicans here in this Chamber and President Trump to withdraw this legislation, sit down in a bipartisan way—the way this Congress operated for several hundred years under open rules—and see what we can do to fix what is wrong with the American healthcare system, not do away with it and scrap it in the devastating manner that they have chosen to do so.

The simple truth is, as I said, this guts Medicaid, and it guts health care. Under this $600 billion tax break, think about it, if you make $1 million a year, every year you are going to get a $67,000 a year tax cut. Imagine that. That is more money than the average person makes in America in a year, and they are going to get that every year going forward in perpetuity, while we are saying to a young family who is struggling maybe because someone in the family has cancer or maybe somebody got hurt or injured in an accident, oh, that is going to cost too much money to insure you, you are one of the 24 million who we are getting rid of.

What kind of a country is it that would do something like that? My colleague, Mr. KENNEDY, I thought, stated it so well. We are all in this together. That is what insurance does. Life is perilous at best. We don't know who is going to get sick. We don't know who is going to have an accident. It may be when you are elderly; it may be when you are young. That is what health care and health insurance is all about, coming together and making sure that we all are cared for and get the care that we need when we need it.

Senator KENNEDY talked about preventive care. If you can catch prostate cancer or if you can catch lung cancer at a stage I or a stage II level, you save a life. But you have to have insurance to go do that and see your doctor. If you don't have insurance, guess what? You don't get a diagnosis until it is at the third or fourth stage level, at which point it is too late, costs tremendous amounts of money to treat, and, most likely, the prospects for survival are not good.

Mr. Speaker, I call on the President and my colleagues, please, the President in particular, honor the promise that you made to the American people in your campaign which resonated with enough people to get you elected President of the United States. Stand up for the elderly, stand up for urban and rural, stand up for all Americans, stand up for rural communities, and rural hospitals. Do the right thing, and let's open this process up so we can fix what needs fixing and stop this devastating attack by repealing and so-called replacing the Affordable Care Act.

Ms. JAYAPAL. Mr. Speaker, I thank the good gentleman from Minnesota for his tremendous work and for his words. As the gentleman spoke, I think about all the names that we could call this bill that is before us. We can call it TrumpCare, we can call it the pay more get less bill, and we can call it the broken promises bill. But I think what the gentleman's words have shown us is that this is a bill that is going to deeply affect 24 million Americans across the country and tear them off of their health care, and that is just not acceptable.

Mr. Speaker, I yield to the gentlewoman from California (Ms. BROWNLEY). It is a great honor to introduce my colleague who is a champion for so many issues.

Ms. BROWNLEY of California. Mr. Speaker, I thank the gentlewoman from Washington.

Mr. Speaker, after 7 years of demanding repeal and replace, the very best that the GOP could do was to put forward a bill to eliminate health care for 24 million Americans. Under TrumpCare, over 44,000 residents in my district will lose health care completely.

□ 1645

I want to talk about a different population that we don't address as often. Many of these residents are veterans and their families.

Paralyzed Veterans of America today reminded me that today many vets rely on Medicaid for their health care. TrumpCare undermines the safety net for our veterans and their dependents and their caregivers.

According to PVA, the total number of veterans without insurance dropped very sharply in recent years, yet TrumpCare cuts more than $800 billion from the Medicaid program, which many veterans and our military families turn to for care. Worse, in their rush to rip health insurance away from tens of millions of Americans, the manager's amendment to TrumpCare could deny tax credits to millions of military veterans.

Mr. Speaker, veterans are among those that TrumpCare would hurt. There are thousands of veterans in my district and thousands of veterans in every district across our great country.

My colleagues on the other side of the aisle should think long and hard before they take this critical, life-saving care away from those who need it most: our veterans who have served our country so bravely and so patriotically and whom we have made a solemn promise to.

Ms. JAYAPAL. Mr. Speaker, I yield to the gentlewoman from Texas (Ms. JACKSON LEE), my colleague on both the Judiciary Committee and Budget Committee and a champion for people of color and folks across this country.

Ms. JACKSON LEE. Mr. Speaker, I am delighted to join the Congressional Progressive Caucus, on which I serve as a vice chair. I remember this experience less than a decade ago when we worked so hard to have the Affordable Care Act.

For many, you are seeing this poster for the first time. I think I need to give you a little journey down memory lane as we talk about why we are so vigorously opposing what would seem to be new and fresh ideas.

First of all, let me say the good thing about the Affordable Care Act is that it is not a respecter of economic standing as relates to the benefits of health insurance. We were able to grant every American the right to have insurance that did not penalize you for being a woman, penalize you for having a preexisting condition. In fact, it did lower premiums.

We realize that in certain areas that is one of the beginning aspects of a bill that is only 7 years old, but one of the important points is that we have given you insurance that has more benefits than it ever had 10 years ago, 15 years ago. More importantly, working people who happen to be of low income and who are no less able or dignified or equal in this Nation now have insurance.

It is insurance. The underpinning of it is Medicaid, but it is insurance. It allows families, pregnant women, and children to have insurance, people who are working. Then, on the other side, it has help for the blind, the disabled, as well for those in nursing homes. Remember, people in nursing homes have worked. We give them the ability to live in dignity.

Unfortunately, to the contrary, what I am seeing now, just coming out of the Cloakroom, is a hustle and bustle of negotiations and meetings, going in and out of meetings, going to the White House, trying to corral these last votes. Some of these individuals want it to be made worse, and they are holding their ground.

But I tell you what is missing in all of this. What is missing is that what we did almost 10 years ago was have hundreds, maybe thousands, of hearings or townhall meetings in our districts. We had 79 bipartisan hearings in the House, 453 hearings in the Senate. In the House, we had over 181 witnesses

and 239 considered amendments. We believed in listening to the American people, many of whom did not understand, but we wanted to get it out.

In the dark of night, this bill has come. There are amendments coming by the day. I will be leaving here and going to the Rules Committee to try to understand what is in the bill.

To the American people, what you can clearly see that is in the bill right now is that we are paying more for less. You are getting $880 billion taken out of the Medicaid that is used to keep people whole after they have worked—those in nursing homes, the blind, the disabled, or other things that may have occurred—as well as those who are taking care of children and who are pregnant women. Twenty-four million will lose their insurance right now, today, as that bill is passed. Overall, in 2026, 52 million Americans will be uninsured. You can't be plainer than that.

Then what saddens me the most, besides the $880 billion coming out of your insurance, they give a $600 billion tax cut to 1 percent of the richest Americans, whom I would venture to say, getting $57,000 per family, they would say to you: Take it back and help all of America.

The age tax, if you are 50 to 64, you are paying a penalty—not 85, but 50 to 64. They can't get rid of that. How are you going to pass a bill that penalizes?

I have indicated about $880 billion for Medicaid. Then, of course, the tax relief for people who do not want it.

I say that your patriotism today is letting this see the light of day. Let's debate it and discuss it. Let's talk to States like Kentucky and West Virginia and those States that have taken expanded Medicaid. Let's talk to families, like I have just done today, with children who are only being taken care of with their catastrophic illnesses, with smiles on their face, and homebound, because they have Medicaid as their insurance.

That is why we oppose the TrumpCare bill. No matter how many backdoor meetings President 45 can take care of—I wish, maybe, it started earlier, before he attacked President Obama. But, in any event, with all of these meetings, we are still at a point where we don't know what the bill is doing for people that is good, but we do know what it is taking away from people. I just ask that we stop and do this right to save lives.

I thank the gentlewoman for her leadership.

Ms. JAYAPAL. Mr. Speaker, I yield to my colleague from the District of Columbia (Ms. NORTON).

Ms. NORTON. Mr. Speaker, I thank my good friend for the excellent job she is doing in leading this Special Order.

I don't know about you, but the uninsured in my district are down to 3.8 percent. If you think I am going to let the Republicans take away near universal health care from my district, the District of Columbia, without a fight, just watch me, and watch my colleagues.

We had a healthcare townhall. Unlike some of the townhalls of my colleagues, there were not people jumping up saying: Why are you taking away my health care? Instead, they were people like Debbie.

Debbie is a lifetime sufferer of asthma. She also has diabetes. She reached her cap. That meant that the medicine she was on, which cost $10,000 a month, would have to be paid by her. She worked every day. How many of you—how many of us—could pay $10,000 a month, no matter what job we have? That, along with her diabetes, makes her a paradigm of the kind of person whose life and death depends on this bill.

I want to just say a few words not about all of the important information you have had, but about what I call the worst of the worst.

First, let me congratulate my Republican colleagues on doubling down on the number without health care because you double the number without health care. As we are rising with the number who have health care, you now turn downward. We can't possibly live with that, and I don't think the American people will allow you to get away with it.

I think about our hospitals, and people say: Why should we pay any attention to the hospitals? Well, when we get back in the era of uncompensated care, what you will have is the Federal Government will never compensate your hospital, so you will compensate your hospital. We are back in the era of free health care, except there is no such thing as free health care. You and I will be paying for it out of our pockets.

What they do to the tax credits is shameful. Flat tax credits, unrelated to the costs, replace the kind of tax credits we have in the Affordable Care Act, which are just, as you might expect, up and down according to the value of insurance.

What good is a flat tax credit unrelated to the cost of insurance or to your income? Do my Republican colleagues really think they are going to fool anybody with those kinds of replacements?

What is perhaps worst of the worst is the work requirement. You get sick, you can't afford to work, you have got to be on the Affordable Care Act, and you need Medicaid in order to do it. They tell you that you have got to go to work in order to—while you are sick, I guess—get your Medicaid. Get sick, go to work, and qualify for health care under the Republican plan.

Those are just some of the worst of the worst. I have got a whole list here, but I thought it important to focus on who gets hurt and why, and why we are simply not going to let that happen.

Ms. JAYAPAL. Mr. Speaker, Ms. NORTON is right: the uninsured rate in my home State of Washington got cut more than half. So we are down to not quite as low as you, but 5.6, I think now, compared to over 13 percent before the Affordable Care Act.

I often get to co-chair this Special Order hour with my good friend, a brilliant colleague. Mr. Speaker, I yield to the gentleman from great State of Maryland (Mr. RASKIN).

Mr. RASKIN. Mr. Speaker, I thank Congresswoman JAYAPAL for her leadership on this Special Order.

I think the message is getting through to the American people: 24 million of us are about to lose health care if this legislation goes through.

In my home State of Maryland, 375,000 people are estimated to be on the chopping block in terms of their health insurance. In my district, the Eighth Congressional District—Montgomery, Frederick, and Carroll Counties—we could have 75,000 or 80,000 people lose their health care.

We were able to cut the uninsured rate in half with passage of the Affordable Care Act 7 years ago, and now they want to turn the clock back and take us in exactly the wrong direction.

If a foreign power like Russia, for example, tried to throw 24 million Americans off of their health care, we would consider it an act of sabotage, aggression, and war, but this is something that is happening inside the country. Nobody knows why they want to do that to older people with this age tax, why they want to do it to children, to people who have special health needs, to the sick.

It is also getting through that there is going to be $600 billion that travels upwards in America through a tax break to the wealthiest Americans. That is $600 billion that is moving upwards. This is not a healthcare plan, primarily. It is a wealth transfer plan, while we toss millions of our co-citizens to the curbside.

Seven years ago, we passed the Affordable Care Act. Millions of Americans have gotten health care for the first time, dramatically improving public health in lots of different ways, making sure that people could not be denied insurance coverage because of a preexisting condition, making sure that people in their twenties could stay on their parents' plan, ending lifetime insurance limits, ending annual limits, requiring insurance plans to pay for preventive services like flu shots and cancer screenings and mammograms, dramatically improving the public health. This has been a great success.

Tom Paine once said you cannot ''make a man unknow his knowledge, or unthink his thoughts.'' The American people know that we have made dramatic progress under the Affordable Care Act. We need to be moving more in the direction of covering more people and improving quality and reducing people's premiums and copays and deductibles.

This legislation, the repeal nightmare, goes in exactly the wrong direction. It jacks up everybody's premiums, increases the copays and

deductibles, while throwing millions of people to the sidelines.

□ 1700

I want to make one final point, which is the message has gotten through. The public opinion polls are showing that the American people are turning sharply against this terrible repeal plan, which means here in Congress the organizers of the plan are getting increasingly desperate, and they are making deals.

One of the deals that they have made with some upstate Republicans apparently is colloquially known around here as the Buffalo bribe or the Kinderhook kickback or the Hudson hustle. Someone called it today the Empire State enticement or simply Niagara calls.

There are some Republicans in upstate New York who are very nervous about voting for this bill, so what they have extracted is a promise, a very special provision that doesn't apply to the other 49 States. It applies only in New York, and it would say that New York State alone cannot assess its counties to participate financially in the Medicaid system. There are lots of other States that do it, but only New York could not do it. It could not assess the counties, except it could assess any jurisdiction with more than 5 million people.

Gee, what do you think that is? Maybe New York City.

Now, the problem with this other than it being sordid and unseemly—this Buffalo bribery, this Hudson hustle—is that it is unconstitutional because the Federal Government can try to persuade States to do something by offering money, but it cannot extract a concession through coercion, and it cannot treat one State differently from every other State. It violates the principle of equal sovereignty.

I would just say, Congresswoman JAYAPAL, this legislation is not only reactionary, taking us back to a past nobody wants to go back to, and not only dangerous, but it is also unconstitutional because of the Buffalo bribe that is built into it.

Ms. JAYAPAL. Mr. Speaker, once again, it looks like we need to school our colleagues on the Constitution. I thank Mr. RASKIN for consistently doing that.

Now it is a great honor to yield to the gentlewoman from Connecticut (Ms. DELAURO), the dean of the congressional delegation, a champion for women and families, paid leave, and health care across our country.

Ms. DELAURO. Mr. Speaker, I am so honored to join my colleagues here tonight. I thank the gentlewoman for taking the lead in this effort.

There really is such an urgency to this debate and to what is happening on the floor of this House. I rise to voice my opposition to the repeal of the Affordable Care Act, but the urgency of the debate is because tomorrow, in this Chamber, in the people's House, House Republicans are prepared to vote on a healthcare plan which is supported by President Trump and by Speaker PAUL RYAN.

What is at stake on this vote tomorrow in this House? What happens to people in this country with this vote tomorrow?

There is real clarity here. We will see families pay higher premiums and higher deductibles. This plan will increase out-of-pocket costs to working Americans. In addition to that, older Americans will be faced with what has been described as an age tax. Those Americans who are 50 to 64 years old will pay premiums five times higher than what others pay for health coverage, no matter how healthy they are.

There will be less coverage because we are going to take away health care for 24 million hardworking Americans. And for older Americans, once again, something that they rely on in terms of healthcare coverage is what happens to Medicare. Well, Medicare and the trust fund for Medicare will have a shortened life by 2 or 3 years because it takes $170 billion from the Medicare trust fund.

To do what? What does all of this mean? Who benefits from this legislation that my Republican colleagues want to pass tomorrow and who are strong-arming their own Members to vote for it? Who benefits?

Don't take my word for it, but the Joint Committee on Taxation estimates that two of the tax breaks in the repeal bill will give a $275 billion tax cut to individuals with incomes over $200,000; $190 billion in tax cuts for insurance companies and drug companies who are making a fortune, for medical device manufacturers who are making a fortune.

And so what is the balance?

It is working Americans, older Americans who are going to pay increased costs for premiums and deductibles, and the wealthiest corporations and individuals are going to get a $600 billion tax cut.

I will make one final comment because this is where the values of this Nation come into play, and when you think about a young woman in my district, Mnikesa Whitaker. She is 36 years old. She has an autoimmune disease known as scleroderma. She cannot breathe without an oxygen tank. She cannot work any longer at 36 years old. What she says to me is, without the Affordable Care Act, each day is one day less in her life. We cannot let the Mnikesa Whitakers all over this Nation down in order to be able to take care of tax cuts for the wealthiest Americans and increase the costs to working Americans and older Americans.

We have an opportunity to say no tomorrow and defeat this Republican healthcare plan supported by the President and the Speaker of this House, which will only do great damage to the health care of the people of this great Nation.

Ms. JAYAPAL. Mr. Speaker, I thank my good colleague from Connecticut so much for that incredibly compelling testimony of why we cannot let this bill pass.

Let me summarize what you heard in this last hour from Members across our country who are terrified. Frankly, this plan—TrumpCare, the pay more get less plan, the broken promises plan—might actually pass. We have to make sure that it does not pass.

So, in summary, TrumpCare strips healthcare coverage from 24 million Americans. It cuts $880 billion—that is almost a trillion dollars—from Medicaid expansion, and it gives $600 billion in tax breaks to the wealthiest Americans and corporations while cutting benefits for seniors, working families, and the most vulnerable among us.

Frankly, we don't know everything it does because there have been amendments after amendments that have been passed today. We still don't know what the full impact of this bill is, yet they are pushing through a vote tomorrow if they can get enough votes to pass it.

TrumpCare is going to raise the cost of health care by about $14,000 for those between the ages of 50 and 64. That is the age tax you have heard about on the floor tonight. And it is going to raise premiums for almost everyone. It puts a 30 percent penalty for getting health care to anyone who suffers any kind of a catastrophic event that throws you off of health care. If you lose your job and somehow you end up without health care for a couple months, you are going to have to pay 30 percent more in order to get your health care back.

You heard from Representative KENNEDY about mental health, you heard from Representative ELEANOR HOLMES NORTON about work requirements, and that is just a piece of what this TrumpCare bill does.

Tomorrow I will join my Democratic colleagues and hopefully enough Republican colleagues who know that our job is to make sure we provide health care for everyone across this country. Tomorrow I will vote ''no'' for the 24 million people who will lose their coverage. I will vote ''no'' for the almost 15 million people who will lose their coverage under Medicaid expansion alone. I will vote ''no'' for the millions of low-income women who rely on services from Planned Parenthood. I will vote ''no'' for the tens of thousands of people who will literally die each year if the Republicans succeed in repealing the health care that we have now.

Let's be clear that the Republican majority has been passing legislation and voting to repeal the Affordable Care Act for 7 years, yet they could not come up with a plan that would, in fact, do what they promised, which is to make sure that we are covering more Americans at lower prices. As my friend, Representative RASKIN, said, this is not a healthcare plan. A

healthcare plan would cover more people. This is a tax plan to take the benefits that working families were receiving on healthcare coverage across the country and convert it into tax benefits for the wealthiest, $600 billion in tax benefits.

People around the country are calling in to say if you care about the American people and if you care about providing health care for all of us, this is a bad plan, you should not vote for it. And Republicans are hopefully listening to constituents across the country, to their Governors in Republican States, Republican Governors who have said how much Medicaid expansion has helped their States. They have asked and pleaded for people to keep what we have; to make it better, yes, but not to strip $880 billion away.

Just recently, PAUL RYAN, the Speaker of our House, was quoted as saying that he has been dreaming about yanking health care away from the people who need it the most since he was ''drinking at a keg.''

This is what he said: ''So Medicaid, sending it back to the states, capping its growth rate, we've been dreaming of this since I have been around—since you and I were drinking at the keg. . . .''

Well, I don't know what he was thinking about when he was drinking at the keg, but I can tell you that what we have been dreaming about as Democrats, as people who care about the health care of people across this country is that we cover people, that we don't put anyone in a position where they are one healthcare crisis away from bankruptcy, that we make sure that kids can get asthma inhalers, that we make sure that grandma and grandpa can go into the nursing home and get the care that they need. If we pass this bill tomorrow, those grandparents are not going to have the care that they need. Nursing homes are going to shut down. We are going to take away jobs from rural areas, rural hospitals across this country.

Mr. Speaker, today, as we close this Progressive Caucus Special Order hour, I say to my colleagues on the other side of the aisle that I believe we all have the interests of the American people at heart, and if we do, then I hope we will stop this TrumpCare bill from moving forward tomorrow.

Mr. Speaker, I yield back the balance of my time.

CONGRESSIONAL TERM LIMITS

The SPEAKER pro tempore (Mr. MARSHALL). Under the Speaker's announced policy of January 3, 2017, the gentleman from Wisconsin (Mr. GALLAGHER) is recognized for 60 minutes as the designee of the majority leader.

GENERAL LEAVE

Mr. GALLAGHER. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and include extraneous materials on the topic of my Special Order.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Wisconsin?

There was no objection.

Mr. GALLAGHER. Mr. Speaker, I was back in Green Bay, Wisconsin, the past week. Someone asked me: What is the biggest surprise you have encountered since being in Congress?

I said: I will give you a negative surprise and a positive surprise. The negative surprise was how much of our time is spent here in Congress doing things that really, in my opinion, have nothing to do with the hard task of legislating, running around to an endless series of meetings that distract us from the hard work of the floor of coming together and fixing problems.

I said: But on the positive side, I have been blown away by the quality of talent, the commitment to service, and just the incredible collection of experiences we have in the freshman class of the 115th Congress—on both sides of the aisle, by the way.

I think we have a unique opportunity to seize this moment and send a message to our citizens back home that we are ready to change politics as usual and we are ready to work together to get things done. So today we would like to speak about that in general and in particular about term limits, an idea whose time has come.

In my 10 years in the Marine Corps and during two deployments to Iraq, I saw brave young men and women from across this country working together, doing whatever it took to accomplish the very difficult mission.

□ 1715

I would submit that our constituents from across the country sent us here to accomplish a very difficult mission. They sent us here not to treat our time here as a career, but rather like a deployment, an act with a sense of urgency to get things done. And, my gosh, do we have a list of problems that we need to fix.

Our healthcare system in this country has failed the American people, the Federal debt and deficit continue to balloon, taxes are driving out businesses and jobs, and our foreign policy is in shambles right now. These issues aren't new, yet they never seem to get fixed. Why is that? Well, I would argue because Washington isn't working for the American people. The people's House has become distracted and distorted from its original intention. It is up to us—the new Members of Congress—to fix that and restore the balance that the Founders and the Framers had in mind—the concept of the citizen legislator—people from all walks of life who would put aside their primary responsibility and come and embark on a season of service and then return home when that season was done.

Today, I am proud to be joined by my fellow freshmen Members of Congress who are going to speak about term limits. It is my honor to welcome a man who served his country for a career in uniform in the Air Force. He could have enjoyed a nice retirement and had some relaxing time, but he chose to step up and serve yet again in Congress.

Mr. Speaker, I yield to the gentleman from Nebraska (Mr. BACON), my distinguished colleague, the pride of Omaha, Nebraska, a general, now Congressman.

Mr. BACON. Mr. Speaker, I want to thank my friend from Wisconsin for organizing this. He is a wonderful freshman Member of the class.

I rise today in support of congressional term limits.

In 1846, when then-Congressman Abraham Lincoln was elected to the U.S. House of Representatives, he was part of a freshman class that made up one half of the 35th Congress. In other words, half of the Congress were new Members when he got elected. Today, in the 115th Congress, our freshmen class of 55 Members make up less than 20 percent of this body. But here is a more stark number.

In the last election, 97 percent of House incumbents won reelection—97 percent. Only 3 percent of the challengers defeated an incumbent. I was fortunate to be one of the exceptions to these overwhelming odds.

Since Abraham Lincoln, our country has grown, this institution has grown, and so has the length of time Members stay here. As a person who is new to Congress and is new to politics, I can tell you the reason why congressional favorability ratings are now at 8 percent. Our constituents feel that we have lost touch. The longer we stay here in Congress and don't cycle back to our home districts, the more out of touch we are perceived.

To restore America's trust in Congress, we must institute term limits. Our Forefathers intended the House of Representatives to be an arm of government closest to the people, and to be the purest embodiment of a representative democracy. Members of the people's House were to come from different walks of life and careers to better shape the direction of our great country. Members of Congress were to feel obligated to serve by a sense of civic duty rather than a desire to pursue a career in public office. We have lost sight of this intent.

The American people deserve new ideas from new faces here in Washington. This is the principal reason why I am here today with this great honor bestowed on me from the people of Nebraska's Second District. Congressional term limits would ensure that we send more successful farmers, successful teachers, business leaders, doctors, nurses, and veterans to Washington so that we can address problems with a firsthand perspective. We need more people in Congress who were successful prior to becoming a politician. We need to restore this House as the people's House.

Mr. GALLAGHER. Mr. Speaker, listening to my colleague's remarks, I was reminded of what another general,

General Dwight D. Eisenhower, said: ''You know, farming looks mighty easy when your plow is a pencil, and you're a thousand miles from the cornfield.''

I think that sentiment was echoed by DON BACON, which is to say people who have actual experience dealing with hard problems are the best type of people to legislate on those problems from Congress.

Mr. Speaker, I am honored to welcome another distinguished colleague from Louisiana. We in Wisconsin are all honored to welcome a bunch of LSU fans to Lambeau Field. I won't rehash how that went, but it was a great coming together of two great sports fans. It was really a privilege for everyone there.

Mr. Speaker, I yield to the gentleman from Louisiana (Mr. JOHNSON), my colleague.

Mr. JOHNSON of Louisiana. Mr. Speaker, I thank my distinguished colleague, particularly for not recounting the events of that game. But we are here, Mr. Speaker, to talk about a very important issue to our country and to all of us.

Prior to my election to Congress last December, for nearly 20 years, I practiced primarily in the arena of constitutional law. I had the great privilege of litigating often high-profile cases around the country, defending religious liberty, the sanctity of human life, and traditional American values.

I deeply revere our matchless Constitution, and I fought to defend its application according to its plain language and its original intent. I believe our Founding Fathers were divinely inspired to draft our extraordinary founding documents just as they did and to establish for us the framework of a free Republic. It has been the model for, and the envy of, the other nations of the world since its creation.

America is different. America is exceptional. And we are, as the Gipper used to say, ''the shining city upon a hill,'' citing scripture, and ''the last, best hope of man on the Earth.''

For all their merits, however, even the original provisions of the Constitution are sometimes appropriate for modification by the people. The Founders understood this. They recognized that, in spite of their great wisdom, they could not foresee every future contingency and change in our society and our government. So they provided us an orderly process to amend our great Constitution.

I am one who believes the time has come to end a term limits provision, precisely because the form and function of so many aspects of our Federal Government have evolved today into something the Founders could never have imagined two centuries ago.

First, I believe the Founders assumed, I think they assumed that there would be a regular turnover of Federal officeholders. Why do we say that? Well, one of our seminal and foundational principles is the limitation and the separation of powers. It is one of the things that makes us unique in the way that we have set up our government.

The Founders incorporated terms of service and staggered service in the U.S. Senate. Of course, they could have instituted term limits back then, but I think they believed that it was unnecessary.

Look at the statistics of the Founders' era. The rate of reelection and return to Congress back then was roughly 50 percent. You just heard my learned colleague from Nebraska report to you here that the last election cycle, it is much, much higher. Now, in America, the rate of reelection and return to Congress is 97 percent. That is not something I think that the Founders would have ever imagined.

Today, we also have fewer and fewer marginal districts. Incumbents often win by landslides because they have such huge advantages in terms of growing financial support, modern media exposure, and constituent service operations.

Another modern phenomena is that studies show Members tend to support more and more government spending the longer they serve in Congress, and this is true across the political spectrum. That has created a real problem, because the Federal Government has grown so very large now as a result of all that spending. Its scope and power is just simply exponentially greater now than it was in the Founders' era.

At the same time, accountability has gradually decreased over the years as the growing bureaucracy has developed into a sort of fourth branch of government. Over the past several decades, a growing class of nameless, faceless bureaucrats have been allowed to absorb and handle more and more of the authority and to handle more and more of the contentious and most consequential issues that face our Nation.

The problem is the bureaucrats never have to face or answer to the voters. Many who have served in Congress for many decades have become part of what we now refer to as America's professional political class. Those Members have gradually become more detached, and some have fully lost touch with the real concerns of the citizens they represent.

Due to the busy schedule here, Members of Congress now spend far more time in the beltway than they did in the founding era for certain. And one has to strive much harder now to be at home as often as necessary to keep in touch with the folks that all of us represent.

For many, when they are here a long time, their ideals tend to grow old with time, their energy often wanes, and ideas naturally get stale. There is much to be said for fresh faces.

In my home State of Louisiana, we instituted term limits in our State legislature several years ago. I had the honor of serving there for a short time before I came to Congress. And I can testify today, from my own experience, that the turnover process in the Louisiana legislature has been a very healthy thing for our State. There are new faces, new ideas, and new approaches to problems that have beset our State for generations.

As in a State legislature, a term limited Member of Congress would be more willing to do a number of things, including act quickly to fix problems, rather than merely manage them or delegate broad powers to the executive branch and the bureaucracy. They would be more willing to question bureaucracies and the old-established programs. And I think they would naturally enjoy greater independence. Logic simply tells us that term limits would also allow for a greater diversity of people, ideas, and backgrounds in Congress, naturally evolving this legislative body into one that more closely reflects the people and the actual demographics of our Nation, as I think the Congress did in the Founders' era.

Today, there is a real bipartisan disappointment about Congress and its dysfunction. Thankfully, our new President has taken determined steps toward addressing this issue. Some of these actions have already greatly upset Washington and the politically established. But these changes are important because the transparent and accessible government is the very basis of a democracy.

This is why I have made this one of my top priorities while in Congress. I congratulate all of my colleagues who joined me in that resolve. I truly believe the future of our government and how it is run depends upon how we handle important issues like this.

We need to look no further than our last Presidential election to see how out of touch the people believe that Washington can be. Polls say that between 75 and 80 percent of the American people right now support term limits for Congress, and I also believe that it is the right move for our Nation. Desperate times call for desperate measures, and I think we have reached that point.

Let's give the people a chance to decide this important matter. Let's go through the constitutional amendment process. Let's put it to a vote of the elected representatives of the people. And let us return to the ideals of accountability, selfless public service, and the model of the citizen legislator.

I will continue to push for reforms in our government and combat corruption and D.C. cronyism as long as I am here. Our Founders intended our government was to be one of the people, by the people, and for the people, as Lincoln famously said. Imposing congressional term limits will help restore that foundational principle, and it will send a strong message to our children and future generations that America is still a country that puts national interests above personal agenda.

Mr. Speaker, I thank my colleague for bringing this to the floor tonight.

Mr. GALLAGHER. Mr. Speaker, I thank Mr. JOHNSON. And I just want to

say that he and all the great citizens of the great State of Louisiana are welcome back any time to Lambeau Field. It was an honor to have him there.

Mr. Speaker, it is my honor to introduce a colleague from Pennsylvania's Eighth District, who served his country in the FBI. I am now honored to serve with him on the Homeland Security Committee, to which he brings an incredible wealth of experience. I think he is living proof of the necessity of embarking on term limits and implementing them now.

Mr. Speaker, I yield to the gentleman from Pennsylvania (Mr. FITZPATRICK).

Mr. FITZPATRICK. Mr. Speaker, I want to thank the gentleman from Wisconsin (Mr. GALLAGHER), my colleague, for his leadership on this issue, and to all the Members of our class who have joined together in the shared belief that this institution is one of, by, and for the people, not one belonging to a class of professional politicians or partisan elites. Since being sworn in earlier this year to serve the people of Bucks and Montgomery County, I have made it my mission to advance commonsense bipartisan government reform agenda that includes, perhaps, the single most important thing that I believe we need to do in this Nation, and that is institute term limits.

For 14 years, serving as an FBI agent, most of that time being in the political corruption units throughout the country, there was one commonality that I saw very frequently—there was an unmistakable correlation between the length of time in office and the instances of corruption, and that the lines that were very bright for elected officials coming into the system on day one weren't so bright in year 7, 8, or 9, and certainly not in year 15 or 20.

Even the most well-intended backbone individuals oftentimes can be corrupted by a system that has the power to change some people. Those lines become blurred over time. And it is with this background and these real-world experiences that myself and my colleagues are pushing this issue, in this House of Representatives, in this Chamber, for the 115th Congress.

I, myself, introduced House Resolution 7 on my first day, among other reform-minded measures, on my first day in Congress. This was a constitutional amendment that would, once and for all, set term limits for Members of the House and the Senate.

As tonight shows, there is a wide range of support for this need of reform. And, in a time of deep political division and distrust between citizens and their government at an all-time high, term limits can be the first step towards restoring the essential bond between the American people and Congress.

So I urge my colleagues to join us in transitioning power away from the political class here in Washington, D.C., and sending it back to its rightful place—in the hands of the American people.

□ 1730

I thank my colleague, Mr. FITZPATRICK, not only for his leadership on this issue, but on a host of issues related to congressional reform, whether it is no budget, no pay, or a series of other bills that he has introduced; and I look forward to working with him.

Mr. Speaker, just to show that this is an issue that transcends parties, that transcends ideological divide, I am honored to yield to my colleague from the great State of California (Mr. KHANNA).

Mr. KHANNA. Mr. Speaker, I thank Congressman GALLAGHER for his bipartisan leadership on the term limits initiative, and my friend General BERGMAN for his leadership on this issue.

I don't think term limits are a partisan issue. The Economist had an article that the turnover rate in the people's House is less than European monarchies. European nobility turnover is at a faster rate. Incumbency reelection is 96 percent. When folks say, ''Why can't you just vote people out of office,'' it is not looking at the actual statistics. Ninety-six percent of folks here are reelected, and that is not what our Founders intended.

James Madison and Alexander Hamilton agreed: ''The security intended to the general liberty consists in the frequent election and in the rotation of the Members of Congress.''

They envisioned a place where people would come, serve, and go back home to their communities.

Thomas Jefferson said that people ought to live, lawmakers ought to live under the laws that they pass. The only way we get back to our founding ideals is if we pass some version of term limits so that people do their public service, and then return to the communities where they reside.

This bill on term limits is really a move against political dynasty, and that is one thing that this election showed us people really were not for. They don't like the idea of a few families, or people connected, holding the reins of power.

Let me end with someone who I think summed this up so eloquently, which is Barbara Bush, our former First Lady. She said: ''If we can't find more than two or three families to run for high office, that's silly, because there are great governors and great eligible people to run. And I think that the Kennedys, Clintons, Bushes, there are just more families than that.''

This is from Barbara Bush, who understood the essence of democracy is to have new voices, new families, new ideas. That is why I hope that people across the aisle will support the initiative for term limits.

Mr. GALLAGHER. Mr. Speaker, I thank Congressman KHANNA for his comments. He gets at a really important point, which opponents of term limits will say: Well, we have term limits that occur naturally every 2 years. But as he pointed out, with a 94 percent incumbent reelection rate, and a turnover rate that is less than European monarchy, it isn't working that way, owing to the advantages of incumbency. So we need to take action right now. I thank him for his commitment to this. This really is a bipartisan issue.

I am now honored to yield time to my fellow Marine, the gentleman from Michigan (Mr. BERGMAN), a man who also served his country in uniform, and like General BACON before, could have easily decided to enjoy retirement, but felt the call to step up and serve his country again. He brings a wealth of experience, and it is my honor to serve with General—now Congressman—JACK BERGMAN. We are neighbors. We have territory that borders each other, and so far, we have avoided any land disputes.

Mr. BERGMAN. Mr. Speaker, I thank Congressman GALLAGHER for his leadership on this issue, and the leadership across the board here as a Member of what we—I think most of us smile when we say the freshman class, because when I look across the experience level of all of the freshman Congressmen, no matter Democrat or Republican, what this country is blessed to have today, as Members of this 115th Congress, are people who come here with the sense of mission, a sense of purpose, a sense that we know what we have here in this country.

We may have disagreements as to how we are going to get to where we need to go, but we all agree that we need to go there. The question is: How do we do it?

One of the ways you create an environment where you have fresh ideas and fresh ways of looking at it is to change the people who are presenting and acting those ideas.

I find myself asking many times as we stand on the floor here: What would the Founders say if they were here today with us? How would they look at how we are enacting their vision of what it means to be a constitutionally-based Republic that is ''We the People''? How would they react?

I think there are probably a few things that they could not have imagined. Twitter or Snapchat might be one of them—pick your way of communicating across the spectrum that we now have today as our reality. I am not saying those things are bad. They are just the new reality that we have.

So how do we take what was given to us as a framework and move it forward?

Well, again, my colleagues have all eloquently very well stated that they believe that we need to have a higher turnover in Congress. Term limits is going to be a very good first step in ensuring that we maintain the freshness of ideas.

When you look at the challenges that face our country, we know that there are people out there who have chosen not to run, for whatever reason, because of the fact that they view they

can make more of a difference outside of Congress. That is too bad, because we need good people. We need them. We need them to be here, to be part of us.

One of the brutal realities as—author Jim Collins of ''Good to Great,'' you know, he talks about facing the brutal realities. One of the brutal realities that I believe we have to face is the professional politician. That wasn't written about anywhere 240 years ago. It just occurred over time.

It is our responsibility—especially as a freshman class, you can feel the passion that we believe is the right passion to be put behind term limits to begin to make the change necessary. So we are all in this together. In fact, I am proud to be a member of the freshman class, and I am proud of the fact that we signed a commitment to civility a couple of months ago that put us in a position where we are finding our voice. And what you are hearing today from our colleagues is part of that voice says: We need to do some things a little differently.

So let's move forward; let's expand the debate; and let's make sure that we are inclusive in everyone who wants to get their opinion heard on this issue; and make sure that those who have questions about what we mean, we articulate it because in so many areas we have got big decisions to make. This is going to be a big one.

In the Marines, we accept the mission that is assigned; we plan and train for it, and then we execute it, and we get it right. And that doesn't mean we don't make a few tweaks in the process, but the bottom line is that we accomplish the mission.

Mr. Speaker, I would ask all of my colleagues to seriously consider getting behind support for term limits in the United States Congress.

Mr. GALLAGHER. I thank Congressman BERGMAN not only for his leadership in the freshman class, but a lifetime of leadership and a lifetime spent leading marines.

I ask my team here in Congress, whenever we are considering a difficult issue, to apply what I call the lance corporal test. In other words, how are the policies that we are debating today and how is the legislation that we are considering going to affect that lance corporal, that 19-year-old man or woman at the tip of the spear?

I think General BERGMAN has seen in his career how messy things can get at the tip of the spear when you are far removed from air-conditioned offices in Washington, D.C.

I believe having more people not only with military experience, but with experience from a wide range of occupations will allow us to more thoughtfully consider how our policies here, designed in Washington, D.C., have real impacts on the American people and, indeed, across the world.

I now yield to the gentleman (Mr. ARRINGTON) from Lubbock, Texas, to talk more about this issue. It has been great to work with the pride of Texas Tech, the pride of Lubbock, Texas.

Mr. ARRINGTON. Mr. Speaker, I thank my distinguished colleague for his leadership on this very important issue.

I have made the statement often when I ran for this office that I ran to change not only the course for this country, but the culture of Washington. It is my strong belief that we cannot change the course in any meaningful way without changing the culture.

So I want to, again, thank my colleague, MIKE GALLAGHER, for his leadership in rallying the freshman class, both Republicans and Democrats, on an issue that I think, because of this unique time in the history of our country, a time that I think calls for bold action, he is seizing the opportunity and heeding that call on behalf of our freshman class. And so I am deeply grateful for his courageous leadership.

Our country, the greatest experiment in liberty and democracy, was conceived by men of great principle; men who were committed to leading, to governing; and, yes—and I know this isn't popular—to compromising; making difficult decisions and putting the Nation's interest above their own personal interest. They were also men who never envisioned a lifelong career in politics.

In 1819, only 1 percent of Representatives had served over 16 years. Now, 20 percent of Representatives have served over 16 years. The current scenario where Members of Congress serve for 15, 20, even 30 years, is inconsistent with the Founders' view of citizen statesmen. We need an environment that encourages politicians to do what is right not by their party or some special interest, and certainly not to secure their long-term career goals, but to do what is right for their fellow countrymen. Period.

I think passing legislation to implement term limits across the board is a good step in the right direction. I am grateful to be a part of this body and a part of this freshman class. It is such a unique time in our Nation's history.

We need to go big; we need to go bold; or we need to go home.

So thank you for the opportunity, Mr. Speaker, and my distinguished colleague.

Mr. GALLAGHER. I thank Congressman ARRINGTON for his comments. As he rightfully points out, the time is now for big and bold action. We have a unique window of opportunity here that we must seize. The American people gave us an opportunity to turn this country around, to really, in my opinion, save the country. But that is all it is: a fleeting opportunity. And what we do over the coming days and weeks will determine whether we get more of that opportunity.

I thank Congressman ARRINGTON for reminding us that this is just the first step; that the hard work is yet to come. We have to fight for this idea to implement it, and there is a lot of hard work ahead. I look forward to working with him on that.

I know there is a division of opinions on this issue, and there are some principled arguments against term limits.

I just remember talking with the man who held this seat before I did, Congressman Reid Ribble. He had spent his entire life in roofing, which was a nonstandard preparation for serving in Congress, but he decided to give up his successful private sector career to come here for a season of service and to work on behalf of the people of northeast Wisconsin.

□ 1745

He term-limited himself. I would debate this issue with him, and we went back and forth. Ultimately, he said something that stuck with me, and I think it is the most powerful argument for implementing term limits.

He said: Every day, I woke up, and I knew that I had one less day to make a difference in the people's House. One less day. And so every day, I woke up with a sense of urgency, wanting to fix problems and get things done on behalf of my constituents.

I just think about that whenever I consider this debate. I just think about, if all 535 Members of the House and the Senate woke up with that same sense of urgency, if we all woke up every day knowing we had one less day to make a difference, imagine what we could accomplish working together.

So, Mr. Speaker, I thank all of my colleagues who have spoken so eloquently on behalf of term limits, and I look forward to working with them.

Mr. Speaker, I yield back the balance of my time.

U.S. POLICY TOWARDS KOSOVO

The SPEAKER pro tempore. Under the Speaker's announced policy of January 3, 2017, the Chair recognizes the gentleman from New York (Mr. ENGEL) for 30 minutes.

Mr. ENGEL. Mr. Speaker, an Olympic Gold Medal; groundbreaking international conferences on religious cooperation intolerance; membership in the World Bank, the IMF, and other international bodies; and recognition by more than 110 countries—these are only some of the accomplishments of the young nation of Kosovo.

The United States was among the first to recognize Kosovo, and today we are its strongest backer, and rightfully so. First recognized by President Bush, relations only deepened under President Obama. For that, Kosovo proudly has become the strongest supporter of the United States and Europe, sitting at an 85 percent approval rating.

This is not to say that Kosovo is a perfect country. We are not a perfect country. Corruption needs to be attacked in Kosovo. Judicial reform is progressing far too slowly. And official unemployment hovers at just above 30 percent. So there is hard work to be done. There is obviously a lot of work to do. But I have visited this country again and again and again and again;

and every time, I see progress, and I know there is a bright future.

I have often said that, as an American, I can go all around the world, but I will never get greeted with more love and friendship than I will in Kosovo. People there truly love Americans and all things American.

The best way to help Kosovo is through continued, strong support, as the United States has done for many years. But too many impediments stand in the way, many of them coming from outside of Kosovo's borders.

For example, Kosovo wants what most countries across the region want, to become part of a secure and integrated Europe, membership in the European Union and in NATO. Yet, just five European holdouts stand in the way of this progress for Kosovo.

When it comes to United Nations membership, Kosovo's way forward is blocked by Serbia and its ally, Russia. In fact, Serbia seeks to block Kosovo at almost every turn, and lately has been escalating tensions.

Both Serbia and Kosovo want to go to the European Union, and I support both of them getting into the European Union. But one of those countries shouldn't try to block another one, and Serbia has repeatedly tried to make it difficult for Kosovo to get into the EU and to get other things as well.

Serbia recently sent into Kosovo's north a propaganda train emblazoned with the words, Serbia is Kosovo, written in 21 languages to foment discord among Kosovo's small Serbian population. It pushed the building of a wall in Metrovica, a tiny city straddling the cleavages of Kosovo's interethnic divide. While that wall has now come down, the scars remain.

Serbia has continued to deny justice to the loved ones of hundreds of victims of its campaign of ethnic cleansing, including three American citizens, the Bytyqi brothers. And there are all kinds of insults, from a train and other things, giving propaganda against Kosovo by Serbia pushed to the Serbian-Kosovo border that helps to escalate tensions rather than bring them down.

As a result of a Serbian INTERPOL arrest warrant, French authorities recently detained former Kosovo Prime Minister Ramush Haradinaj, who has already been acquitted twice by an international tribunal.

We in the United States have this wonderful thing of no double jeopardy. If you go to trial and you are acquitted, you cannot be tried on the same thing again. That isn't true of many countries.

So Ramush Haradinaj was accused of war crimes, went to The Hague, spent many weeks and months there, was acquitted, and then was recharged again, and had to go back to The Hague to have another trial on which he was again acquitted. Now, Serbia has manipulated INTERPOL to try to get a third trial on essentially the same matter for Ramush Haradinaj again. This, to me, is unconscionable and shows tremendous bad faith on the part of the Serbian Government.

Serbia also fought Kosovo's membership in UNESCO, ultimately a self-defeating act, because among Kosovo's most cherished historical cultural institutions are its 13th century Serbian Orthodox churches. Kosovo did not get into UNESCO. It failed by three votes, and again the Serbian interruption played a major role in preventing them from getting into UNESCO. The United States fought to have Kosovo into UNESCO, but ultimately lost by three votes.

Kosovo and Serbia have sat down across the negotiating table in talks facilitated by the European Union. Those talks showed some progress that resulted in an agreement calling for normalization. I even nominated, at that time, the Prime Ministers of Kosovo and Serbia, along with the EU's former policy head, Baroness Catherine Ashton, for the Nobel Peace Prize.

Unfortunately, today, I question these successes. What kind of normalization involves stoking tensions among a neighbor's minority population and standing in the way of international integration? That is what Serbia is doing to Kosovo, and it should be stopped.

In terms of Ramush Haradinaj, trying to try him again, I don't know why the Government of Serbia seems intent on rekindling 20- and 30-year-old Balkan wars. They were terrible things that happened in war and terrible things that happened on both sides, but the man was found innocent twice. This is nothing more than bad faith on the part of the Serbian Government and harassment.

It might come as a surprise to you, Mr. Speaker, but 9 years on, as a free and independent country, Kosovo still has no army. That is right. A sovereign nation-state without an army. It has a small, lightly armed security force, but nothing resembling the large Russian-equipped Serbian military just next door.

Earlier this month, Kosovo took a small step toward establishing its army. Legislation was submitted to parliament. Like the legislative process here in the United States, the introduction of a bill is only the opening note on a much larger and longer sheet of music, a score which involves consultation with regional partners, the international community, domestic minorities, and NGOs.

We all know how this process works. There is back and forth, there is give and take. Supporters and opponents alike are welcome into the arena and all positions are heard. The process accounts for everybody's concerns in some way or another.

So what is in this proposal? What would Kosovo's army look like? It would be multiethnic, just as the Kosovo security force and the Kosovo police are now. It would partner with Western countries and hopefully NATO in pursuit of greater regional and international stability. It would be defensive and nonthreatening to Kosovo's neighbors. Mr. Speaker, it would be exactly what the United States wants to see in a partner.

Yet, while Kosovo slowly moves to set up its small defensive force, Serbia is beefing up its military with full Russian backing. It is taking deliveries of T–72 tanks, MiG–29 fighters, and S–300 antiaircraft missile systems, courtesy of Moscow and Vladimir Putin.

So I am a little confused, Mr. Speaker. Kosovo, a country we support and which supports us, wants what every other country in the world has: a basic army in which its citizens can serve their nation, and probably serve alongside our own military if given the chance.

What do we do? We offer rebukes and diplomatic threats, and we make it clear that we don't support Kosovo having an army at this time. That is absolutely absurd and is a position that we ought to change, and change quickly. Yet Russian weapons and materiel are pouring into Serbia, courtesy of Vladimir Putin; and as far as I can tell, the United States has stood in silence.

Regardless, Mr. Speaker, America's relation with Kosovo is strong and the future is bright. We need to stay on that course. Kosovo is a young country. I have been there many, many times. It is not even 10 years old.

We know better than anyone that building a democracy is hard work. Sometimes you will face setbacks. Sometimes you need a helping hand. That is why American support is more important than ever. That is why the United States should work to deepen our ties, enrich our mutual understanding, and continue to bring stability to the entire Balkan region. That is the way to a more prosperous, democratic, and multiethnic Kosovo; and that is the way for the United States to see a Balkan region free, at peace, and part of the whole of Europe.

Meanwhile, France should send Ramush Haradinaj home. Enough is enough already. We cannot stand for any more of this nonsense.

The United States should stand by Kosovo. Kosovo is a free and independent country. For many years, they were fed all kinds of lies about the United States during the old Communist regime in the fifties, sixties, and seventies. You know what? The people of Kosovo didn't believe a word of it.

So I would say to my colleagues and to my friends and to all of our American citizens: When you visit Kosovo, you will know and you will be proud to be an American because people come up to you in the street and want to touch you, want to talk to you, want to do everything and be everything American. Those are the kinds of friends that we need.

America does much for many, many people around the world, many, many

nations, and sometimes we feel it is not appreciated—but not in Kosovo. Everything the United States has helped that country with is appreciated from everyone, from the Prime Minister to the President, to people in government, to the average people in the street.

I very often have people coming up to me in the street wanting to talk to me. They recognize me. They say: Thank you. Thank you to America for standing by us in our independence. Thank you to America for being strong and keeping us strong.

So those are the kinds of friends I want to have. Those are the kind of people I want to have.

So I would say to the people of Kosovo and the Government of Kosovo: The United States stands by you and always will stand by you.

I would say to the Government of Serbia: We support the aspirations of the Serbian people to enter the European Union, but Serbia ought to stop doing what it is doing to block Kosovo. Serbia ought to stop its belligerent moves against Kosovo.

Both countries should go into the European Union—and eventually, NATO—and each one should not stop each other. They should help each other.

HEALTH CARE

Mr. ENGEL. Mr. Speaker, I want to spend the next couple of moments talking about a subject that is very near and dear to everyone's heart, and that is health care. I want to do it because tomorrow we have a big healthcare vote here in the Congress, and I think it is very important that we all very clearly lay out what we really feel should happen.

Last week, as part of the Energy and Commerce Committee, I was up for about 28 hours in a row marking up a bill that was done all night long. At the time when we marked it up, we thought it was a bit silly because the bill hadn't been scored by the Congressional Budget Office, so we had no idea what it cost. It was like buying a pig in a poke. How could you decide whether something is good or not when you don't even know what the cost is? Since we obviously don't have unlimited funds, if something costs more money, we have to pull it out of someplace else.

□ 1800

So we voted on a bill. Unfortunately, it was a strict party-line vote, and the bill passed. Shortly thereafter, a few days later, the Congressional Budget Office scored it; and I think it was, frankly, from my vantage point, a disaster for the bill.

Now, what I think that this Congress should be doing is I think that we should make tweaks and fix the Affordable Care Act, or ObamaCare. There are many, many good things in ObamaCare, in the healthcare bill, in the healthcare act, that has now been here for many, many years. But there are also some problems with it.

You know, every major bill that has been passed by this Congress and signed into law needed some tweaks, needed some changes, because you pass a law with good intention, but sometimes it doesn't work out exactly as you wanted it to work out. So you need to change things, you need to make improvements. When you see what is working, what is not working, that is what you do.

That is what this Congress should do with ObamaCare. We should say where premiums are going up or where certain jurisdictions only have one insurance company and, therefore, there is no competition, we can figure out ways to fix it. We can figure out ways to tweak it. That is what the American people would want us to do. The American people would want us to work together and would want us to work in a bipartisan fashion to try to fix what was wrong with ObamaCare.

Now, there are many wonderful things about ObamaCare. First of all, everyone knows it eliminated the so-called preexisting condition problem, where before, when you changed jobs and you went to a new insurance company, the insurance company said, ''Sorry, you have had cancer for 3 years and you have been treated; we are not going to treat you for cancer because it is a preexisting condition,'' or a heart attack or whatever it is. That was basically unconscionable.

And millions of people couldn't get help because they changed a job and, therefore, changed a healthcare plan. That was changed in ObamaCare. And that was a very, very important thing because an insurance company can now no longer deny you coverage because of a preexisting condition.

Also, as everybody knows, children up to 26 years old can now stay and be insured under their parents' insurance plans. That was a very good plus of ObamaCare, or of the Affordable Care Act.

And there were other very, very important, good things. We had more people being covered than ever before. People who had never had health coverage got it now because of the Affordable Care Act.

So what do we see now? We see, instead of trying to put it together in a bipartisan fashion, trying to fix it, we have this bill which passed the Energy and Commerce Committee and passed the Ways and Means Committee and supposedly is going to be on the floor tomorrow if they can round up the votes. They are having difficulty rounding up the votes.

And what do we see when we look at this new bill that they are asking us to vote for? Let me tell you what we see.

If this bill would ever come into law, we would have much less coverage than ever before. Many people would lose their healthcare coverage, and we would have a smaller population actually being covered for health care.

We call it TrumpCare, and TrumpCare will take away health care from 24 million hardworking Americans. That is not acceptable.

Why shouldn't we be working together to improve ObamaCare? Why do we need a new plan that will insure 24 million less people than we insure now? It is bizarre. It makes no sense whatsoever.

We also feel, when we analyze it—and this is, again, what the Congressional Budget Office tells us—there are higher costs. TrumpCare forces families to pay increased out-of-pocket costs and higher deductibles.

So what does that all mean?

It means you pay more and you get less. That is a pretty bad deal. I don't think anybody wants that deal. I think Democrats and Republicans, alike, don't want that deal. I think Americans don't want that deal. We want it the opposite way. We would like to pay less and get coverage. But what TrumpCare does to the Affordable Care Act, you pay more and you get less.

If that weren't bad enough, an analysis of it finds that there is a crushing age tax. TrumpCare forces Americans between the ages of 50 and 64 to pay premiums which are five times higher than what others pay for health coverage, no matter how healthy they are. Talk about discrimination.

If you are a 50-year-old that is in good health, why should you have to pay five times more premium than what others pay for health coverage? Doesn't sound like a very good idea to me.

And then you say: How do they get the money to pay for whatever? Well, it steals from Medicaid and Medicare. TrumpCare ransacks the Medicaid funds that allow seniors to get the long-term care they need and shortens the life of the Medicare trust fund by 3 years. Again, pretty bad deal for me.

And you say: Well, who benefits from this? If this is something that people are going to have to pay more and get less coverage, it is discriminatory for people ages 50 to 64. It hurts middle class people making $30,000, $40,000, $50,000, $60,000 a year, hurts them and hurts seniors, knocks seniors out. Well, who does it help?

Well, guess what? TrumpCare ransacks the Medicaid funds that allow seniors to get the long-term care they need. I said that before. But what does it do? It lowers tax cuts for the rich. So the rich get more tax cuts—I am sorry. It doesn't lower it. It gives the rich more tax cuts.

So it is really kind of nice, I suppose, when you have a billionaire President, it is nice to help the rich—but not at the expense of middle class America.

So when you look at this plan, it is a pretty bad plan for the middle class, pretty bad. So if you didn't like ObamaCare, you are going to dislike TrumpCare even more.

If it is passed, once it is passed, we are going to see, again, premiums rise, millions of people thrown out of insurance, and less coverage, but the very wealthy will get a nice, juicy tax break.

So, you know who used to steal from the rich and give to the poor? This is stealing from the poor and giving to the rich. It is really disgraceful.

So I call on my colleagues on both sides of the aisle. Let's defeat TrumpCare because it doesn't help anybody, and let's put our heads together. We have enough talent in this place on both sides of the aisle, and that is what the American people want us to do. They want us to put our heads together. They want us to work together and come up with a plan that aids the largest amount of people at the lowest possible cost.

It won't be easy. It will be very difficult. But we should do it together, not jam TrumpCare down our throat, not tell people about false promises when you know people are going to be thrown off.

If you say: Well, you know what? It is going to be cheaper. Well, it is cheaper if you throw off all the sick people and you don't give them insurance, and you throw off all the seniors and you don't help them. Well, of course it is cheaper because all the people that are sick and really need the help won't get it. And after all, what is insurance about? Insurance is there just in case you get sick.

So I am very chagrined about this new bill. I hope it gets defeated tomorrow. I hope that we then go back to the drawing board and come up with a program that will help the American people, not a program that helps Democrats or a program that helps Republicans, but a program that helps Americans, because we are all in this together.

The bill proposed by my Republican colleagues called TrumpCare is not a bill for Americans that will aid them with help when they get sick. As Americans, I do believe that health care should be a right, not a luxury. I believe that the richest country that the world has ever known can give its citizens health care. I believe in the single-payer health care.

But even if it is not single-payer, let's take the original Affordable Care Act, keep what is good, enhance what is good and what needs to be corrected and changed. Let's do it. That is what the American people want. That is what the American people demand, and we should do nothing less.

This bill ought to be defeated tomorrow. Let's go back to the drawing board and come up with something we can be proud of.

Mr. Speaker, I yield back the balance of my time.

RECESS

The SPEAKER pro tempore. Pursuant to clause 12(a) of rule I, the Chair declares the House in recess subject to the call of the Chair.

Accordingly (at 6 o'clock and 11 minutes p.m.), the House stood in recess.

□ 2352

AFTER RECESS

The recess having expired, the House was called to order by the Speaker pro tempore (Mr. COLLINS of Georgia) at 11 o'clock and 52 minutes p.m.

REPORT ON RESOLUTION WAIVING A REQUIREMENT OF CLAUSE 6(a) OF RULE XIII WITH RESPECT TO CONSIDERATION OF CERTAIN RESOLUTIONS REPORTED FROM THE COMMITTEE ON RULES, AND PROVIDING FOR CONSIDERATION OF MOTIONS TO SUSPEND THE RULES

Mr. SESSIONS, from the Committee on Rules, submitted a privileged report (Rept. No. 115–56) on the resolution (H. Res. 221) waiving a requirement of clause 6(a) of rule XIII with respect to consideration of certain resolutions reported from the Committee on Rules, and providing for consideration of motions to suspend the rules, which was referred to the House Calendar and ordered to be printed.

LEAVE OF ABSENCE

By unanimous consent, leave of absence was granted to:

Mr. PAYNE (at the request of Ms. PELOSI) for March 20 through today on account of medical condition.

BILL AND JOINT RESOLUTION PRESENTED TO THE PRESIDENT

Karen L. Haas, Clerk of the House, reported that on March 21, 2017, she presented to the President of the United States, for his approval, the following bill and joint resolution:

H.R. 1362. To name the Department of Veterans Affairs community-based outpatient clinic in Pago Pago, American Samoa, the Faleomavaega Eni Fa'aua'a Hunkin VA Clinic.

H.J. Res. 42. Disapproving the rule submitted by the Department of Labor relating to drug testing of unemployment compensation applicants.

ADJOURNMENT

Mr. SESSIONS. Mr. Speaker, I move that the House do now adjourn.

The motion was agreed to; accordingly (at 11 o'clock and 53 minutes p.m.), under its previous order, the House adjourned until tomorrow, March 23, 2017, at 9 a.m.

EXPENDITURE REPORTS CONCERNING OFFICIAL FOREIGN TRAVEL

Reports concerning the foreign currencies and U.S. dollars utilized for Official Foreign Travel during the first quarter of 2017, pursuant to Public Law 95–384, are as follows:

REPORT OF EXPENDITURES FOR OFFICIAL FOREIGN TRAVEL, DELEGATION TO KOSOVO, SRI LANKA, AND GEORGIA, EXPENDED BETWEEN FEBRUARY 17 AND FEBRUARY 26, 2017

Name of Member or employee	Date		Country	Per diem [1]		Transportation		Other purposes		Total	
	Arrival	Departure		Foreign currency	U.S. dollar equivalent or U.S. currency [2]	Foreign currency	U.S. dollar equivalent or U.S. currency [2]	Foreign currency	U.S. dollar equivalent or U.S. currency [2]	Foreign currency	U.S. dollar equivalent or U.S. currency [2]
Hon. Peter Roskam	2/18	2/20	Kosovo		469.71		(3)				469.71
Hon. David Price	2/18	2/20	Kosovo		469.71		(3)				469.71
Hon. Adrian Smith	2/18	2/20	Kosovo		469.71		(3)				469.71
Hon. Gerry Connolly	2/18	2/20	Kosovo		469.71		(3)				469.71
Jeff Billman	2/18	2/20	Kosovo		469.71		(3)				469.71
Justin Wein	2/18	2/20	Kosovo		469.71		(3)				469.71
Hon. Peter Roskam	2/20	2/24	Sri Lanka		1,002.75		(3)				1,002.75
Hon. David Price	2/20	2/24	Sri Lanka		1,002.75		(3)				1,002.75
Hon. Adrian Smith	2/20	2/24	Sri Lanka		1,002.75		(3)				1,002.75
Hon. Gerry Connolly	2/20	2/24	Sri Lanka		1,002.75		(3)				1,002.75
Jeff Billman	2/20	2/24	Sri Lanka		1,002.75		(3)				1,002.75
Justin Wein	2/20	2/24	Sri Lanka		1,002.75		(3)				1,002.75
Hon. Peter Roskam	2/24	2/26	Georgia		683.20		(3)				683.20
Hon. David Price	2/24	2/26	Georgia		683.20		(3)				683.20
Hon. Adrian Smith	2/24	2/26	Georgia		683.20		(3)				683.20
Hon. Gerry Connolly	2/24	2/26	Georgia		683.20		(3)				683.20
Jeff Billman	2/24	2/26	Georgia		683.20		(3)				683.20
Justin Wein	2/24	2/26	Georgia		683.20		(3)				683.20
Committee total					12,933.96						12,933.96

[1] Per diem constitutes lodging and meals.
[2] If foreign currency is used, enter U.S. dollar equivalent; if U.S. currency is used, enter amount expended.
[3] Military air transportation.

HON. PETER J. ROSKAM, Mar. 7, 2017.

EXECUTIVE COMMUNICATIONS, ETC.

Under clause 2 of rule XIV, executive communications were taken from the Speaker's table and referred as follows:

872. A letter from the Secretary, Department of Defense, transmitting a letter on the approved retirement of Lieutenant General Andrew E. Busch, United States Air Force, and his advancement to the grade of lieutenant general on the retired list, pursuant to 10 U.S.C. 1370(c)(1); Public Law 96-513, Sec. 112 (as amended by Public Law 104-106, Sec. 502(b)); (110 Stat. 293); to the Committee on Armed Services.

873. A letter from the Chairman, Federal Financial Institutions Examination Council, transmitting the Council's Joint Report to Congress, pursuant to 12 U.S.C. 3311(e); Public Law 104-208, Sec. 2222(e); (110 Stat. 3009-415); to the Committee on Financial Services.

874. A letter from the Assistant Director for Legislative Affiars, Consumer Financial Protection Bureau, transmitting the Bureau's 2017 annual report to Congress on the Fair Debt Collection Practices Act, pursuant to 15 U.S.C. 1692m(a); Public Law 90-321, Sec. 815(a) (as amended by Public Law 111-203, Sec. 1089(1)); (124 Stat. 2092); to the Committee on Financial Services.

875. A letter from the Assistant General Counsel for Regulatory Services, Department of Education, transmitting the Department's interim final rule — Open Licensing Requirement for Competitive Grant Programs [Docket ID: ED-2015-OS-0105] (RIN: 1894-AA07) received March 20, 2017, pursuant to 5 U.S.C. 801(a)(1)(A); Public Law 104-121, Sec. 251; (110 Stat. 868); to the Committee on Education and the Workforce.

876. A letter from the Acting Assistant Secretary for Legislation, Department of Health and Human Services, transmitting the Department's report entitled ''Annual Report to Congress on the Use of Mandatory Recall Authority'' for FY 2016, pursuant to Sec. 206(f) of the FDA Food Safety Modernization Act of 2011, Public Law 111-353; to the Committee on Energy and Commerce.

877. A letter from the Acting Assistant Secretary for Legislation, Department of Health and Human Services, transmitting the FY 2016 Compounding Quality Act Annual Report as required by the Compounding Quality Act; to the Committee on Energy and Commerce.

878. A letter from the Director, Regulations Policy and Management Staff, FDA, Department of Health and Human Services, transmitting the Department's final rule — Presiding Officer for an Appeal and Informal Hearing; Technical Amendments [Docket No.: FDA-2017-N-0011] received March 21, 2017, pursuant to 5 U.S.C. 801(a)(1)(A); Public Law 104-121, Sec. 251; (110 Stat. 868); to the Committee on Energy and Commerce.

879. A letter from the Acting Assistant Secretary for Legislation, Department of Health and Human Services, transmitting the 2016 ADUFA Financial Report, pursuant to Animal Drug User Fee Act of 2003, as amended; to the Committee on Energy and Commerce.

880. A letter from the Acting Secretary, Bureau of Legislative Affairs, Department of State, transmitting the Department's Alternative Fuel Vehicle (AFV) program report for FY 2016, pursuant to 42 U.S.C. 13218(b)(1); Public Law 102-486, Sec. 310 (as amended by Public Law 109-58, Sec. 705); (119 Stat. 817); to the Committee on Energy and Commerce.

881. A letter from the Director, Office of Congressional Affairs, Nuclear Regulatory Commission, transmitting the Commission's NUREG revision — Consolidated Guidance About Materials Licenses: Program-Specific Guidance About Licenses of Broad Scope [NUREG-1556, Volume 11, Revision 1] received March 20, 2017, pursuant to 5 U.S.C. 801(a)(1)(A); Public Law 104-121, Sec. 251; (110 Stat. 868); to the Committee on Energy and Commerce.

882. A letter from the Division Chief, FOIA Public Liaison, Bureau for Management, Office of Management Services, Information and Records Division, U.S. Agency for International Development, transmitting the Agency's final rule — Freedom of Information Act Regulations (RIN: 0412-AA89) received March 20, 2017, pursuant to 5 U.S.C. 801(a)(1)(A); Public Law 104-121, Sec. 251; (110 Stat. 868); to the Committee on Oversight and Government Reform.

883. A letter from the Acting Director, Office of Sustainable Fisheries, NMFS, National Oceanic and Atmospheric Administration, transmitting the Administration's temporary rule — Fisheries of the Exclusive Economic Zone Off Alaska; Exchange of Flatfish in the Bering Sea and Aleutian Islands Management Area [Docket No.: 150916863-6211-02] (RIN: 0648-XF009) received March 20, 2017, pursuant to 5 U.S.C. 801(a)(1)(A); Public Law 104-121, Sec. 251; (110 Stat. 868); to the Committee on Natural Resources.

884. A letter from the Secretary, Judicial Conference of the United States, transmitting the Conference's proposed ''Criminal Judicial Procedure, Administration, and Technical Amendments Act of 2017''; to the Committee on the Judiciary.

885. A letter from the Assistant Secretary of the Army, Civil Works, Department of Defense, transmitting the Corps' Upper Ohio Navigation Study, PA Final Feasibility Report and Integrated Environmental Impact Statement for October 2014 (revised August 2016), pursuant to 33 U.S.C. 549a; Public Law 91-611, Sec. 216; (84 Stat. 1830) (H. Doc. No. 115—22); to the Committee on Transportation and Infrastructure and ordered to be printed.

886. A letter from the Assistant Secretary of the Army, Civil Works, Department of Defense, transmitting the Corps' Princeville, North Carolina, Flood Risk Management Integrated Feasibility Report and Environmental Assessment for September 2015 (revised April 2016), pursuant to 33 U.S.C. 549a; Public Law 91-611, Sec. 216; (84 Stat. 1830) (H. Doc. No. 115—23); to the Committee on Transportation and Infrastructure and ordered to be printed.

887. A letter from the Assistant Secretary of the Army, Civil Works, Department of Defense, transmitting the Corps' Lower Willamette River Environmental Dredging and Ecosystem Restoration Integrated Feasibility Study and Environmental Assessment for July 2015 (H. Doc. No. 115—20); to the Committee on Transportation and Infrastructure and ordered to be printed.

888. A letter from the Assistant Secretary of the Army, Civil Works, Department of Defense, transmitting the Corps' Puget Sound Nearshore Ecosystem Restoration Final Feasibility Report and EIS report for September 2016 (H. Doc. No. 115—21); to the Committee on Transportation and Infrastructure and ordered to be printed.

889. A letter from the Assistant Secretary of the Army, Civil Works, Department of Defense, transmitting the Corps' Navigation Improvements Diomede, Alaska Final Interim Feasibility Report and Environmental Assessment for August 2015 (H. Doc. No. 115—24); to the Committee on Transportation and Infrastructure and ordered to be printed.

REPORTS OF COMMITTEES ON PUBLIC BILLS AND RESOLUTIONS

Under clause 2 of rule XIII, reports of committees were delivered to the Clerk for printing and reference to the proper calendar, as follows:

Mr. GOODLATTE: Committee on the Judiciary. H.R. 1215. A bill to improve patient access to health care services and provide improved medical care by reducing the excessive burden the liability system places on the health care delivery system; with an amendment (Rept. 115–55, Pt. 1). Referred to the Committee of the Whole House on the state of the Union.

Mr. SESSIONS: Committee on Rules. House Resolution 221. Resolution waiving a requirement of clause 6(a) of rule XIII with respect to consideration of certain resolutions reported from the Committee on Rules, and providing for consideration of motions to suspend the rules (Rept. 115–56). Referred to the House Calendar.

DISCHARGE OF COMMITTEE

Pursuant to clause 2 of rule XIII, the Committee on Energy and Commerce discharged from further consideration. H.R. 1215 referred to the Committee of the Whole House on the state of the Union.

PUBLIC BILLS AND RESOLUTIONS

Under clause 2 of rule XII, public bills and resolutions of the following titles were introduced and severally referred, as follows:

By Mr. DEFAZIO:

H.R. 1664. A bill to amend the Internal Revenue Code of 1986 to index the gas and diesel tax and rebuild our roads, bridges, and transit systems; to the Committee on Ways and Means, and in addition to the Committee on Transportation and Infrastructure, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Mr. RODNEY DAVIS of Illinois (for himself and Mrs. BUSTOS):

H.R. 1665. A bill to ensure that Administrator of the Federal Emergency Management Agency considers severe local impact in making a recommendation to the President for a major disaster declaration; to the Committee on Transportation and Infrastructure.

By Mr. JONES (for himself, Mr. DUNCAN of Tennessee, Mr. GARAMENDI, Mr. YOUNG of Alaska, Ms. LEE, Mr. MASSIE, Ms. SPEIER, and Mr. CLEAVER):

H.R. 1666. A bill to prohibit the availability of funds for activities in the Islamic Republic of Afghanistan, and for other purposes; to the Committee on Foreign Affairs, and in addition to the Committee on Rules, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Mr. MARINO (for himself, Mr. GOODLATTE, Mr. CONYERS, and Mr. CICILLINE):

H.R. 1667. A bill to amend title 11 of the United States Code in order to facilitate the resolution of an insolvent financial institution in bankruptcy; to the Committee on the Judiciary.

By Mr. JODY B. HICE of Georgia (for himself and Mr. LOWENTHAL):

H.R. 1668. A bill to establish the Bureau of Land Management Foundation as a charitable and nonprofit corporation to encourage, accept, obtain, administer, and use private gifts, devises, and bequests for the benefit of activities and services of the Bureau of Land Management, and for other purposes; to the Committee on Natural Resources.

By Mr. DELANEY (for himself, Mr. RODNEY DAVIS of Illinois, Mr. AGUILAR, Mr. BARR, Mr. BERA, Mrs. BUSTOS, Ms. GABBARD, Mr. GOTTHEIMER, Ms. HANABUSA, Mr. HECK, Ms. KELLY of Illinois, Ms. KUSTER of New Hampshire, Mr. LOEBSACK, Mr. SEAN PATRICK MALONEY of New York, Mr. MCKINLEY, Mr. MOULTON, Mr. NORCROSS, Mr. PETERS, Mr. POLIS, Mr. RUPPERSBERGER, Mr. SCHNEIDER, Ms. SINEMA, Mr. SOTO, and Mrs. TORRES):

H.R. 1669. A bill to establish the American Infrastructure Fund, to provide bond guarantees and make loans to States, local governments, and infrastructure providers for investments in certain infrastructure projects, and to provide equity investments in such projects, and for other purposes; to the Committee on Transportation and Infrastructure, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Mr. DELANEY (for himself, Mr. YOHO, Mr. AGUILAR, Mr. BERA, Mrs. BUSTOS, Ms. GABBARD, Ms. HANABUSA, Ms. KELLY of Illinois, Ms. KUSTER of New Hampshire, Mr. LANGEVIN, Mr. SEAN PATRICK MALONEY of New York, Ms. MCCOLLUM, Mr. MCKINLEY, Mr. MOULTON, Mr. NORCROSS, Mr. PERLMUTTER, Mr. POLIS, Mr. QUIGLEY, Mr. RUPPERSBERGER, Ms. SINEMA, and Mr. SOTO):

H.R. 1670. A bill to eliminate the incentive for corporations to continue to hold accumulated earnings offshore, to invest in domestic infrastructure, to provide for international tax reform, and for other purposes; to the Committee on Ways and Means, and in addition to the Committees on Transportation and Infrastructure, and Rules, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Mr. BARLETTA (for himself and Mr. MCCAUL):

H.R. 1671. A bill to amend the Internal Revenue Code of 1986 to require the provision of social security numbers as a condition of receiving the health insurance premium tax credit; to the Committee on Ways and Means.

By Mr. CICILLINE (for himself, Mr. REED, Mr. RYAN of Ohio, Mr. POCAN, Ms. MATSUI, Ms. DELAURO, Mr. DOGGETT, Ms. BROWNLEY of California, Mr. SCHRADER, Mrs. BUSTOS, and Mr. GARAMENDI):

H.R. 1672. A bill to improve the competitiveness of United States manufacturing by designating and supporting manufacturing communities; to the Committee on Financial Services.

By Mr. CONYERS (for himself, Mr. GRIJALVA, Ms. JACKSON LEE, Mrs. LAWRENCE, Ms. MCCOLLUM, Mr. POCAN, Mr. EVANS, Mr. ELLISON, Ms. MOORE, Ms. NORTON, Ms. GABBARD, Mrs. BUSTOS, Ms. JAYAPAL, Mr. JOHNSON of Georgia, Ms. SCHAKOWSKY, Mr. MCGOVERN, Ms. MICHELLE LUJAN GRISHAM of New Mexico, Mr. WELCH, Mr. HUFFMAN, Mr. NADLER, Ms. CLARKE of New York, Mr. RASKIN, and Mr. BEN RAY LUJÁN of New Mexico):

H.R. 1673. A bill to establish a trust fund to provide for adequate funding for water and sewer infrastructure, and for other purposes; to the Committee on Transportation and Infrastructure, and in addition to the Committees on Energy and Commerce, Ways and Means, and Agriculture, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Ms. DELAURO (for herself, Mr. ZELDIN, and Mr. SUOZZI):

H.R. 1674. A bill to amend and reauthorize certain provisions relating to Long Island Sound restoration and stewardship; to the Committee on Transportation and Infrastructure, and in addition to the Committee on Natural Resources, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Ms. DELBENE (for herself, Ms. BONAMICI, Mr. CARTWRIGHT, Ms. LEE, Ms. NORTON, Mr. SMITH of Washington, Mr. KILMER, Mr. HECK, and Mr. GRIJALVA):

H.R. 1675. A bill to establish a national program to identify and reduce losses from landslide hazards, to establish a national 3D Elevation Program, and for other purposes; to the Committee on Natural Resources, and in addition to the Committee on Science, Space, and Technology, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Mr. ENGEL (for himself, Mr. REED, and Mr. CARTER of Georgia):

H.R. 1676. A bill to amend the Public Health Service Act to increase the number of permanent faculty in palliative care at accredited allopathic and osteopathic medical schools, nursing schools, social work schools, and other programs, including physician assistant education programs, to promote education and research in palliative care and hospice, and to support the development of faculty careers in academic palliative medicine; to the Committee on Energy and Commerce.

By Mr. ENGEL (for himself, Mr. ROYCE of California, Ms. ROS-LEHTINEN, Mr. DEUTCH, Mr. KINZINGER, Mr. CICILLINE, Mr. POE of Texas, Mr. KILDEE, Mr. MESSER, Mr. SUOZZI, Mr. TED LIEU of California, Mrs. MCMORRIS RODGERS, and Mr. BEYER):

H.R. 1677. A bill to halt the wholesale slaughter of the Syrian people, encourage a negotiated political settlement, and hold Syrian human rights abusers accountable for their crimes; to the Committee on Foreign Affairs, and in addition to the Committees on Financial Services, and the Judiciary, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Ms. FRANKEL of Florida (for herself and Mr. WEBSTER of Florida):

H.R. 1678. A bill to amend the Robert T. Stafford Disaster Relief and Emergency Assistance Act concerning the statute of limitations for actions to recover disaster or emergency assistance payments, and for other purposes; to the Committee on Transportation and Infrastructure.

By Mr. GRAVES of Louisiana (for himself and Mr. SIRES):

H.R. 1679. A bill to ensure that the Federal Emergency Management Agency's current efforts to modernize its grant management system includes applicant accessibility and transparency, and for other purposes; to the Committee on Transportation and Infrastructure.

By Mr. KNIGHT (for himself and Mr. LAWSON of Florida):

H.R. 1680. A bill to amend the Small Business Act to improve the women's business center program, and for other purposes; to the Committee on Small Business.

By Mr. LARSEN of Washington (for himself, Ms. DELBENE, Ms. JACKSON LEE, Ms. MCCOLLUM, Mr. RUSH, Ms. TITUS, Mr. HECK, Mr. MCGOVERN, and Ms. SINEMA):

H.R. 1681. A bill to improve the reproductive assistance provided by the Department of Defense and the Department of Veterans Affairs to severely wounded, ill, or injured members of the Armed Forces, veterans, and their spouses or partners, and for other purposes; to the Committee on Veterans' Affairs, and in addition to the Committee on Armed Services, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Mr. LATTA (for himself and Mr. WELCH):

H.R. 1682. A bill to clarify that no express or implied warranty is provided by reason of a disclosure relating to voluntary participation in the Energy Star program, and for other purposes; to the Committee on Energy and Commerce.

By Mr. SEAN PATRICK MALONEY of New York (for himself, Mr. GALLAGHER, Mr. WALZ, Mr. COOK, Ms. CLARKE of New York, Ms. PINGREE, Ms. NORTON, Mr. CONNOLLY, Mr. CICILLINE, Mr. JONES, Ms. SCHAKOWSKY, Mr. SERRANO, Ms. MATSUI, Mr. SIRES, Mrs. LOWEY, Ms. JUDY CHU of California, Mr. COLE, Mr. BISHOP of Georgia, Mr. DEUTCH, Mr. SABLAN, Mr. QUIGLEY, Ms. SLAUGHTER, Mr. GARAMENDI, Ms. BROWNLEY of California, Mr. COLLINS of New York, Mr. RYAN of Ohio, Mr. HIMES, Mr. WEBSTER of Florida, Ms. KELLY of Illinois, Mr. LEVIN, Mr. RUIZ, Mr. CURBELO of Florida, Mr. POCAN, Ms. LOFGREN, Mr. CÁRDENAS, Mr. TAKANO, Miss RICE of New York, Mr. LARSON of Connecticut, Mr. DONOVAN, Mr. COOPER, Mr. LOEBSACK, Mr. JEFFRIES, Mr. FASO, Mr. CRAMER, Mr. VALADAO, Mr. ROKITA, Ms. KUSTER of New Hampshire, Mr. THOMPSON of California, Mr. SUOZZI, Mr. KILDEE, Mr. PALLONE, Ms. PLASKETT, Ms. STEFANIK, Mr. NEAL, Ms. TENNEY, and Ms. SÁNCHEZ):

H.R. 1683. A bill to require the Secretary of the Treasury to mint coins in commemoration of the National Purple Heart Hall of Honor; to the Committee on Financial Services.

By Mr. NADLER (for himself and Mr. ENGEL):

H.R. 1684. A bill to direct the Administrator of the Federal Emergency Management Agency to provide technical assistance to common interest communities regarding eligibility for disaster assistance, and for other purposes; to the Committee on Transportation and Infrastructure.

By Mr. O'ROURKE (for himself and Mr. BOST):

H.R. 1685. A bill to amend title 38, United States Code, to direct the Secretary of Veterans Affairs to furnish mental and behavioral health care to certain individuals discharged or released from the active military, naval, or air service under conditions other than honorable, and for other purposes; to the Committee on Veterans' Affairs.

By Mr. PAULSEN (for himself and Mr. THOMPSON of California):

H.R. 1686. A bill to amend the Internal Revenue Code of 1986 to extend the limitation on the carryover of excess corporate charitable contributions by regulated public utilities; to the Committee on Ways and Means.

By Mr. POLIQUIN:

H.R. 1687. A bill to amend the Internal Revenue Code of 1986 to lower the mileage

threshold for deduction in determining adjusted gross income of certain expenses of members of reserve components of the Armed Forces, and for other purposes; to the Committee on Ways and Means.

By Ms. SÁNCHEZ (for herself and Mr. ROE of Tennessee):

H.R. 1688. A bill to avoid duplicative annual reporting under the Internal Revenue Code of 1986 and the Employee Retirement Income Security Act of 1974, and for other purposes; to the Committee on Ways and Means, and in addition to the Committee on Education and the Workforce, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Mr. SENSENBRENNER (for himself, Ms. MAXINE WATERS of California, and Mr. FITZPATRICK):

H.R. 1689. A bill to protect private property rights; to the Committee on the Judiciary.

By Ms. TENNEY (for herself, Mr. TAKANO, Mr. CORREA, Ms. GABBARD, Mr. FASO, Mr. JONES, Mr. BANKS of Indiana, Mr. COFFMAN, Mr. COLLINS of New York, and Ms. SINEMA):

H.R. 1690. A bill to amend title 38, United States Code, to require the Secretary of Veterans Affairs to submit an annual report regarding performance awards and bonuses awarded to certain high-level employees of the Department of Veterans Affairs; to the Committee on Veterans' Affairs.

By Mr. THOMPSON of California (for himself, Mr. COOK, Mr. SCHIFF, and Mr. AGUILAR):

H.R. 1691. A bill to amend the Internal Revenue Code of 1986 to exclude from gross income amounts received from State-based earthquake loss mitigation programs; to the Committee on Ways and Means.

By Mrs. TORRES (for herself, Mr. ENGEL, and Ms. CLARKE of New York):

H.R. 1692. A bill to address the problem of illegal firearm trafficking to Mexico; to the Committee on the Judiciary.

By Mr. BROOKS of Alabama (for himself and Mr. LIPINSKI):

H. Con. Res. 37. Concurrent resolution expressing the sense of Congress that Congress and the President should prioritize the reduction and elimination, over a reasonable period of time, of the overall trade deficit of the United States; to the Committee on Ways and Means.

By Mr. CUMMINGS (for himself, Mr. EVANS, Ms. NORTON, Mrs. WATSON COLEMAN, Mr. BLUMENAUER, Ms. WASSERMAN SCHULTZ, Mrs. DINGELL, Mr. CLAY, Mr. RUPPERSBERGER, Mr. NADLER, Mr. HASTINGS, Mr. RYAN of Ohio, Ms. SLAUGHTER, Mr. JOHNSON of Georgia, Mrs. BEATTY, Mr. ELLISON, Mr. BISHOP of Georgia, Mr. COHEN, Ms. ADAMS, Mr. LEWIS of Georgia, Mr. SMITH of Washington, Ms. CASTOR of Florida, Mr. LYNCH, Mr. RICHMOND, Mr. DANNY K. DAVIS of Illinois, Mr. LARSEN of Washington, Ms. EDDIE BERNICE JOHNSON of Texas, Mr. DELANEY, Ms. KELLY of Illinois, Mr. BUTTERFIELD, Mr. CLEAVER, Mr. SARBANES, Ms. BROWNLEY of California, Mr. MEEKS, Ms. JUDY CHU of California, Ms. PLASKETT, Ms. ROYBAL-ALLARD, Mr. DAVID SCOTT of Georgia, Ms. DEGETTE, Ms. MCCOLLUM, Mr. RUSH, and Mr. RASKIN):

H. Con. Res. 38. Concurrent resolution recognizing the life and legacy of Henrietta Lacks during Women's History Month; to the Committee on Energy and Commerce.

By Mr. TROTT (for himself, Mr. SCHIFF, Mr. VALADAO, Ms. SPEIER, Mr. PALLONE, Ms. JUDY CHU of California, Ms. JACKSON LEE, Mr. BILIRAKIS, Mr. SARBANES, Mr. ROYCE of California, Mr. ENGEL, Ms. CLARK of Massachusetts, Mr. MCGOVERN, Mr. CARBAJAL, Ms. ESHOO, and Mr. COSTA):

H. Res. 220. A resolution expressing the sense of the House of Representatives regarding past genocides, and for other purposes; to the Committee on Foreign Affairs.

MEMORIALS

Under clause 3 of rule XII, memorials were presented and referred as follows:

11. The SPEAKER presented a memorial of the Legislature of the State of Arizona, relative to House Concurrent Memorial 2005, urging the United States Environmental Protection Agency to extend the comment period for and revise Docket Number EPA-HQ-SFUND-2015-0781; which was referred to the Committee on Energy and Commerce.

12. Also, a memorial of the Legislature of the State of South Dakota, relative to House Concurrent Resolution No. 1014, expressing the strongest support for, and unity with, the State of Israel and recognizing Jerusalem, as Israel's undivided capital; which was referred to the Committee on Foreign Affairs.

13. Also, a memorial of the Legislature of the State of Arizona, relative to House Memorial 2001, urging the United States Congress to repeal the Affordable Care Act's Health Insurance Tax; which was referred jointly to the Committees on Ways and Means and Energy and Commerce.

CONSTITUTIONAL AUTHORITY STATEMENT

Pursuant to clause 7 of rule XII of the Rules of the House of Representatives, the following statements are submitted regarding the specific powers granted to Congress in the Constitution to enact the accompanying bill or joint resolution.

By Mr. DEFAZIO:

H.R. 1664.

Congress has the power to enact this legislation pursuant to the following:

Article I, Section 8, Clause 1, Clause 3, and Clause 18 of the Constitution.

By Mr. RODNEY DAVIS of Illinois:

H.R. 1665.

Congress has the power to enact this legislation pursuant to the following:

The constitutional authority on which this bill rests is the power of Congress as stated in Article I, Section 8, Clause 7 of the United States Constitution.

By Mr. JONES:

H.R. 1666.

Congress has the power to enact this legislation pursuant to the following:

This bill is enacted pursuant to Article I, Section 8 of the United States Constitution which grants Congress the authority to make rules for the government and regulation of the land and naval forces.

By Mr. MARINO:

H.R. 1667.

Congress has the power to enact this legislation pursuant to the following:

Article , Section 8, clause 3 of the United States Constitution, in that the legislation exercises legislative power granted to Congress by that clause ''to regulate Commerce with foreign Nations, and among the several States, and with the Indian tribes;''

Article I, Section 8, clause 4 of the United States Constitution, in that the legislation exercises legislative power granted to Congress by that clause ''to establish . . . uniform Laws on the subject of Bankruptcies throughout the United States;''

Article I, Section 8, clause 9 of the United States Constitution, in that the legislation exercises legislative power granted to Congress by that clause ''to constitute Tribunals inferior to the Supreme Court;''

Article I, Section 8, clause 18 of the United States Constitution, in that the legislation exercises legislative power granted to Congress by that clause ''to make all Laws which shall be necessary and proper for carrying into Execution the foregoing Powers, and all other Powers vested by this Constitution in the Government of the United States, or in any Department of Officer thereof;'' and

Article III of the United States Constitution, in that the legislation defines or affects powers of the Judiciary that are subject to legislation by Congress.

By Mr. JODY B. HICE of Georgia:

H.R. 1668.

Congress has the power to enact this legislation pursuant to the following:

Article IV, section 3, clause 2 and Article I, section 8, clause 18

By Mr. DELANEY:

H.R. 1669.

Congress has the power to enact this legislation pursuant to the following:

Article I, Section 8.

By Mr. DELANEY:

H.R. 1670.

Congress has the power to enact this legislation pursuant to the following:

Article I, Section 8.

By Mr. BARLETTA:

H.R. 1671.

Congress has the power to enact this legislation pursuant to the following:

Article I, Section 8, Clause 1—The Congress shall have power to lay and collect taxes, duties, imposts and excises, to pay the debts and provide for the common defense and general welfare of the United States; but all duties, imposts and excises shall be uniform throughout the United States;

By Mr. CICILLINE:

H.R. 1672.

Congress has the power to enact this legislation pursuant to the following:

Article 1, Section 8

By Mr. CONYERS:

H.R. 1673.

Congress has the power to enact this legislation pursuant to the following:

Clause 3 of section 8 of Article I.

By Ms. DELAURO:

H.R. 1674.

Congress has the power to enact this legislation pursuant to the following:

Article 1, Section 8, Clause 3 and Article 1, Section 8, Clause 18 of the United States Constitution

By Ms. DELBENE:

H.R. 1675.

Congress has the power to enact this legislation pursuant to the following:

Article I, Section 8, Clause 18.

By Mr. ENGEL:

H.R. 1676.

Congress has the power to enact this legislation pursuant to the following:

Article 1, Section 1 of the Constitution.

By Mr. ENGEL:

H.R. 1677.

Congress has the power to enact this legislation pursuant to the following:

Article I, Section 8, Clause 18 of the Constitution.

By Ms. FRANKEL of Florida:

H.R. 1678.

Congress has the power to enact this legislation pursuant to the following:

Article 1 Section 8

By Mr. GRAVES of Louisiana:

H.R. 1679.

Congress has the power to enact this legislation pursuant to the following:

Article 1, Section 8 of the United States Constitution

By Mr. KNIGHT:

H.R. 1680.

Congress has the power to enact this legislation pursuant to the following:

Article I, Section 8, Clause 3

The Congress shall have power . . . To regulate Commerce with foreign Nations, and among the several States, and with the Indian Tribes.

By Mr. LARSEN of Washington:

H.R. 1681.

Congress has the power to enact this legislation pursuant to the following:

As described in Article 1, Section 1 ''all legislative powers herein granted shall be vested in a Congress of the United States, which shall consist of a Senate and House of Representatives.''

By Mr. LATTA:

H.R. 1682.

Congress has the power to enact this legislation pursuant to the following:

Article I, Section 8, Clause 3

To regulate Commerce with foreign Nations, and among the several States, and with the Indian Tribes;

By Mr. SEAN PATRICK MALONEY of New York:

H.R. 1683.

Congress has the power to enact this legislation pursuant to the following:

Article I, Sec. 8

By Mr. NADLER:

H.R. 1684.

Congress has the power to enact this legislation pursuant to the following:

Article 1, Section 8 of the U.S. Constitution.

By Mr. O'ROURKE:

H.R. 1685.

Congress has the power to enact this legislation pursuant to the following:

Clause 18 section 8 of article 1 of the Constitution.

By Mr. PAULSEN:

H.R. 1686.

Congress has the power to enact this legislation pursuant to the following:

Article I, Section 8, Clause 1 of the United States Constitution.

By Mr. POLIQUIN:

H.R. 1687.

Congress has the power to enact this legislation pursuant to the following:

Article I, Section 8 grants Congress the power ''to lay and collect Taxes, Duties, Imposts and Excises, to pay the Debts and provide for the common defence and general Welfare of the United States; but all Duties, Imposts and Excises shall be uniform throughout the United State.' ''

By Ms. SÁNCHEZ:

H.R. 1688.

Congress has the power to enact this legislation pursuant to the following:

Article 1, Section 7

By Mr. SENSENBRENNER:

H.R. 1689.

Congress has the power to enact this legislation pursuant to the following:

Article I, Section 8, Clause 1

By Ms. TENNEY:

H.R. 1690.

Congress has the power to enact this legislation pursuant to the following:

Article I, Section 8 of the United States Constitution.

By Mr. THOMPSON of California:

H.R. 1691.

Congress has the power to enact this legislation pursuant to the following:

U.S. Const. art. I, §1

By Mrs. TORRES:

H.R. 1692.

Congress has the power to enact this legislation pursuant to the following:

Article 1: Section 8: Clause 18: To make all Laws which shall be necessary and proper for carrying into Execution the foregoing Powers, and all other Powers vested by this Constitution in the Government of the United States, or in any Department or Officer thereof.

ADDITIONAL SPONSORS

Under clause 7 of rule XII, sponsors were added to public bills and resolutions, as follows:

H.R. 38: Mr. BLUM.

H.R. 44: Mr. TAYLOR.

H.R. 159: Mr. CICILLINE and Mr. RASKIN.

H.R. 160: Mr. DESAULNIER and Ms. NORTON.

H.R. 179: Mr. BISHOP of Georgia, Mr. BRADY of Pennsylvania, and Mr. STIVERS.

H.R. 308: Mr. ARRINGTON.

H.R. 314: Mr. WITTMAN.

H.R. 350: Mr. RATCLIFFE.

H.R. 371: Mr. CARTWRIGHT, Ms. NORTON, and Mr. PANETTA.

H.R. 392: Mr. CALVERT, Mr. COLE, Ms. EDDIE BERNICE JOHNSON of Texas, Mr. NOLAN, Mr. POLIS, and Mr. LARSON of Connecticut.

H.R. 463: Mr. JOYCE of Ohio and Mr. ROSKAM.

H.R. 530: Mr. GRIJALVA.

H.R. 544: Mr. PETERS and Mr. DEFAZIO.

H.R. 548: Mr. POLIQUIN.

H.R. 553: Mr. GRIFFITH and Mr. RENACCI.

H.R. 620: Mr. CORREA and Mr. COLLINS of Georgia.

H.R. 632: Mr. MOULTON.

H.R. 644: Mr. YOUNG of Iowa.

H.R. 676: Mrs. CAROLYN B. MALONEY of New York, Mr. ESPAILLAT, and Ms. BARRAGÁN.

H.R. 721: Mr. POLIS and Mr. BABIN.

H.R. 747: Mr. KILDEE, Mr. CONYERS, and Mr. HUNTER.

H.R. 756: Mr. FORTENBERRY, Mr. YOUNG of Iowa, Mr. RUPPERSBERGER, and Mr. DAVID SCOTT of Georgia.

H.R. 772: Mr. RUTHERFORD.

H.R. 799: Mr. WENSTRUP and Mr. WILSON of South Carolina.

H.R. 804: Mr. LARSON of Connecticut and Mrs. DAVIS of California.

H.R. 810: Mr. GUTIÉRREZ, Ms. WASSERMAN SCHULTZ, Mrs. TORRES, and Mr. QUIGLEY.

H.R. 830: Mr. DIAZ-BALART.

H.R. 849: Mr. WALBERG, Mr. SAM JOHNSON of Texas, Mr. COURTNEY, Mr. JODY B. HICE of Georgia, Mr. O'HALLERAN, Mr. PETERS, and Ms. BROWNLEY of California.

H.R. 855: Mr. GRIJALVA and Mr. KILMER.

H.R. 873: Mr. WALZ.

H.R. 881: Mr. OLSON.

H.R. 891: Mr. JORDAN and Mr. CRAWFORD.

H.R. 909: Mr. BROWN of Maryland.

H.R. 914: Mr. LYNCH.

H.R. 918: Mr. BUCHANAN.

H.R. 919: Mr. LAWSON of Florida and Mrs. CAROLYN B. MALONEY of New York.

H.R. 966: Mr. CARTWRIGHT.

H.R. 973: Mr. AMODEI.

H.R. 986: Mr. EMMER.

H.R. 1001: Mr. PETERS, Mr. KIND, and Mr. COURTNEY.

H.R. 1005: Mr. KATKO and Ms. SHEA-PORTER.

H.R. 1017: Ms. LOFGREN.

H.R. 1046: Mr. KIND.

H.R. 1071: Mr. KUSTER of New Hampshire.

H.R. 1116: Mr. JENKINS of West Virginia, Mr. PETERSON, Mr. MARSHALL, Mr. MCKINLEY, Mr. CRAMER, and Mr. RENACCI.

H.R. 1130: Mr. ABRAHAM.

H.R. 1136: Mr. LONG, Mr. HUDSON, and Mr. MOOLENAAR.

H.R. 1144: Mr. HUFFMAN.

H.R. 1148: Mr. RUTHERFORD.

H.R. 1149: Mr. GRAVES of Georgia.

H.R. 1186: Mr. CARTWRIGHT.

H.R. 1225: Mr. LONG.

H.R. 1243: Mr. AGUILAR and Mr. KIHUEN.

H.R. 1272: Mrs. WATSON COLEMAN.

H.R. 1316: Mr. WITTMAN.

H.R. 1339: Mr. LEWIS of Minnesota.

H.R. 1361: Mr. MOORE.

H.R. 1406: Mr. RASKIN, Mr. COHEN, Mr. SOTO, Mr. CLEAVER, Mrs. DEMINGS, and Mr. QUIGLEY.

H.R. 1409: Mr. BLUMENAUER, Mr. MCKINLEY, and Mr. KENNEDY.

H.R. 1426: Mr. CRAMER.

H.R. 1436: Mr. FARENTHOLD.

H.R. 1444: Mr. CHABOT and Mr. RENACCI.

H.R. 1450: Mr. WITTMAN.

H.R. 1456: Mr. KUSTER of New Hampshire, Mr. GENE GREEN of Texas, and Mr. DEFAZIO.

H.R. 1473: Mr. RUSH, Mr. DEFAZIO, and Mr. ELLISON.

H.R. 1483: Mrs. MCMORRIS RODGERS.

H.R. 1488: Mr. QUIGLEY.

H.R. 1515: Mr. KATKO.

H.R. 1525: Mr. YOHO.

H.R. 1542: Mr. KHANNA, Mr. SARBANES, Mr. WITTMAN, Mr. RYAN of Ohio, Mr. SOTO, Mr. BLUM, and Mr. BISHOP of Georgia.

H.R. 1552: Mr. JODY B. HICE of Georgia.

H.R. 1555: Ms. MOORE, Mr. MOONEY of West Virginia, and Mr. BRADY of Pennsylvania.

H.R. 1580: Mr. COLLINS of New York.

H.R. 1588: Mr. KHANNA.

H.R. 1613: Mr. STIVERS.

H.R. 1656: Mr. PETERS.

H.J. Res. 6: Mr. LUCAS and Mr. FERGUSON.

H.J. Res. 53: Mr. CARBAJAL.

H.J. Res. 56: Mr. MOONEY of West Virginia.

H.J. Res. 59: Mr. GRAVES of Louisiana, Mr. FARENTHOLD, and Mr. GRAVES of Georgia.

H. Con. Res. 13: Mr. VELA, Mr. HASTINGS, Mr. CUELLAR, Mr. GRAVES of Georgia, Mr. SIRES, Mr. ZELDIN, Mr. VISCLOSKY, and Mr. BRAT.

H. Con. Res. 20: Miss RICE of New York.

H. Res. 30: Mr. MOULTON, Mr. CARSON of Indiana, Mr. EVANS, Mr. GOTTHEIMER, Mr. CRIST, Mr. COLLINS of New York, Mrs. DEMINGS, Mr. BARR, Ms. MICHELLE LUJAN GRISHAM of New Mexico, and Ms. JACKSON LEE.

H. Res. 46: Mr. PETERS.

H. Res. 54: Mr. CÁRDENAS.

H. Res. 78: Ms. ADAMS.

H. Res. 128: Mr. SESSIONS, Mr. PAULSEN, Mr. GRIJALVA, Mr. TIPTON, and Mr. HUDSON.

H. Res. 184: Ms. PINGREE, Ms. WASSERMAN SCHULTZ, Mr. KENNEDY, Ms. SPEIER, Mr. PASCRELL, Ms. CLARKE of New York, Ms. FRANKEL of Florida, and Mr. PANETTA.

PETITIONS, ETC.

Under clause 3 of rule XII,

30. The SPEAKER presented a petition of the House Standing Committee on Banking and Insurance of the House of Representatives of the Commonwealth of Kentucky, relative to a Resolution, urging Congress to repeal the Dodd-Frank Wall Street Reform and Consumer Protection Act; which was referred to the Committee on Financial Services.

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Congressional Record

PROCEEDINGS AND DEBATES OF THE 115th CONGRESS, FIRST SESSION

Vol. 163 WASHINGTON, WEDNESDAY, MARCH 22, 2017 No. 50

Senate

The Senate met at 10:30 a.m. and was called to order by the Honorable TOM COTTON, a Senator from the State of Arkansas.

PRAYER

The Chaplain, Dr. Barry C. Black, offered the following prayer:

Let us pray.

Almighty and Eternal God, thank You for listening to our prayers. You are the high and lofty One, but You choose to dwell with those who have contrite hearts. Dwell with our lawmakers. May they meditate upon Your precepts and be guided by the light of Your Word.

Lord, give them the wisdom to seek Your help in the day of trouble and beyond. May the memories of what You have already done provide them with the confidence that the best is yet to come. Do for them immeasurably, abundantly, above all that they can ask or imagine, according to Your power, working in and through them.

We pray in Your mighty Name. Amen.

PLEDGE OF ALLEGIANCE

The Presiding Officer led the Pledge of Allegiance, as follows:

I pledge allegiance to the Flag of the United States of America, and to the Republic for which it stands, one nation under God, indivisible, with liberty and justice for all.

APPOINTMENT OF ACTING PRESIDENT PRO TEMPORE

The PRESIDING OFFICER. The clerk will please read a communication to the Senate from the President pro tempore (Mr. HATCH).

The senior assistant legislative clerk read the following letter:

U.S. SENATE,
PRESIDENT PRO TEMPORE,
Washington, DC, March 22, 2017.

To the Senate:

Under the provisions of rule I, paragraph 3, of the Standing Rules of the Senate, I hereby appoint the Honorable TOM COTTON, a Senator from the State of Arkansas, to perform the duties of the Chair.

ORRIN G. HATCH,
President pro tempore.

Mr. COTTON thereupon assumed the Chair as Acting President pro tempore.

RECOGNITION OF THE MAJORITY LEADER

The ACTING PRESIDENT pro tempore. The majority leader is recognized.

REPEALING AND REPLACING OBAMACARE

Mr. MCCONNELL. Mr. President, we have all seen the headlines. We have all heard the heartbreaking stories. We have all watched as health insurance markets have edged closer to collapse, and we have noticed a common theme. ObamaCare is failing in Kentucky and around the country.

In my home State, insurance premiums increased by up to 47 percent. As insurers flee the market, nearly half of the counties in my State have only one option for an insurer on the exchange.

Many families' deductibles and out-of-pocket expenses have skyrocketed to a point that their plans are too expensive to actually use. In other words, they have health insurance but not necessarily healthcare. The legacy of ObamaCare is one of increased costs, diminishing choices, and broken promises.

In four elections in a row, Kentuckians have overwhelmingly rejected this failed law. The pain caused by ObamaCare is real for millions of Americans. Listen to this small business owner from Versailles. She wrote to my office asking for relief. Here is what she said: ''The first year of ObamaCare, our monthly premiums tripled,'' she wrote, and now, ''our current plan will be discontinued . . . at the end of the year.''

''This is prohibitive for us. We are getting desperate and discouraged.''

Unfortunately, stories like hers are hardly unique—not in Kentucky and not across America—because too many are suffering under ObamaCare. ObamaCare is a direct assault on the middle class, and it will continue to get worse unless we act.

Both in Congress and in the administration, we are working to fulfill our commitment to the American people. We remain committed to the repeal and replacement of ObamaCare with healthcare policies that actually work. When the House finishes its work on ObamaCare repeal legislation, I look forward to taking it up here in the Senate. The administration will continue working to deliver relief and stabilize health markets, as well. Americans are ready for a better way forward after the failure of ObamaCare, and I would urge all of my colleagues to work together so we can deliver it.

NOMINATION OF NEIL GORSUCH

Mr. MCCONNELL. Mr. President, on another matter, as day 2 of the Neil Gorsuch Supreme Court confirmation hearings continued, Senators and the American people were able to learn more about his experience as a jurist and his aptitude to serve on the High Court. We heard directly from Judge Gorsuch about his views on the role of a judge—to be fair and impartial, independent, and not beholden to one party over another. We heard directly from Judge Gorsuch about his views on the role of the Court to uphold the Constitution and interpret the laws as written, not legislating from the bench.

We saw him display a masterful knowledge of the law, along with independence, thoughtfulness, and just the kind of judicial temperament we expect in a Supreme Court Justice. News outlets across the country took notice. This is from a CNN report:

● This "bullet" symbol identifies statements or insertions which are not spoken by a Member of the Senate on the floor.

Printed on recycled paper.

Supreme Court nominee Neil Gorsuch came to the Senate Judiciary Committee Tuesday prepared to deliver a clear message: I'm a judge, not a politician. . . . Sitting at a small table, he turned to listen to each Senator as they spoke, hour after hour, carefully writing notes before launching into his replies.

As CNN noted, the questions ''never rattled him'' and ''he showed command of the law.''

NPR took note of Judge Gorsuch's temperament saying: ''He kept an even keel throughout the day, rarely betraying more than a hint of impatience or pique.''

Here is one take from the Washington Post. It said:

Gorsuch is not easily flustered.

Gorsuch presented himself as the picture of a cool, calm, self-assured justice.

His face often broke into a relaxed smile. He appeared to be listening to every word every Senator said, and he rarely stumbled.

And here is another take from the Post:

After more than 10 years on the U.S. Court of Appeals for the 10th Circuit, [Judge Neil] Gorsuch was prepared for how to respond to questions about judicial independence and how a judge should consider a decision outside his personal political ideology.

These are observations made from outside viewers. Their insights reflect what we have been saying for weeks—that Judge Gorsuch is exceptionally qualified to serve on the Supreme Court.

I hope our Democratic friends take notice and give him the fair consideration he deserves, not invent more excuses not to. Because Judge Gorsuch has performed exceedingly well, some Democrats are desperately trying to come up with a reason to delay the process, just as they have done all year on other nominations.

The Judiciary Committee is continuing its work today. As it does so, I am confident we will continue to see support grow for Judge Gorsuch.

CONGRESSIONAL REVIEW ACT RESOLUTION

Mr. MCCONNELL. Now, Mr. President, on one final matter, last night the Senate voted to overturn a harmful regulation that undermines Alaska's authority to manage its wildlife resources and shifts more power toward Washington.

Today, we will have yet another opportunity to bring Americans relief from heavyhanded regulations using a legislative tool provided by the Congressional Review Act.

That proposal would undo the so-called Volks rule, which is named for the 2012 Federal court case overturning an ill-advised Obama administration regulatory action on the same subject. It is a regulation that purports to look out for the workers' best interests, but it actually does little to achieve that outcome. The Volks rule merely empowers Washington bureaucrats and increases paperwork burdens instead.

As the Coalition for Workplace Safety pointed out, this regulation does ''nothing to improve worker health and safety,'' it ''directly contradicts both clear statutory language and two U.S. Court of Appeals rulings,'' and it also represents ''one of the most egregious end runs around Congress' power to write the laws.''

I heard from Kentuckians who are simply concerned by this overreaching regulation and called for Congress to end it. In one recent letter to my office, the Kentucky Roofing Contractors Association called for the repeal of the Volks rule because it ''does nothing to improve workplace safety and could be used to impose costs on employers for inadvertent paperwork violations.''

In fact, as they point out, it could even ''divert resources away from efforts to improve work place safety and create jobs.''

In another letter I recently received, a Lexington construction contractor said he needs his safety supervisors ''constantly walking jobsites, identifying hazards and making sure our coworkers go home safely every night,'' but this regulation ''forces me to choose allocating sources to preventing future accidents or auditing old paperwork.

That is our decision today: focusing on actual safety of employees or on more bureaucratic paper pushing.

Senator CASSIDY of Louisiana understands the challenges this regulation presents, and he has been a leader in working to protect American businesses from these consequences. I appreciate his efforts and look forward to the Senate passing it soon.

MEASURE PLACED ON THE CALENDAR—H.R. 1181

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

The ACTING PRESIDENT pro tempore. The clerk will read the bill by title for the second time.

The senior assistant legislative clerk read as follows:

A bill (H.R. 1181) to amend title 38, United States Code, to clarify the conditions under which certain persons may be treated as adjudicated mentally incompetent for certain purposes.

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

The ACTING PRESIDENT pro tempore. Objection having been heard, the bill will be placed on the calendar.

RESERVATION OF LEADER TIME

The ACTING PRESIDENT pro tempore. Under the previous order, the leadership time is reserved.

CONCLUSION OF MORNING BUSINESS

The ACTING PRESIDENT pro tempore. Morning business is closed.

The majority leader.

DISAPPROVING A RULE SUBMITTED BY THE DEPARTMENT OF LABOR—MOTION TO PROCEED

Mr. MCCONNELL. Mr. President, I move to proceed to H.J. Res. 83.

The ACTING PRESIDENT pro tempore. The clerk will report the motion.

The senior assistant legislative clerk read as follows:

Motion to proceed to H.J. Res. 83, a joint resolution disapproving the rule submitted by the Department of Labor relating to ''Clarification of Employer's Continuing Obligation to Make and Maintain an Accurate Record of Each Recordable Injury and Illness.''

The ACTING PRESIDENT pro tempore. The question is on agreeing to the motion to proceed.

The motion was agreed to.

DISAPPROVING A RULE SUBMITTED BY THE DEPARTMENT OF LABOR

The ACTING PRESIDENT pro tempore. The clerk will report the joint resolution.

The senior assistant legislative clerk read as follows:

A joint resolution (H.J. Res. 83) disapproving the rule submitted by the Department of Labor relating to ''Clarification of Employer's Continuing Obligation to Make and Maintain an Accurate Record of Each Recordable Injury and Illness.''

The ACTING PRESIDENT pro tempore. The Senator from Louisiana.

Mr. CASSIDY. Mr. President, I rise with my colleagues to support H.J. Res. 83 and companion S.J. Res. 27, a resolution I introduced with 25 of my colleagues, under the Congressional Review Act, or CRA, to stop the Obama administration Department of Labor's regulation, known as the Volks rule, from expanding the statute of limitations for record-keeping violations. This regulatory scheme represents a backwards approach to workplace safety, and it is a blatant overreach by the Federal Government.

Under the Occupational Safety and Health Act, employers are required to record injuries and illnesses that occur in the work place and maintain those records for 5 years. The law provides for a 6-month period for which OSHA can issue citations to employers who fail to maintain the records properly. However, it was the practice of OSHA, based on their interpretation of the law, that they were able to issue citations regarding keeping those records properly for the entire 5-year period employers must keep those records.

Under this practice, OSHA took action against Volks Constructors, a firm in Prairieville, LA, in 2006 for record-keeping violations that occurred nearly 5 years earlier—again, record-keeping violations. This was well beyond the 6-month statute of limitations. Volks Constructors, located in Prairieville, is a heavy industrial contractor that provides manufacturing

services and industrial specialties to the petrochemical and related industries. It has been in business for more than 40 years. Volks challenged OSHA in the DC Circuit Court of Appeals for those citations and won. The Circuit Court of Appeals issued a unanimous, three-judge opinion rebuking OSHA's attempt to file citations past the statute of limitations. One of the three judges was President Obama's Supreme Court nominee, Judge Merrick Garland.

The Volks ruling has since been upheld by the Fifth Circuit Court of Appeals. Let me read a few of the comments from the court's opinion: ''We do not believe Congress expressly established a statute of limitations only to implicitly encourage the Secretary to ignore it.''

Another comment: ''The Act clearly renders the citations untimely, and the Secretary's argument to the contrary relies on an interpretation that is neither natural nor consistent with our precedents.''

From Judge Garland's concurring opinion: ''[B]ecause none of the challenged citations were issued within 6 months, 'flowing the occurrence of any violation,' I agree with my colleagues that the petition for review should be granted and the citation vacated.''

After the court was clear in its ruling, OSHA, in order to negate such ruling and continue issuing citations beyond the 6-month statute of limitations, promulgated this regulation, the Volks rule.

This joint resolution must invalidate the Volks rule. The Volks rule is a clear violation of the court's ruling and is in direct contradiction of the 6-month statute of limitations. Only Congress can amend a Federal statute. Article I of the U.S. Constitution is clear. Members of the legislative branch write the law, not the Federal departments and agencies.

Overturning the Volks rule will not—will not—decrease workplace safety. The rule only changes the window during which OSHA can issue citations for recordkeeping violations. This rule is about paperwork violations and not workers' health or safety.

The Volks rule also creates regulatory confusion for small businesses. By finalizing this unlawful regulation, the Obama administration created uncertainty for employers facing a confusing maze of recordkeeping standards and unwarranted litigation.

The U.S. Chamber of Commerce, the Association of General Contractors, the National Home Builders Association, the National Restaurant Association, the National Retail Association, along with more than 70 State and national organizations, all support this joint resolution.

I ask unanimous consent to have printed in the RECORD the Coalition for Workplace Safety's letter.

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

COALITION FOR WORKPLACE SAFETY,
March 10, 2017.

Hon. MITCH MCCONNELL,
Majority Leader, U.S. Senate, Washington, DC.
Hon. JOHN CORNYN,
Majority Whip, U.S. Senate, Washington, DC.
Hon. LAMAR ALEXANDER,
Chairman, Senate Committee on Health, Education, Labor and Pensions, Washington, DC.
Hon. JOHNNY ISAKSON,
Chairman, Senate Subcommittee on Employment and Workplace Safety, Committee on Health, Education, Labor and Pensions, Washington, DC.

DEAR MAJORITY LEADER MCCONNELL, MAJORITY WHIP CORNYN, CHAIRMEN ALEXANDER AND ISAKSON: The undersigned groups strongly urge you to pass H.J. Res. 83/S.J. Res. 27, a Congressional Review Act (CRA) joint resolution of disapproval to invalidate the Obama Administration's OSHA regulation overturning the decision in *Volks* regarding the statute of limitations for recordkeeping violations.

At its core, the Volks Rule is an extreme abuse of authority by a federal agency that will subject millions of American businesses to citations for paperwork violations, while doing nothing to improve worker health and safety. Finalized on December 19, 2016, the rule attempts to extend to five years the explicit six month statute of limitations on recordkeeping violations in the Occupational Safety and Health (OSH) Act of 1970. This regulation simultaneously represents one of the most egregious end runs around Congress' power to write the laws and a clear challenge to the judicial branch's authority to prevent an agency from exceeding its authority to interpret the law.

In 2012, citing the unambiguous language in the OSH Act, the U.S. Court of Appeals for the District of Columbia held that OSHA could not sustain citations against an employer for alleged recordkeeping violations that occurred more than six months before the issuance of the citation because, as the employer asserted, they were outside the six month statute of limitations set forth in the OSH Act. The court was unequivocal in its rebuke of OSHA. Judge Janice Rogers Brown expressed particular concern on the issue of the agency's overstepping its authority: ''we were rightly troubled by the notion of being asked by an agency to expand that agency's enforcement authority when Congress had evidently not seen fit to do so.'' Judge Merrick Garland, in his concurrence, plainly rejected OSHA's rationale for issuing the fines, ''the Secretary's contention—that the regulations that Volks was cited for violating support a 'continuing violation' theory—is not reasonable.'' The *Volks* decision has since been endorsed by the Fifth Circuit in the *Delek* decision, issued in December 2016, where the court found ''its reasoning persuasive.''

In response to the Court of Appeals ruling, OSHA promulgated this regulation specifically to negate the *Volks* case ruling and extend liability for paperwork violations beyond the six month window permitted under the Act. OSHA issued the final rule in the waning days of President Obama's Administration with an effective date of January 19, 2017. The Senate has until April 7 to pass H.J. Res. 83/S.J. Res. 27.

We urge you to help put a stop to OSHA's abuse of its authority and support swift passage of a joint resolution of disapproval for this burdensome, unlawful rule. Because the final rule directly contradicts both clear statutory language and two U.S. Courts of Appeals rulings, it must not be allowed to stand.

Thank you for your consideration of this request and for your continued efforts to rein in agency overreach and reduce the regulatory burden on America's job creators.

Sincerely,

Air Conditioning Contractors of America, American Bakers Association, American Coke and Coal Chemicals Institute, American Composites Manufacturers Association, American Farm Bureau Federation, American Feed Industry Association, American Foundry Society, American Fuel and Petrochemical Manufacturers, American Health Care Association, American Iron and Steel Institute, American Road and Transportation Builders Association, American Society of Concrete Contractors, American Subcontractors Association, Inc., American Supply Association, American Trucking Associations, Asphalt Roofing Manufacturers Association, Associated Builders and Contractors, Associated General Contractors, Associated Wire Rope Fabricators, Copper & Brass Fabricators Council, Inc., Corn Refiners Association, Distribution Contractors Association.

Flexible Packaging Association, Global Cold Chain Alliance, Independent Electrical Contractors, Industrial Minerals Association—North America, Institute of Makers of Explosives, International Dairy Foods Association, International Foodservice Distributors Association, International Franchise Association, International Warehouse Logistics Association, IPC-Association Connecting Electronics Industries, Leading Builders of America, Mason Contractors Association of America, Mechanical Contractors Association of America, Mike Ray, Motor & Equipment Manufacturers Association, National Association for Surface Finishing, National Association of Home Builders, National Association of Manufacturers, National Association of Professional Employer Organizations, National Association of the Remodeling Industry, National Association of Wholesaler-Distributors, National Automobile Dealers Association, National Center for Assisted Living, National Chicken Council, National Cotton Ginners' Association, National Council of Self-Insurers, National Demolition Association, National Electrical Contractors Association, National Federation of Independent Business, National Grain and Feed Association, National Lumber and Building Material Dealers Association, National Oilseed Processors Association, National Restaurant Association, National Retail Federation, National Roofing Contractors Association.

National School Transportation Association, National Tooling and Machining Association, National Turkey Federation, National Utility Contractors Association, Non-Ferrous Founders' Society, North American Die Casting Association, North American Meat Institute Plastics, Industry Association (PLASTICS), Power and Communication Contractors Association, Precision Machined Products Association, Precision Metalforming Association, Printing Industries of America, Retail Industry Leaders Association, Sheet Metal and Air Conditioning Contractors National Association, Shipbuilders Council of America, Southeastern Cotton Ginners Association, Inc., Texas Cotton Ginners' Association, The Association of Union Constructors (TAUC), Thomas W. Lawrence, Jr.—Safety and Compliance Management, Tile Roofing Institute, Tree Care Industry Association, TRSA—The Linen, Uniform and Facility Services Association, U.S. Chamber of Commerce, U.S. Poultry & Egg Association.

Mr. CASSIDY. Mr. President, I urge my colleagues to support this joint resolution and allow Congress to review

the law and make changes, if needed. It is the right thing to do.

I ask unanimous consent that quorum calls during the consideration of H.J. Res. 83 be equally divided in the usual form.

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

Mr. CASSIDY. Mr. President, I yield the floor.

Mr. SCHUMER. Mr. President, I suggest the absence of a quorum.

The ACTING PRESIDENT pro tempore. The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

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

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

RECOGNITION OF THE MINORITY LEADER

The PRESIDING OFFICER. The Democratic leader is recognized.

NOMINATION OF NEIL GORSUCH

Mr. SCHUMER. Mr. President, yesterday Judge Neil Gorsuch went through over 11 hours of questioning in the Judiciary Committee. As expected, he used the opportunity to speak at length about his knowledge of case law, hiding behind precedents rather than giving an impression of his actual views. As expected, his supporters are saying that Judge Gorsuch was erudite, polished, homespun. But none of this matters compared to the real purpose of hearings: to find out a nominee's views and what kind of judge he will be, not how his repartee from the bench will sound.

For 11 hours, Judge Gorsuch looked like he was playing dodgeball with the Senate Judiciary Committee, bending over backward to avoid revealing anything that might constitute a judicial philosophy or give hints about his approach to the legal issues of our day. Those, to me, are far more important than any superficial impressions he may have left. He dodged questions on previous cases like Citizens United, Rowe v. Wade, and Brown v. Board. He dodged general questions on dark money in politics, LGBTQ rights, and the constitutionality of a Muslim ban.

He did manage to wax poetic on the significance of a judge's robe and the humility it brings. He said it reminds us that ''ours is a judiciary of honest black polyester.'' Well, if he were truly humbled, he would realize the augustness of this position and answer questions directly. Judge Gorsuch's testimony yesterday was replete with humble kinds of metaphors and homespun stories but pitifully short on substance, which is what really matters.

The hearings this week are starting to have the element of farce. The Republicans ask softball questions, while we Democrats endeavor to get the judge to offer a meaningful response on one—any legal issue but are met with constant refrains of ''That is settled law'' and ''I can't prejudge'' and ''Gee, Senator, my personal views have no place here.'' Let me repeat. There is no legal precedent, rule, or logic for failing to answer questions that don't involve immediate and specific cases before the Court. Is Judge Gorsuch hiding behind this rhetoric because he does not want people to know his views?

After 4 days of this Kabuki theatre, the press will write that Judge Gorsuch was smooth and well-spoken, but I doubt that even at the end of the hearing process we will have any greater views of his jurisprudence. Will we know any better than we do today what kind of Justice he will be on our Nation's highest Court?

You know, we have seen this before. It was not all that long ago that another charming, polished, erudite judge named John Roberts came before the committee, impressing lawmakers while playing the role of a model jurist. He displayed a similar reluctance to answer specific questions, but he assured us all that he was a judge who was free from the biases of politics and ideology, that, in his words, he simply ''called balls and strikes.'' We were duped. Judge Roberts showed his true activist colors as soon as he got to the bench and dragged the Court sharply to the right, ruling consistently in favor of wealthy special interests and powerful corporations. The whole episode with Judge Gorsuch feels like a Roberts' rerun. If his voting record is any indication, according to the New York Times survey, he will be even more conservative than Justice Roberts.

This is not how the hearing process is supposed to work. Although it has become practice for Supreme Court Justices to elude specific questions, it is not in the best interests of our country to elevate a cipher to the Supreme Court. We don't want the qualifications for Senate confirmation to be an ability of skillful evasion. The hearing process cannot accomplish what it is designed to if the nominee refuses to engage on matters of legal substance.

If anyone doubts that Judge Gorsuch does not have strong views, that he is not simply a caller of balls and strikes, a tabula rasa, just look at the way he was chosen. He was supported and pushed by the Heritage Foundation and the Federalist Society. Do they just call balls and strikes, or do those two groups have an avowed interest in moving the judiciary far to the right? He was supported by billionaires like Mr. Anschutz who have a similar desire. Does anyone think the Federalist Society would choose someone who just called balls and strikes when they have been dedicated for a generation to moving the courts to the right? They have not endorsed a moderate judge in their history. Again, they are dedicated to moving the court far away from the mainstream.

If anyone doubts that Judge Gorsuch would be an activist judge with strong conservative views eschewing the interests of average people, just look at how he was selected—by the Federalist Society, by the Heritage foundation, not by average American jurists.

TRUMPCARE

Mr. President, on another matter, TrumpCare, as we speak, the House Republican leadership is desperately trying to whip enough votes to pass their bill tomorrow, making sweetheart deals to sway recalcitrant Members.

It is funny that all the changes House Republicans have made this past week don't even attempt to address the real problems with the bill: that 24 million fewer Americans will have coverage and that premiums will go up. In fact, the changes they are making to TrumpCare are even more cruel than their existing bill in an attempt to win conservative votes. Still, many of them don't think it is cruel enough yet. In their rush, they included language in their managers' amendment that would exclude 7 million or so veterans from the eligibility for tax credits in the bill—7 million veterans. That is what happens when you try to rush a complicated bill like this through.

When Democrats were in the majority and working through healthcare, we debated the bill over the course of a whole year. We had one of the longest committee hearings and amendment processes in recent memory. Still, even then, Republicans criticized us for trying to jam it through. ''Read the bill,'' they would chant.

Now Republicans are trying to do in 2 weeks what we spent 1 year on because the time was required. My friend the distinguished majority leader says he hopes to have TrumpCare brought up and passed through the Senate by the end of next week—no committee process, potentially no CBO score.

I guess Senate Republicans are negotiating a substitute bill behind closed doors right now to meet that accelerated, speedy, and reckless timeline. When you are talking about a drastic reformation of our healthcare system, one-sixth of our economy, that is breathtakingly irresponsible and rankly hypocritical. When will Democrats get to view the substitute bill? Will there be a CBO score before both Republicans and Democrats have to vote on it in the Senate? We don't know. But rushing it through in this fashion, as the majority leader promised, is unwise and unfair to Democratic Senators and, far more importantly, to the American people. It is also a direct contradiction to how then-Minority Leader MCCONNELL spoke about health reform in 2009. Here is what he said: ''We shouldn't try to do it in the dark, and whatever final bill is produced should be available to the American public and to members of the Senate for enough time to come to grips with it, and there should be and must be a CBO score.''

Well, Leader MCCONNELL, what was good enough for us back in 2009 should be good enough for you today.

I certainly hope Leader MCCONNELL follows his own advice from 2009 now that he is majority leader.

My Republican friends like to claim this bill isn't the end of the story on healthcare. They claim they can pass a third prong later on down the road. Republicans in the Senate and the House should know this: There is no third prong. It is a fantasy.

Any legislation outside of reconciliation requires 60 votes, and Democrats will not help Republicans repeal and replace the Affordable Care Act today, tomorrow, or 6 months from now. This bill, TrumpCare, Republicans, is your one shot.

I think that is why House Republicans have tried to jam some extra policy changes onto their bill—like the Medicaid work requirement and the restrictions on abortion—because they know they won't be able to later on, and they need more conservative votes to pass this bill tomorrow.

This approach has a serious problem. There is a serious question as to whether these changes are budgetary changes or policy changes. If they are policy changes, they will not meet the Senate's standards of reconciliation, known as the Byrd rule, and can be stricken from the bill.

Of particular vulnerability, my Republican colleagues, are provisions like the Medicaid work requirement and the restrictions on abortion. House Republicans should hear this before they vote: Those provisions that you might think help you vote yes on the bill may not survive. Factor that into your vote.

Ahead of the vote tomorrow, I just want to say to my Republican colleagues—and I have sympathy, although I don't agree. I vehemently disagree. I know you feel caught between a rock and a hard place, between the prospect of failing to fulfill a shrill and unthought-through campaign pledge and a bill that would badly hurt millions of Americans, particularly your voters.

I say to them: There is a way out. Drop your efforts to repeal the Affordable Care Act, and Democrats will work with you on serious proposals to improve the existing law. Drop TrumpCare. Come to us with some ideas on how to improve the ACA, and we will sit down with you and try to figure out what is best for our country. You can avoid this disaster of a bill called TrumpCare, which will result in higher costs, less care, and 24 million fewer Americans with health coverage. Turn back before it is too late.

I yield the floor.

The PRESIDING OFFICER (Mr. SULLIVAN). The Senator from West Virginia.

Mr. MANCHIN. Mr. President, first of all, I agree with my friend wholeheartedly. We are asking for a repair. It doesn't make any sense at all to go down the path of repealing until we make an effort to make this better and protect the people who are depending on us. With that, let's see what happens. We are all willing to sit down and work on both sides of the aisle to help improve it.

OPIOID ABUSE CRISIS

Mr. MANCHIN. Mr. President, I rise today because of the crisis we have with the country's opiate addictions—prescription drugs—in the Presiding Officer's wonderful State of Alaska, the State of West Virginia, and every other State in the Union.

West Virginia has the highest drug overdose death rate in the Nation due to prescription drug abuse. Just in 2016, West Virginia reported 818 overdose deaths, which is 4 times the number that occurred in 2001 and is a nearly 13-percent increase just from 2015, when it was about 607. More than 700 West Virginians died from an opioid overdose last year, and 42,000 people in West Virginia, including 4,000 youth, sought treatment for illegal drug use, but they failed to receive it. There is no place for them to go.

The Presiding Officer and I have spoken about this, and I appreciate his willingness and openness to look at how we cure that. I have a bill called the LifeBOAT Act, which the Presiding Officer has been so graciously looking at. It is something that I believe would give us the funding mechanism, and it won't be a hardship. It also gives exemptions for people who have chronic pain from cancer and all the chronic illnesses that are out there. Basically, the opiate drugs that are sold on a day-to-day basis by the millions and millions—it is a one-penny revenue source, one penny per milligram. That would give us the funding mechanism we need in order to continue to have expanded services for addiction.

I have been involved in public service for quite some time, and 20 years ago, I would have thought anybody who has fooled with drugs, whether legal prescription or illicit drugs—it would be a criminal act and they should go to jail for it. Well, we have put people in jail for consumption for the last 20 years, and it hasn't cured one. So I have come to the conclusion, basically, in looking and talking to the experts, after we have had two decades of evaluating this, that it is an illness, and an illness needs treatment. We don't have the treatment centers, so we are letting people go untreated, and that is basically sinful in this country.

There are 2.1 million Americans who abuse or are dependent on opioids—2.1 million. I think to get the scope of how bad the situation is, and this epidemic, when you think about how over 200,000 people have died since 2000—200,000—any other catastrophic cause of death in this country would be of pandemic proportions, and we would do whatever it costs in order to get the National Institutes of Health to find a cure. We would. But with this, we kind of sit back idly.

According to the CDC, three out of four new heroin users abused prescription opiates before moving to heroin. It is a segue for people to move right into tougher, stronger, powerful drugs.

Heroin use has more than doubled among young adults ages 18 to 25 in the past decade, and 45 percent of the people who used heroin were also addicted to prescription opiate painkillers. Between 2009 and 2013, only 22 percent of Americans suffering from opioid addiction participated in any form of addiction treatment.

Think about the enormity of this epidemic. The United States of America, our great country, makes up only about 4.6 percent of the world's population; yet we consume 80 percent of all opiates produced and consumed in the world. How did it happen? The Presiding Officer and I grew up in a time when this wasn't prevalent, but how did it happen?

I will tell you one thing: We have to cure it. It is ravaging and destroying every part of this great country. We are taking so many productive people out of the workforce because they are addicted. If you talk to your police and law enforcement anywhere in this country, they will tell you that 80 to 90 percent of all of the calls they make in the form of justice are due to opiate or drug use. It is horrible what it is costing us in real time, in real dollars, in real people's lives.

There is another bill I have out there, too, and I call it last chance. It really deals with this. If we know we have a problem—we have people whom we don't have in the workforce because three things keep you out of the workforce: You are either addicted or convicted or lack of skills. You have an addiction; you have been convicted of a crime, so you have a record; or you have a lack of skills or a combination of the three.

I can tell you that the addiction and conviction usually go hand in hand. People who are addicted often have a larceny or maybe even a felony on their record, and it is so hard for them to get back into the workforce. If you get them in a treatment center, there is no carrot to say: Stick with this because you are going to be clean.

It takes a lot of fortitude for a person to stay with the program when they have such an addiction and a craving. But if they know that at the end of that 1 year in a treatment center, there is a chance for them to expunge their record if it wasn't a violent crime, if it wasn't a sexual crime—but it was probably grand larceny, because usually they will steal from their family, and then once the family gets tough with them, they will steal from any type of extended family, and then they will steal from the neighborhood or anywhere they can get the money to support their habit.

What my bill says is that after 1 year in a certified treatment program, they complete another year of mentoring, helping other people get off and stay off and maybe not start, then they are able to, with their sponsors—people who say: Yes, they have completed this program; yes, they have mentored for 1 year—they can go before the arresting officers and the sentencing judge to see if they can get that expunged to give

them a clean start. It is the Clean Start Act. I call it last chance, but officially it is called the Clean Start Act. It is one way to get this workforce in America producing again because if not, the only thing they have waiting for them is a minimum wage job, and the skill sets most of them have are going to go unused and unproductive. So these are things we are working on.

When you look at the misuse and abuse of opiates and what it costs our country, think about this. This was in 2013, the last figures I have—an estimated $78.5 billion in lost productivity, medical costs, and criminal justice cost. In 2013, it cost our country $78.5 billion. So we are paying for it. It is like ''Pay me now or pay me later.'' We are paying for it.

That one penny on every milligram of opiates that are produced and consumed in this country would raise about $1.5 to $2 billion a year. I would hope it would raise none, but it would raise that much because of the amount of consumption we have. We consume 80 percent of all of the world's opiates. With that, we can start creating treatment centers and curing people.

For the past year, I have been coming to the Senate floor to read letters from West Virginians and those struggling all throughout our country with opioid abuse. They all mention how hard it is to get themselves or their loved ones into treatment. Sometimes it takes months, and sometimes it never happens. Most of the time, it never happens. This problem stems from a lack of a system to help those who are looking for help. We need permanent funding. We talked about that. That is why I introduced the LifeBOAT Act.

Today I am going to read a letter from a mother from West Virginia—she is no different from a mother from Alaska, I can assure you—who lost her daughter to drug abuse after she struggled to get her into treatment facilities she desperately needed. This is Leigh Ann Wilson's story.

On behalf of the families who have lost their children to addiction, I ask that any health law reforms contain a serious effort to ensure effective addiction treatment for all who need it, whatever it takes.

Just yesterday, the Boston Globe published a special report about my daughter, Taylor Leigh Wilson.

Leigh Ann's daughter is named Taylor Leigh Wilson.

My youngest child was one of West Virginia's promising young people, a former Girl Scout, Cabell Midland High School graduate and Marshall student who wanted to turn her love of books into a career as a librarian. But drugs destroyed her life despite her willingness, and months of effort, to get treatment.

Taylor's overdose was the first—

You have to listen to this because you are just not going to believe what happened in Huntington, WV, on this day.

Taylor's overdose was the first of 28 that would be reported in Huntington in the span of five hours on Aug. 15, 2016. The horror of that afternoon made national news. Then the reporters left. Our nightmare, though, was just beginning.

Taylor and I would spend the next 41 days trying to get help. We drove door to door in search of inpatient treatment beds to isolate her from the heroin world. All we found were waiting lists; out-of-state centers that wouldn't take West Virginia Medicaid; and doctors who discouraged Taylor from inpatient treatment, saying she could do without it.

Then Taylor put her name on Prestera's waiting list for Suboxone, a drug proven to reduce withdrawal symptoms. No one told her how long she might have to wait. Though evidence suggests that the combination of counseling and prescription drugs to reduce cravings can be very effective, our lawmakers have restricted the availability of this medication.

On September 28, 2016, Prestera Center called to inform me that Taylor had been accepted into the Suboxone program.

That was September 28, and, as I told you, this overdose happened on August 15.

On September 28, Prestera Center called to inform me that Taylor had been accepted in the suboxone program. I had to tell her that she had overdosed and died 3 days before. The next February I got a call from Prestera Pinecrest following up on Taylor's application for recovery housing and to see if she was still interested.

Before she passed away, Taylor herself told the Boston Globe reporter that the real story that needs to be told is why there are no treatment beds when our state has a crisis epidemic.

Your State, my State—almost every State in America has this.

Why must it be so hard to get addiction treatment in a state with the nation's highest drug death rate—818 deaths last year, most of them from [legal prescription drugs]?

Think about how this epidemic has gotten to this proportion. We have a drug that is put on the market by the FDA. This is an organization, a Federal agency, that is supposed to make sure that we have for consumption a safety net built into it. So the FDA gives their stamp of approval: This is a product that can be used, and it should be of help. Then it goes to the DEA to find out who is allowed to dispense it without any type of education or any type of work to make sure that there is competency in our doctors who are prescribing it—or I might say overprescribing it. Then it goes to the doctor, who is the most trusted person outside of our family, who says: This is going to help you. This is good for you. This is what we are talking about—what is killing West Virginians and Americans every day.

If you need heart surgery, you have insurance providers around the State that would compete for your care. That is what she is saying. There is someone there; for any other treatment or any other need for treatment of any illness, we can find help, but not for this.

This has been such a silent killer that I know—and my family included. Everyone I talk to—anybody I talk to knows somebody in their immediate family or extended family or a close family friend. All of our young interns here know the same. They know people. But we keep it quiet; especially if it's in our family, we keep quiet because it is embarrassing. We don't want anybody to know that we have failed as a family structure. Something fell apart for this to happen. Why would someone have to turn to drugs when they have a loving, caring family? We just don't understand, so we keep quiet about it.

It isn't a Democrat or Republican or liberal or conservative cause. This is a killer that has no boundaries; it attacks everybody. That is what I am saying. When you see a mother who is doing everything she can to get her daughter somewhere just to save her life and can't get her in—we are talking about this one penny: What is a one-penny tax, Joe? I can't vote for any new taxes.

I am not asking you to vote for a tax. I am asking you to look any of your constituents in the eye and say: We have a program that is lifesaving for you or your family member. God forbid if you ever need it, but we have it.

We don't hesitate to put taxes on cigarettes. We didn't hesitate. Everybody voted for taxes on cigarettes. Everybody has voted for taxes on alcohol. I am asking for one penny—one penny to save thousands and thousands of lives in America. I guarantee that there will not be one person to vote against it—a Republican or Democrat who would not vote for something that is going to put permanent funding for treatment centers in the most needed areas in America and saves people's lives.

There aren't enough resources to accommodate the addiction problem in the heroin capital of the United States, Taylor [herself told] a reporter. If no one changes it this whole city will go under.

Let me tell you what this city of Huntington is doing right now. I met with them last week when I was home. They are going to have a center of excellence starting with Marshall University, the city of Huntington, Calvert County, and the entire organization. All the policymakers are working together because this is something they are fighting every day. This center of excellence is built around this. We know we have a problem. We have people overdosing. We are trying to save lives. We are trying to get them clean, and we are trying to get them back into the workforce.

The center of excellence is going to start at conception for a mother who may be using and conceives a child. How do we get her clean? How does she have a healthy baby versus a drug-addicted baby?

We have Lily's Place down there, and what they are doing in neonatal care is unbelievable. They are trying to get this baby weaned off the addiction that the mother passed on in her pregnancy. Then we want to make sure that mother goes back home with the baby in a clean home because, if not, the cycle will continue. This is what the center of excellence is going to do.

The success we think we are going to have, starting at ground zero in Huntington, WV, will be able to be shared all over the country because they are going to take a holistic approach. You just can't say: I am going to treat the addict. I am going to treat the cause. It goes further than that. These children are being born to a drug-infested mother and a father or a person who is paternal or into a family that is still drug-infested. It does nothing but perpetuate the cycle. This is what we have to stop if we want to save the country.

Here is what I tell children, and I will tell all of our young interns. I go to schools and talk every day. I tell them that there is not another country that will take on the United States of America militarily. No one compares with the greatest military that the world has ever known, that history has ever recorded, the United States of America. It is not going to happen. Nobody can take on this great economy of ours—the greatest economy in the world, $19 trillion, almost $20 trillion GDP. The closest economy we have next to us is China, with an economy that is about half of ours, $10.5 to $11 trillion. Then it drops off the scale with Japan and then Russia. Russia is at $2.5 to $3 trillion. No one compares to the United States of America for the economy and military might we have as a superpower—the only superpower left in the world, the United States of America. We are the hope of the world, the United States of America.

I tell them: They don't think they have to fight you. They don't have to take over our economy. They think we will give it to them. They think we will give it to them because we have a lack of skill sets. Our education attainment is not as high as what they are doing, and our addiction problem means we will not be clean enough to be able to perform. They will just sit back and wait because time is on their side. They can sit back and wait for us to turn it all over. And you might be the last generation that lives in our country as the only superpower, the United States of America. God, I hope that doesn't happen, but we have to fight this. We just can't continue to keep talking about it.

We have a good piece of legislation. Think about this: I introduced this bill a year ago—introduced it to honor Jessie Grubb and her mom and dad. Her dad served in the State legislature with me. We have been friends for a long time. Jessie was 30 years old. She was a promising young girl. She got sexually molested when she was in college. She came home, hid it from them, was depressed, got started on—they gave her some pain pills, some drug suppressants so she could cope with it. She got addicted. She overdosed a few times. She was trying to cure—she was 30 years old. She had gone to Michigan. She was in treatment. She had been clean for 6 months. She was a runner, an athlete. She was doing her first marathon.

She had a hip injury, and she went to the hospital. When she went to the hospital, her mom and dad went up there. So here was the mom, the dad, and the girl; they went to admissions. She said: I want you all to know, I am so proud that I am a recovering addict, and I am 6 months clean. I want to make sure you all know that. The parents reiterated it.

She goes into this, and there are no laws—nothing. They ask her all different types of questions: Are you allergic to penicillin—whatever it may be? They make sure that her chart is marked right, so that another attending physician or another attending nurse or the night shift or whatever looks and sees that they can't do that because it says she is allergic to that or they shouldn't give her this because of her condition.

She goes in and she gets treated and she has an infection. They want to treat the infection, so they put a port in to treat the infection because that is how she would be treated with that.

The discharging physician did not know she was a recovering addict. He saw a healthy young lady with an injury and knew that she was going to have pain, so he prescribed her some pain medication. He prescribed her 50 OxyContin on the afternoon she was discharged, and she overdosed and died by 1 in the morning.

Jessie's Law basically says that if the guardian or parent and if the patient both come in and identify their problem and they want you to mark their charts accordingly, that should be done. Pretty simple, right?

Let me tell you what has happened. For 1 year it has been stalled because of HIPAA privacy laws. All this was going on; 1 year was up, and I called David. They had written me a letter that said: Do you think anything will ever happen?

So we went back again and started working on it. Here's what we did to change it. I said: David, we are going to have to take the parents or guardians off of it. If the patient themself asks for that, freely and willingly asks for that, we think that will pass muster, and all the different interest groups out there that are so concerned will basically accept that.

So we have that piece of legislation called Jessie's Law. God forbid, if someone has a constituent or a loved one and it is not known, they can lose that child, just like that.

These are all things that we are dealing with after the effects of addiction. Huntington, WV, and Marshall University are going to take on an effort that I think is heroic: How do we start from the beginning, conception, and make sure that child doesn't grow up to be an addict, make sure that family can get clean enough, and make sure they can be given the responsibility to care for that child so that they can grow up not in an addicted environment? That is what we are trying to do. We are at ground zero.

I am hopeful for this great country and this new generation that we are counting on that they can keep themselves clean and still continue to be the hope of the world, and they truly are.

With that, I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

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

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

NOMINATION OF NEIL GORSUCH

Mr. GARDNER. Mr. President, over the past several days, the American people have had a chance to participate in the Supreme Court nomination process by watching Judge Neil Gorsuch, judge of the Tenth Circuit Court of Appeals, based in Denver, take questions from the Judiciary Committee. For several days now, there have been hearings, with the Judiciary Committee's meeting 12 hours yesterday or so and, the day before, there being a number of speeches from every member of the Judiciary Committee. I and Senator BENNET, my colleague from Colorado, had the great privilege of introducing Judge Gorsuch on Monday to the Senate Judiciary Committee.

I think what people across the country are seeing in this confirmation process is a judge who has a keen grasp of the law, a judge who understands the limits of power that are placed on the judicial branch, understands the role of the executive branch, understands the role of the legislative branch, and how he as a judge is supposed to rule when it comes to checking that balance of power.

We also see, of course, after 12 hours of questioning—everything from the kind of temperament he has to the kinds of decisions he would make—that he is an even-tempered individual who would serve this country well. So I come to the floor again to talk about my support for Judge Gorsuch.

Eleven years ago, this Chamber unanimously confirmed Judge Gorsuch through a voice vote for his position in 2006 on the Tenth Circuit Court. Judge Gorsuch has been described as a ''brilliant legal mind'' by the Denver Post and both liberal and conservative attorneys in Denver. He is a mainstream jurist who has the right temperament and the right view of judging in order to be on the Supreme Court, according to the Denver Post.

Moreover, Judge Gorsuch is a faithful and ardent defender of our Constitution, a judge who has, time and again, shown a fidelity to the separation of powers and the limited role of government that was envisioned and prescribed by our Founders.

It is no wonder that Judge Gorsuch has always enjoyed overwhelming bipartisan support. In fact, 12 of our current Senate colleagues, including minority leader Senator SCHUMER and

Senators LEAHY, FEINSTEIN, and DURBIN, all of whom are on the Judiciary Committee, were in office in 2006 when Judge Gorsuch was unanimously confirmed to the Tenth Circuit. None of them opposed his confirmation—none of them.

Perhaps the best question for them today would be: Do you regret that decision 11 years ago? Did you not do enough work to know the nominee then?

When Senator GRAHAM held his committee hearing 11 years ago—the confirmation process—no one else showed up. It was an empty dais. If you tuned in to watch C–SPAN on Monday or Tuesday, you saw a different level of participation from the Judiciary Committee. What a difference a court makes. So I hope this process is one that will be shown to be fair to the American people—this process of getting to know Judge Gorsuch's temperament and his legal philosophy, but not 1 of the 12 Democratic Members who are here today and who were here in 2006 voted against him in 2006.

The approval of Judge Gorsuch was also in addition to a few other colleagues who have since left. We were joined at that time—Judge Gorsuch was supported at that time by then-Senator Barack Obama, by then-Senator Joe Biden, by then-Senator Hillary Clinton, and, at that point, by Senator John Kerry, all of whom participated in the confirmation process of Judge Gorsuch 11 years ago and all of whom did not oppose his nomination on the floor of the U.S. Senate. It shouldn't come as a surprise, if you have been paying attention to the confirmation process, to watch a mainstream consensus pick for the Supreme Court answer questions. From when the hearings began—of course, just a couple days ago—I think, since then, we have seen overwhelming bipartisan support emerge publicly in the Senate, once again, and we will see that emerge over the next several weeks.

Several of our colleagues from across the aisle have already indicated they believe Judge Gorsuch deserves an up-or-down vote, and I hope that will continue. A fair shake in this process is what we are asking for. I wholeheartedly agree with my colleagues from across the aisle that he deserves a fair shake and an up-or-down vote. Let's give him that fair shake. Let's give him that up-or-down vote. Let's make sure the process remains fair, and let's give it in a timely fashion.

Let's also give the American people a fair shake. Let's not forget that Judge Gorsuch is their choice for the Supreme Court. The American people rejected the previous administration's nominee and instead chose Judge Gorsuch. We should respect the will of the American people.

Today, I would also like to speak about Judge Gorsuch's jurisprudence on the separation of powers and the administrative state. Under the previous administration, I, like many Coloradans and many of my distinguished Senate colleagues, grew worried as we watched continued administrative overreach. We watched 8 years of continued administrative overreach, agency overreach, and a judiciary that was ill-suited, or not inclined, to push back on the executive branch's unconstitutional overreach.

As James Madison warned us in Federalist No. 47, ''The accumulation of all powers, legislative, executive, and judiciary, in the same hands, whether of one, a few, or many, and whether hereditary, self-appointed or elective, may justly be pronounced the very definition of tyranny.''

It is, therefore, James Madison concluded, that the separation of powers must be a ''sacred maxim of free government.''

That is what we are seeing in this debate over the confirmation of Judge Gorsuch. Through his writing, Judge Gorsuch undoubtedly recognizes this sacred maxim of free government. The questions he is receiving and the answers he is giving talk about that sacred maxim of free government.

His body of work indicates, one, an understanding that there are clear constitutional limits to administrative agency power; two, it also demonstrates and illustrates a willingness to ensure agencies do not exceed their statutory authority; three, a genuine concern for the due process of regulated parties, which rightly requires these parties to receive clear notice on the scope of the regulations they must follow; and, four, a recognition that there are constitutional limits on the lawmaking responsibilities that Congress can delegate to the executive branch.

Remember, going back to the founding of our country and the arguments that took place over the type of government we should have, this Nation started first with the Articles of Confederation and this loose collection of States—States that were able to print their own money, States that were able to raise their own militia because they feared the power of tyranny; they feared the power of centralized government that the British monarch represented, but that loose Confederation wasn't working so our Founders realized they had to go back to the drawing board to come up with something different.

So in the late 1700s—1787, 1788—we saw this great debate break out published across the pages of papers in New York and throughout the country as the anti-Federalists and the Federalists began debating what kind of a government we should have. We had to recognize that too much government was a bad thing, but we also recognized that when we were too loose with that government, then it wouldn't function either.

So James Madison and others who had gotten together recognized that we should put forward a different type of government, and they did so in the Constitution, but they did it amongst guidance by people like James Madison and Federalist No. 47. They did so understanding that one branch of our government wouldn't gain an unfair advantage over another branch of the government.

As the years since that debate in 1789 took place, we have seen that there has been a mission creep, so to speak; that there has been a branch overreach, as the executive branch has grown in power at the expense of the legislative branch. I wish I could say that was all the fault of the executive branch, but it certainly hasn't been. At times, the legislative branch has yielded too much power and too much authority. Instead of doing its job, the legislative branch has given that authority to the executive branch. Of course, the executive branch hasn't just pushed it away, saying: No, don't do that. They have taken it. Both Republicans and Democrats, over the past several years, have done exactly that, but it has hurt our balance of powers, and it has hurt that very idea enshrined in Federalist No. 47; that we have to make sure the same hands don't hold all the power of government, leading to that maxim of free government.

So a judge who understands and who will rule that there are clear constitutional limits to administrative agency power is an important philosophy. It is an important approach that a judge would have. A judge who is showing a willingness to ensure that agencies don't exceed their statutory authority—we need that in our Nation's Court. We need that on our Nation's High Court to restore the balance of power. We need someone with a genuine concern for due process, someone who recognizes that there are constitutional limits on lawmaking responsibilities that Congress can delegate to the executive branch. That is why it is important we talk about the views of Judge Gorsuch and the questions he is being asked because his views are rooted in the Constitution—very mainstream rules that are rooted in the Constitution, mainstream views that should ease any concerns our colleagues on the other side of the aisle may have about Judge Gorsuch.

As Judge Gorsuch explained in his famous concurring opinion on the deference given to administrative agencies interpretations, the so-called Chevron doctrine, he said:

> We managed to live with the administrative state before Chevron. We could do it again. Put simply, it seems to me that in a world without Chevron very little would change—except perhaps the most important things.

That maxim of free government, that balance of power, the separation of powers, the limits on the administrative agency powers, it is something that I think we have to focus more time on, to restore the role we are supposed to play. We need to restore the role we are not just supposed to play but the role we are mandated by the Constitution to fulfill.

For these reasons, and many others I have shared on the floor, I look forward to working with my distinguished Democratic colleagues to make sure Judge Gorsuch gets that fair shake and that timely up-or-down vote and I certainly hope the bipartisan support he deserves.

Thank you, Mr. President.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The bill clerk proceeded to call the roll.

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

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

Ms. WARREN. Madam President, during his campaign, President Trump talked a big game about standing up for workers and creating good, high-paying jobs, but so far, the Republicans haven't voted on a single piece of legislation to create jobs, to grow our economy, or to increase wages for middle-class families—not one single piece, no votes to create jobs, grow the economy, or increase wages for middle-class families—but they have been voting.

Two weeks ago, Senate Republicans voted along party lines, 49 to 48, to make it easier for companies that get big-time, taxpayer-funded government contracts to steal wages from their employees. They also made it easier for those companies to injure their workers without admitting liability. Today, we are voting to make it easier for employers in the most dangerous industries to hide the most serious injuries and illnesses their workers suffer on the job.

This isn't some burdensome new regulation. Large employers in the most dangerous industries have been required to record serious illnesses and injuries their employees suffer on the job since 1972, a few years after the Occupational Health and Safety Act was first passed in 1970.

The rule Republicans are trying to overturn today simply clarifies an employer's obligation to maintain accurate, up-to-date records on workplace illnesses and injuries for 5 years. The Occupational Safety and Health Administration—or OSHA, as most of us call it—at the Labor Department has been enforcing this requirement in every administration since 1972, Democratic and Republican. OSHA uses these data to determine how best to prioritize workplace inspections. Since OSHA resources are so scarce, they have only enough money to inspect each workplace once every 140 years. So they kind of pick and choose where to focus these days to make sure they are targeting their inspections at industries and in occupations where workers are at the highest risk of injury. The Department also uses these reports to publish yearly statistics on the workplace hazards that kill 4,800 people and injure another 3 million people—American workers hurt and killed every year.

Data show employers already vastly underreport workplace injuries and illnesses, and without this rule, underreporting will skyrocket. It will get harder for OSHA to hold employers accountable when they cut corners and endanger worker safety.

Today's vote is great news for the Republicans who will rake in campaign contributions from their buddies at the Chamber of Commerce. It is great news for giant corporations that are lobbying hard against this rule, but it is not great news for hard-working Americans. The people did not send us to Washington to work for companies that plump up their profits by skirting safety regulations.

The problem? This is just the beginning. Last week, President Trump proposed cutting the Department of Labor's budget by more than 20 percent. These cuts will take cops off the beat and send a clear signal to employers that they can cut corners on safety with impunity.

President Trump also proposed eliminating a 1970 program at OSHA that gives grants to nonprofits and community organizations that provide free training for workers on how to identify and prevent job hazards that could injure or kill them. These programs work, and now President Trump wants to cut them. That would mean the end of successful worker training programs like the Brazilian Worker Center's program in Allston, MA, that provides residential construction workers with life-saving fall protection training. It also would cut funding for a Massachusetts Coalition on Occupational Health and Safety program in Dorchester that gives teens working in the retail sector training on how to prevent workplace violence, including sexual assault. Please note how important this is—200,000 young workers are the victims of workplace sexual assault every single year. This is a training program that was so successful that since it has been implemented, it has been replicated now nationwide. Yet the Trump administration wants to defund it.

Just yesterday, the Trump administration finalized a 60-day delay of a rule to protect 60,000 workers who are exposed to lethal, cancer-causing beryllium at work. This regulation saves about 100 lives every single year. Because the beryllium standards haven't been updated in 40 years, tens of thousands of workers are putting their lives at risk every single day. Americans who are exposed to beryllium on the job shouldn't have to wait another 60 days before they can get some protection so their jobs will not cause them lung cancer.

The pattern emerging is pretty clear. Republicans have no plans to improve the lives of American workers. Quite the opposite. Republicans are increasing the odds that workers will be injured or even killed.

When I came to the Senate floor 2 weeks ago to speak out against the repeal of the Fair Pay and Safe Workplaces Act, I said the debate on this vote was about whom Congress works for. Today's debate is no different. The Republicans are working for giant employers that don't want to follow the basic rules to keep their employees safe. This is shameful. This Congress should be working for the Americans who work for a living and just want to be able to do that without putting their lives at risk.

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

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

OPIOID EPIDEMIC

Mr. NELSON. Madam President, there has been a lot of conversation from so many of our fellow Senators about the opioid crisis that has been devastating individuals and families across the country. We heard this particularly in New Hampshire as it was a topic of discussion last fall during the election. It was an opportunity to bring to the Nation's attention—because of the eyes being focused first on the New Hampshire primary—of a real opioid crisis.

What we also then discussed was that it was not just affecting a few States, it was affecting most of the States. That is the case with my State of Florida. Addiction to opioids has reached staggering levels, and the situation is only getting worse. In 2015, more than 33,000 Americans died from prescription opioid overdoses. That is 15 percent more people than had died just the previous year. I don't have the figures for last year, 2016.

So Florida is right there in that national trend. What Florida saw between 2014 and 2015 was a 22.7-percent increase. It is staggering because in that year, Florida suffered over 2,000 deaths from opioid overdoses. Earlier this month, our office interviewed a woman from Florida for yesterday's Committee on Aging's hearing.

She is caring for her 7-year-old grandson because his mother lost custody, was later incarcerated due to her drug addiction. Sadly, this story is all too familiar. The number of grandparents serving as the primary caretakers for their grandchildren is increasing, as was the case with the lady from Florida who testified at the Committee on Aging hearing this week. They are primary caretakers for their grandchildren. It is, in large part, because of the opioid epidemic.

In addition to the devastating loss of life and the challenges for the new caregivers, opioid abuse is straining local and State budgets. Just last month, the vice mayor of Palm Beach County sent a letter to the Governor urging him to declare a public health

emergency in Florida citing the loss of life and financial impact—in this case to Palm Beach County.

Yesterday, several of my colleagues and I sent a letter to the majority leader of the Senate highlighting some of our concerns with the House of Representative's healthcare bill that I call TrumpCare and how it is going to impact those with substance abuse disorders because one of the things we are most concerned about is how the proposed changes in Medicaid that they are going to vote on at the other end of the hall—right down here tomorrow, they are going to vote on the House of Representative's healthcare TrumpCare bill.

The changes they make to Medicaid would prevent States from being able to respond to the opioid crisis because Medicaid plays a critical role in the fight against opioids, but changing the Medicaid Program to a block grant or a cap is going to shift costs to the States. The States are not going to pick up that additional cost. It is going to eliminate also some of the Federal protections, and it is only going to hurt our people who rely on Medicaid to help them as we are combating this opioid crisis because with less Federal funding, how are States like mine going to provide the necessary services to help individuals with substance abuse disorders?

Congress ought to be doing more to help with this crisis, not less. How many times have you heard a Senator, like this Senator, come to the floor and talk about the opioid epidemic? Yet we are just about to do it to ourselves if we pass this TrumpCare bill. Remember, last year, while so many of us, including this Senator, were early supporters of the Comprehensive Addiction and Recovery Act of 2016—it was signed into law last year. The law takes a comprehensive approach to this opioid problem.

A few months ago, a lot of us, including this Senator, voted to provide additional funding to start implementing this crucial new law to fight opioid addiction. Despite this progress, the House tomorrow—probably, tomorrow night—is about to pass legislation that would completely undermine last year's bipartisan efforts to respond to the epidemic and to undercut healthcare for millions of people in this country.

Opioid abuse is a deadly, serious problem, and we cannot ignore it. We should be investing more resources into helping these people and their families, not cutting them at the time we need them the most.

Again, I make a plea. We made progress last year with the law. We passed the new law. We made progress, giving some additional funding. The crisis hasn't gone away. We still need to respond.

But at the very same time, what we see happening to the Medicaid Program—eliminating Medicaid as we know it, healthcare for the people who are the least fortunate among us—is that we are about to cut back on all that progress we have made on this opioid crisis. I hope that we will think better of this and not do it to ourselves.

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

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

Mr. BROWN. Madam President, one thing has become clear in this country: Hard work just doesn't pay off like it used to. Over the last 40 years, GDP has gone up, corporate profits have gone up, and executive salaries have gone up all because of the productivity of American workers, but companies are not investing in their workers the way they did. Workers don't feel like institutions—whether it is government or big companies—work for them.

Again, GDP goes up, corporate profits go up, executive salaries go up, worker productivity goes up, but workers' wages do not. Actions like this today are the reason. Congress is voting to allow employers in our most dangerous industries to hide injuries to workers and to skirt worker protection laws.

This Occupational Safety and Health Administration, or OSHA, rule simply makes clear that it is the employer's responsibility to maintain accurate records of serious injuries that happen on the job. The rule simply makes clear that it is the employer's responsibility to maintain accurate records of serious injuries that happen on the job.

It doesn't impose new costs. It doesn't affect small business. What it does is it holds companies accountable for maintaining their own records, as they have done for 40 years. These records are the most important tool we have to identify and root out the most dangerous workplace hazards. They are the basis for national statistics on workplace health and safety.

Two former Commissioners from the Bureau of Labor Statistics—one from the George Bush administration and one from the Barack Obama administration—have written to this body, warning us that killing this rule could undermine nearly a half century of worker safety information.

So a leading Republican and a leading Democrat have both written to this body saying: Don't do this; it will mean more workplace injuries.

I know people around here who have these kinds of jobs—where workplace injuries rarely are even a fact of life—may not think about this enough. Pope Francis exhorted his parish priests to go out and smell like the flock. People in this body need to go out and talk to workers more. Go to union halls, go to workplaces, listen to what workers are saying, listen to what union members are saying, and listen to what nonunion members are saying about what these workplace safety rules mean.

Worse yet, this vote today will allow employers to falsify their safety records with impunity. Companies can avoid OSHA rules and inspections by underreporting—underreporting—harm to their workers, and they can avoid making a real investment to make their workplaces safer.

Over the past three decades, some of the worst offenders with dangerous workplaces hid injuries and kept fraudulent records. They hid injuries, and they kept fraudulent records. They claimed they were safe, while workers were being hurt on the job.

These requirements only apply to the most dangerous industries—industries where proper safety precautions could mean the difference between life and death or a permanent disability for these workers. We are talking about fall hazards, dangerous machines without proper guarding, workers handling dangerous chemicals without adequate washing stations.

Look at the poultry processing industry. These workers face serious health and safety problems. In many plants, workers process 140 chickens a minute, and they are at risk for disabling injuries.

Maybe people around here don't think much about people processing chickens. It is not a job that pays well. It is a job that is difficult. Frankly, people in this body don't know people who do those jobs, by and large. They are handling 140 chickens a minute. They are at risk for disabling injuries.

We eat the chickens, but we don't see what happens when they are processed, and we are not paying attention to that. That is why it is so important we not vote for this rule change.

Too many employers fail to report these injuries. If OSHA isn't empowered to enforce recordkeeping, processing plants will be able to hide their safety violations and expose their workers to crippling injuries.

This CRA vote today is about workers' safety, period. Workers' safety is something so fundamental that it is hard to believe we are arguing about it.

In the United States of America in 2017, companies shouldn't be able to put workers' lives and safety at risk just so they can make more money. They shouldn't be able to put their workers' lives and safety at risk just to make more money, and we shouldn't be part of that effort to help those companies do that.

To my colleagues who are prepared to gut this rule, I ask: Would you be willing to work these jobs? Would my fellow Senators be willing to send their children to work in these dangerous industries while turning a blind eye to safety rules?

I think we know what the answers to those questions are. This is why Americans are losing their faith in our institutions.

Earlier this month, at the Glenn School in Columbus—which is named after my good friend, the late Senator John Glenn—I rolled out a plan to reinvest in the American worker, but instead of coming together to work on solutions, the Senate today is going in the wrong direction. We are debating a measure to give big corporations—which in many cases are more profitable than they have ever been—more ways to exploit American workers, more ways to evade the consequences, and more ways to pad their profits at the expense of everyday Americans.

American workers aren't just a cost to be minimized. Protections for workers' safety aren't a luxury you can cut. It is disgraceful that this body fails to understand this.

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. TILLIS). Without objection, it is so ordered.

WE THE PEOPLE

Mr. MERKLEY. Mr. President, the most important words in our Constitution are the first three words, ''We the People.'' With those words, our Founding Fathers laid out the vision, the principles, and the foundation for our new Nation's government. It would be, as President Lincoln so eloquently described, ''a government of the people, by the people, and for the people.'' It would not be a government by and for the privileged. It would not be a government by and for the powerful. It would not be a government by and for the elite, and it certainly would not be an authoritarian government.

I believe it is more important than ever for us to recommit ourselves to that vision, a vision of a nation that measures successes, not at the boardroom table but at the kitchen tables of hard-working Americans across this land, the vision of a nation that derives its power and authority from the people.

In order to do that, we must resist President Trump's dangerous tilt toward authoritarianism. Throughout his candidacy and now within the walls of the White House, President Trump has viciously and repeatedly attacked the media. He has inflamed people's anger toward immigrants, toward religious minorities, toward refugees, and he has undermined or attacked individuals who publicly stand up to him and the shortcomings of his policies. These are four strategies used by authoritarian leaders from time immemorial to consolidate power. These are strategies that are incompatible with our constitutional ''we the people'' construction of government, and we must call out and resist these strategies.

President Trump's authoritarian leanings were there from the beginning. Like many figures throughout history, he rode into office as much on a cult personality as on the merits of his policies. It started with the nicknames and the unrestrained insults, calling opponents crooked and lyin' and phony, calling critics dumb as a rock, incompetent, crazy, or dishonest. He escalated the calls to toss out or hurt protesters at his rallies. At one point, he promised to pay the legal bills of a man arrested for punching a protester at a rally in North Carolina. Then there were the ''lock her up'' chants that he repeated himself, calling for imprisoning a political opponent. Threatening to throw your opponent in jail if you win is a strategy usually seen only with dictators.

Mr. Trump himself best summed up his populist cult personality when he said at one campaign event: ''I could stand in the middle of Fifth Avenue and shoot somebody, and I wouldn't lose any voters, OK?'' The scary thought is that he was probably not so far off the mark. This aggressive and unswerving loyalty is a challenge to our ''we the people'' democracy.

Let's take a look at Senior White House Policy Adviser Stephen Miller's declaration on Face the Nation last month. He said: ''Our opponents, the media, and the whole world will soon see as we begin to take further actions, that the powers of the President to protect our country are very substantial and will not be questioned.''

That is an interesting statement to make: The President's powers will not be questioned. What a bold, un-American, authoritarian statement to make because here in America, our Nation, our national government, is premised on the concept that we can challenge our leaders. It is not only a privilege, it is a responsibility. Yet Mr. Trump has repeatedly attacked this fundamental American principle and those who exercise it.

Take, for instance, his attack on freedom of the press. Demosthenes, an ancient Greek statesman, orator, and legal scholar of the third century B.C. once said: ''There is one safeguard known generally to the wise, which is an advantage and security to all, but especially to democracies as against despots—suspicion.''

What Demosthenes was saying is that in a democracy we don't take the statements of our political leaders simply at face value. We test those statements against the facts to find our way to the truth. In the United States, a free and open press is how we exercise that suspicion and find our way to the truth.

Thomas Jefferson believed that. He said: ''Our liberty depends on the freedom of the press.'' Our liberty depends upon the freedom of the press.

Benjamin Franklin echoed that belief when he said: ''Freedom of speech is ever the Symptom as well as the Effect of a good Government.''

John Adams wrote: ''The liberty of the press is essential to the security of the state.'' It is so essential, in fact, that the Founding Fathers enshrined our commitment to a free and open press to the very First Amendment to the Constitution, that ''Congress shall make no law . . . abridging the freedom of speech, or of the press.'' Yet what we have seen time and again from President Trump is an endless attack against the fourth estate, against the press. He said: ''The media is very unfair. They're very biased.'' He complained on FOX News last August.

He attacked the New York Times in that same interview, not for the first or last time, saying: ''You look at The New York Times, I mean the fail—I call it 'The Failing New York Times.' ''

Apparently any news story critical of the President is now ''fake news.'' He tweeted in February: ''Any negative polls are fake news.''

And when asked about leaks from the intelligence community during last month's press conference in the East Room, he said: ''The leaks are absolutely real. The news is fake because so much of the news is fake.''

His staff has gotten into the action, too, pushing at one point the Orwellian term, ''alternative facts.'' During an interview on NBC's Meet the Press, Kellyanne Conway said: ''Sean Spicer, our press secretary, gave alternative facts,'' and, in the administration, ''we feel compelled to go out and clear the air and put alternative facts out there.''

The White House has taken their fight with the media so far as to block access to outlets they disagree with, banning outlets such as CNN, POLITICO, the New York Times, and Los Angeles Times from an off-camera press briefing last month.

But of all of President Trump's relentless attacks against the media, the most disturbing to me was when he tweeted in February: ''The FAKE NEWS media (failing @nytimes, @NBCNews, @ABC, @CBS, @CNN) is not my enemy, it is the enemy of the American People!''

President Trump, I have a message for you: A free and open press is not the enemy of the American people. A free and open press is the salvation of our democratic Republic. It is an essential warrior in our Republic against fake news, charlatans, and those who would use fake news and attacks on the press to advance authoritarian government.

I thought my colleague from Arizona, Senator MCCAIN, made a very apt analysis when he said that suppressing free speech is how dictators ''get started . . . when you look at history, the first thing that dictators do is shut down the press.'' Senator MCCAIN went on to say: ''If you want to preserve democracy as we know it, you have to have a free and many times adversarial press.''

So this is a major concern, this attack on the media, and particularly an attack on news organizations that work to vet their reporting before they

share it with the American people. In other words, we are in the ironic situation that the very groups under attack by President Trump are the groups that work hardest to get true facts, actual facts, vetted facts, carefully fact-checked information to the American people. That is the foundation for a national dialogue: carefully vetted information so that we know when we read it, it is reliable. That is the type of news we need more of in this Nation.

Mr. Trump's authoritarian tactics aren't just limited to his war on the media. His second approach is to attack and scapegoat immigrants, religious minorities, and refugees ever since he stood in the lobby of Trump Tower and said:

> When Mexico sends its people, they're not sending their best. . . . They're bringing drugs. They're bringing crime. They're rapists.

Since then President Trump has made it his mission to turn the American people against Mexican immigrants, to make them the enemy. He has talked about the ''bad hombres'' flooding across our southern border, stealing our jobs, committing crimes, and murdering American citizens. In his mind, the people coming from Mexico are all dangerous, violent cartel members transporting an endless supply of drugs across our country in order to ruin America. But this storyline is completely at odds with the facts. First, drug cartels do not ship their products into our country through the backpacks of immigrants.

Recently I traveled with a congressional delegation to the U.S.-Mexico border to examine this issue. The experts on the border told our delegation that drugs come into the United States through freight, in trucks, and through tunnels—not through backpacks. What this means is that a proposal to build a wall, whether it is 20 feet high or 30 feet high, will be absolutely useless in diminishing the flow of drugs into our country.

I will tell you what else they told us. They said that an end zone defense does not work against drugs. If you want to stop the flow of drugs, you have to work carefully with regard to everything from the moment they are being manufactured or shipped into Mexico until they migrate north. That means you have to work in close cooperation with the security agencies of Mexico, with the police, and with the intelligence agencies of Mexico. That cooperation requires a very close coordination between respected partners, and disrespecting the partners of Mexico is the best way to damage the ability to intercept drugs that are coming into the United States.

We also know that the underlying premise of there being a flood of Mexican immigrants coming into our country is false. A 2015 study from the Pew Research Center found that between 2009 and 2014, there was a net outflow of 140,000 Mexican immigrants from the United States. They were migrating from the United States to Mexico, a net outflow. A more recent Pew Study determined that the number of undocumented Mexican immigrants in America has declined by more than 1 million since 2007. If you take the span during the Obama administration, there was an outflow, not an inflow—the exact opposite of the story line the President is presenting.

What about those violent crimes being committed by undocumented criminals? The data does not support the President. In fact, the New York Times reported that ''several studies, over many years, have concluded that immigrants are less likely to commit crimes than people born in the United States.'' Between 1980 and 2010, among men aged 18 to 49, immigrants were one-half to one-fifth as likely to be incarcerated as those born in the United States.

When you look closer, the attacks on immigrants fall apart, as I have pointed out, but that is what authoritarian leaders do. They create a false enemy, and they use the perception of that enemy to generate hate and fear. They use that hate and fear to consolidate power. It is our responsibility as citizens, as the press in the United States, and as legislators to resist this authoritarian strategy of President Trump.

Another of his strategies is to attack religious minorities in our country and abroad. Take for instance his pledge on the campaign trail for a ''total and complete'' shutdown on Muslims entering the United States. As we know, Mr. Trump followed up on this approach after the election by asking Rudy Giuliani to help fashion a legal Muslim ban.

During a FOX News interview, Mr. Giuliani said:

> Trump called me up. He said, Put a commission together. Show me the right way to do it legally.

To attempt to meet constitutional muster, Trump aimed his ban at immigrants from seven Muslim-majority nations.

Rudy Giuliani went on to say in that same FOX News interview:

> What we did was we focused on, instead of religion, danger—the areas of the world that create danger for us, which is a factual basis, not a religious basis. Perfectly legal, perfectly sensible. And that's what the ban is based on.

But, as William Banks, the director of the Institute for National Security and Counterterrorism at Syracuse University, observed, ''Since 9/11, no one has been killed in this country in a terrorist attack by anyone who emigrated from any of the seven countries.''

The President's own Department of Homeland Security recently reported that citizens from the countries listed in the Muslim ban are ''rarely implicated in U.S.-based terrorism.'' In fact, the report concluded that individuals who died in the pursuit of or who were convicted of terrorism were far more likely to be U.S.-born citizens than to be immigrants.

Here is the great irony and the tragedy of President Trump's effort to demonize Muslims: Instead of protecting the United States, he is damaging the security of the United States. His attacks feed perfectly into and therefore strengthen ISIS's recruiting strategy of claiming that the United States is at war with Islam. Video of his speeches and public statements, especially Trump's call for a Muslim ban, has already been featured in ISIS's recruiting tools. In addition, it weakens the Muslim leaders we are seeking to partner with in taking on ISIS. It undermines those leaders' support from their own countries in their cooperating with the United States.

Trump's strategy does double damage to American security, and I wish his impact against religious minorities stopped there. I wish it stopped long before there because it is incompatible with the fundamental premise, the fundamental values of the United States of America, which is religious freedom. Yet, throughout the course of his campaign, he gave voice time and again to the views and opinions of White nationalists and anti-Semites. He did not directly attack the Jewish community, but his White nationalist rhetoric and actions have had the effect of doing it indirectly. When he needs news or information, he turns to the White nationalist Breitbart News—a fake news source which has infamously attacked American Jews with stories like ''Bill Kristol: Republican spoiler, renegade Jew'' and another one that attacked Anne Applebaum of the Washington Post, which read: ''Hell hath no fury like a Polish, Jewish, American elitist scorned.''

But President Trump does not just tap into the Breitbart White nationalist themes; he brought the former executive chair of Breitbart, Steve Bannon, into the White House as his chief strategist and then appointed him to the Principals Committee of the National Security Council. This individual has no business being anywhere near the Capital of the United States and certainly not on the Principals Committee of the National Security Council. Bannon is a man who has not only been embraced by White supremacists for his views, but according to testimony from his ex-wife, he has said he does not want his children going to school with Jewish kids and had once asked a school administrator why there were so many Hanukkah books in the library.

If you think this theme has not had a real effect on our country, you are wrong. When Donald Trump was elected, the KKK and other White nationalist groups celebrated. They felt free to come out of the shadows. They felt bold enough to hold an annual White nationalist conference right here in Washington, DC, at the Ronald Reagan Building, steps from the White House, because they finally felt like they had one of their own in the Oval Office.

These nationalist groups are so emboldened that we have seen more

than 100 bomb threats called in to Jewish community centers around the country since January. We have witnessed the desecration of Jewish headstones in cemeteries in St. Louis and in Philadelphia.

Last month the President, speaking to a roomful of State attorneys general, said he condemned these threats. I applaud him for condemning them. But then he turned around and said: ''You have to be careful, because the reverse could be true.'' What did he mean by that? Commentators have suggested that the President meant by ''the reverse could be true'' that the bomb threats, the Swastika graffiti, and the desecration of Jewish burial sites might actually be the work of Jewish Americans to generate criticism of President Trump. There is no evidence of that, and I certainly do not believe it to be true. What I do believe is that a ''blame the victim'' tactic is reprehensible and in itself an anti-Semitic strategy.

The President has also dedicated a significant amount of time to trying to make the country fear refugees, to demonize refugees. Many of us grew up in a world in which Lady Liberty's words of ''give us your tired, your poor, your huddled masses yearning to breathe free'' stirred our hearts because, unless you are 100 percent Native American, you are tied in through your parents, your grandparents, your great-grandparents, your ancestors. You are tied to those who immigrated to the United States, who came here, often fleeing persecution, often fleeing famine. This Nation gave them a place to stand and in which to build a new life and thrive and hand down a better, stronger nation to their children. That is a property of our history. That is a value deeply rooted in our hearts.

The President, instead, has dedicated his energy to attacking refugees, those, like our ancestors, who came here, fleeing persecution and fleeing famine, especially Syrian refugees, who are fleeing for their lives in search of a safe haven. He has falsely claimed they represent a ''great Trojan horse'' that threatens the safety of Americans. Mr. Trump says these victims of war have to be subjected to extreme vetting because we have no idea who these people are or where they come from. The fact is that we do know who they are. We know exactly where they come from because before they can come here as refugees, they already go through extreme vetting. It takes 18 months to 2 years of vetting, on average, before refugees are given tickets to come to the United States of America, and if at any point during that 18 to 24 months something does not add up, they do not get the tickets.

Now, if ISIS or another terrorist organization wants to get people who are dangerous into our country, they do not go through an 18- or a 24-month vetting process. No. They come on tourist visas or student visas or business visas. Going through the refugee process would be the worst possible way to do it.

As an analysis by the Migration Policy Institute reminded us in October of 2015, of the 784,000 refugees who have been resettled in our country since September 11, 2001, 3 have been arrested for planning terrorist activities. None of them got past the planning phase, and only one of those three was talking about potential attacks here in the United States. The others were talking about sending money and weapons to al-Qaida. In other words, no one has been injured by those 784,000 refugees.

These are just some of the pieces of the President's authoritarian strategy to demonize groups, to create hate, to create fear, and to try to consolidate power. As a result of his activities, we have seen waves of hate crimes and violence and bigotry sweep across our Nation.

Latino and Latina students in our schools and in our classrooms have been forced to confront classmates' bullying and taunts, chants of ''build the wall'' and ''go back to your country,'' and graffiti sprayed on walls to ''build the wall higher.''

We have heard reports of verbal and physical attacks against people of the Muslim faith.

A woman at San Jose University lost her balance and choked when a man attempted to rip off her head scarf.

A Muslim student at the University of Illinois Urbana-Champaign campus reported having a knife pulled on her.

A Muslim teacher in Georgia found left on her desk a note that read that a head scarf is not allowed anymore and that she should hang herself with it.

Within the last 8 weeks, four mosques around the country have been burned to the ground.

Just recently, a man in Kansas went into a bar, hurled ethnic slurs at two Indian engineers, and shot them, killing one and seriously injuring the other.

As I mentioned earlier, since January, there have been more than 100 bomb threats against Jewish community centers.

Throughout history, we have seen this tactic used by an executive here, an executive there, by a dictator here, a dictator there, in country after country, to characterize minority communities as a threat to be feared in order to make the body politic afraid, to make them angry, and to make them willing to support authoritarian exercise of power.

What is our job? It is our job to expose this strategy, to call attention to this strategy, to address the myths that are used to instill fear and the falsehoods that are used to instill hatred. It is our job to oppose this authoritarian game plan in every way possible.

The third leg of President Trump's authoritarian attacks are ones that go against public opposition to him and attack the protests of the people of the United States. What was the President's response after millions of people in cities all around the country—and all around the world, for that matter—joined the women's march to stand up for the fundamental values of peace, tolerance, and equality? His response was a rebuke and a dismissal. He tweeted:

> Watched protests yesterday but was under the impression that we just had an election! Why didn't these people vote?

Well, President Trump, they did vote, and they all voted overwhelmingly for your opponent, by a 3 million-vote margin.

We saw similarly disparaging responses from Republican lawmakers like the Facebook post from a State Senator in Mississippi who said:

> So a group of unhappy liberal women marched in Washington, D.C. We shouldn't be surprised; almost all liberal women are unhappy.

After countless citizens around the country began showing up at townhall meetings to make their voices heard, what was his response? He dismissed these engaged citizens as ''so-called angry crowds,'' and then he tweeted: ''Professional anarchists, thugs and paid protesters are proving the point of the millions of people who voted to make America great again!''

I have held a lot of townhalls since January, many of them filled beyond capacity with regular citizens who are deeply distressed by what they are seeing in our country. At one townhall, more than 3,500 people showed up. We had so many people that the hundreds of folks who couldn't get in had to stand outside the building in the cold, listening. We took a speaker and put it in the window so those outside could hear, and they watched through the windows.

This is ''we the people'' government. This is American citizens saying: Your strategy, President Trump, is not OK. Your strategy to divide us into factions in America and to pit one faction against another, to demonize groups, to incite hate is just wrong.

I find it truly disheartening to see the President attacking citizens exercising their voice, which is often the most basic civic duty.

President Jefferson said there is a mother principle for our government, and the mother principle is that the actions of the government will only reflect the will of the people if each and every citizen has an equal voice. We know, in the modern day of campaign financing, some citizens and, indeed, often some noncitizens—that is, massive rich corporations—have a very loud voice compared to the average citizen. So citizens, to compensate, are saying: We are going to show up. We are going to take our time and our energy and we are going to join together and we are going to send a lot of emails to Capitol Hill, a lot of letters to Capitol Hill, but we are also going to show up in the parks and the streets to

march in order to say this strategy, this authoritarian strategy, or this strategy to take away healthcare from millions of Americans is absolutely unacceptable. And the President somehow is living in a fantasy world where he thinks they are paid? I don't think so. I don't think this last weekend, when 800 people showed up at Redmond, OR, to my townhall, that a single one of them was paid—not a single one.

When we look across the country and we see the 7-year-old who wanted to be at a townhall because he doesn't want us to cut funding for PBS in order to build a wall, he wasn't paid, or the Muslim immigrant who risked his life for our Nation in Afghanistan as a military interpreter and now wants to know ''Who is going to save me here,'' he wasn't paid.

American citizens are using their voice as designed in our ''we the people'' Constitution, but in the mind of our President and in the words of his adviser, Stephen Miller, his powers are very substantial and will not be questioned, not even by the citizens and voters of this great Nation.

Well, they are being questioned, massively, by citizens raising their voices in every possible way.

American citizens everywhere are deeply disturbed by what they are seeing unfold in our Nation. They fear we are headed down a dark and dangerous path that will betray the founding principles of our ''we the people'' government, and they have every right to be anxious and concerned.

There have been allusions made by a number of experts to Mr. Trump's actions and the early days of Vladimir Putin's regime and especially his relentless war with the media. All of these are reasons citizens are fired up, raising their voices to oppose the authoritarian tactics of this administration.

While the President seeks to dismiss the legitimacy of these voices, I stand here today to praise those Americans for standing up, for taking on their responsibility as citizens to create a powerful, courageous chorus, a public stand against the authoritarian strategy of President Trump—his strategy of attacking the media, his strategy of attacking immigrants, his strategy of attacking refugees, and his strategy of attacking religious minorities.

A friend sent me a message the other day saying:

> I'm more devastated daily. I can't believe the Republicans are not stopping this, saying something. How can this be happening? Don't the Republicans see what's happening? I weep for my kids.

Millions of Americans across the country are feeling those same fears. It is up to all of us here, imbued with the awesome responsibility to speak for and represent the people of this Nation, to stand up against advancing authoritarianism. It is right for us to fight for a free, open democratic republic, with a ''government of the people, by the people, for the people.''

Mr. President, I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER (Mr. SULLIVAN). The clerk will call the roll.

The bill clerk proceeded to call the roll.

Mr. BLUMENTHAL. 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. BLUMENTHAL. Mr. President, I am here in the midst of a Judiciary Committee hearing on Supreme Court nominee Neil Gorsuch, showing, and in a way showcasing, the wonder of American justice. This hearing will proceed through the balance of the day with him as our witness, and then into tomorrow with others who will comment on his qualifications.

The showcasing of American justice really demonstrates how the rule of law serves our democracy and how we strive to appoint the best possible people—men and women, dedicated public servants—to the courts of our land to assure that the rule of law and American justice are second to none and as infallible in protecting individual rights as they can possibly be.

In a sense, I am here to talk about a rule that also serves American justice. It is a rule put forward by the Occupational Safety and Health Administration under the last administration. I am here to oppose H.J. Res. 83, which would repeal that rule. The rule is known as the OSHA injury record-keeping rule. It sounds very technical, obscure, and for most people it is, but there are nearly 3 million serious injuries reported every year at American workplaces.

For over 40 years; that is, four decades, Federal law has required employers with 11 or more employees in dangerous professions—poultry slaughtering, meat packing, steel mills, construction—which see the bulk of these injuries to keep active records of injury suffered in those workplaces and others like them that are considered dangerous.

Having accurate records is common sense for employers who want to know what is going right in their places of work and what is going wrong and how they can prevent workers from being hurt on the job because they don't want anybody hurt. Responsible employers want safe workplaces. It is really that simple. We all know injuries are bad for business and they cost time and money.

With those records, OSHA can also investigate companies and work to make them safer and ensure they comply with the law. In essence, they can look at the outliers—who are lawbreakers, who cares less about safety than profits—but also maybe employers who don't do as much as they could or would if they were better informed.

A misguided court ruling in 2012, after 40 years of the law prevailing, curtailed OSHA's ability to sanction employers concerning those records. The ruling limited OSHA's ability to sanction employers to just 6 months of the start of the investigation based on the records. Soon after that ruling, OSHA and the Obama administration discovered it could not adequately investigate employers who provided an unsafe workplace, making them effectively immune from some safety laws.

After going through all the proper rulemaking, all of the steps that are necessary to make an administrative rule, all the channels and procedures, the last administration put forward a rule that responds to the court decision and allows OSHA to review those records for 5 years. That is essentially how things worked for 40 years. It worked well for 40 years, and it was simply reinstituted because the court decision was so crippling to the rule of law and American justice. That is the rule we are discussing today—a return to longstanding policy that existed for decades under Republican and Democratic administrations, dating back to the Presidency of Richard Nixon.

Putting aside the 40 years' worth of this rule working well, it does some very important things. It requires these large employers in dangerous industries to keep accurate records of serious work-related injuries and illnesses. It has no impact on a huge swath of the economy that is not considered dangerous. It doesn't apply to restaurants, offices, and many other workplaces, regardless of the number of employees they have; the rule impacts just the most dangerous industries in our economy and companies in that industry with more than 10 employees. It essentially prevents them from covering up injuries, maintaining fraudulent records concerning injuries, and willfully violating the law.

There are things the rule does not do. It imposes no new costs on employers. It imposes no new obligations. It simply returns to a policy that worked well for decades—I repeat, under both Democratic and Republican administrations, accepted by both—and it gives certainty to businesses. That is one of the great advantages in an economy and society where certainty for our job creators is very valuable.

Repealing this rule would lead to more dangerous workplaces and give unsafe companies an upper hand in competition. It would unlevel the playing field between the good guys and the bad guys in those industries. This rule would essentially eliminate requirements that employers keep proper records, as they know OSHA can do nothing to investigate. Repeal of the rule amounts to the Federal Government siding with the companies that see injuries on the job but in effect sweep them under the rug. Repeal promotes companies to keep false records—if they keep records at all—limiting enforcement and punishment of anyone who keeps two sets of books, which few would do. Repeal of this rule undermines companies that keep safe

workplace records and are in competition with companies that are cutting corners. This has implications for taxpayers. Many procurement processes seek information about companies' safety records, giving a leg up to the safer company, as should be the case. That is in taxpayers' interests. Repeal of the rule would take away this incentive to protect employees.

Repealing this rule is bad for taxpayers, is bad for Federal policy, particularly in those areas where the Federal Government is a purchaser and a consumer, because it deserves to know—and so do we all—which ones are the safe employers.

Former Obama and Bush administration officials oppose repeal of this rule. Dozens of health and safety groups warn against the spike in injuries that repeal may encourage in work-related injuries and illnesses. Labor organizations representing millions of workers nationwide and many Fortune 500 companies oppose this resolution and support the rule. Health and safety groups, labor organizations, Fortune 500 companies, and officials from the past two administrations all support the rule and oppose this resolution. It is truly bipartisan.

I urge my colleagues to unite across the aisle and resist the false and unfortunate arguments that are made in favor of this resolution. I urge colleagues to join me in opposing it because it will endanger workers in the most hazardous places in the workplace and the country.

Mr. President, I yield the floor.

Mr. FRANKEN. Mr. President, I rise today in opposition to a resolution that will roll back nearly 45 years of OSHA workplace safety enforcement precedents. We would be reversing a precedent that helps ensure every American worker heads homes safely at the end of their shift.

This resolution is an effort by my Republican colleagues to overturn a rule issued by OSHA on December 16, 2016, entitled, ''Clarification of Employer's Continuing Obligation to Make and Maintain an Accurate Record of Each Recordable Injury and Illness.'' As the title says, this rule provides employers with clarification on the requirements to timely report and record workplace injury and illnesses. This rule adds no new employer requirements that differ from 45 years of policy. The rule supports a practice that law-abiding businesses comply with and have operated under since passage of the Occupational Safety and Health Act of 1970. Passing this resolution and repealing this rule only creates a safe harbor for businesses that have broken the law in the last 5 years or don't intend to follow longstanding rules created to protect the safety and health of workers.

For nearly the last 45 years, OSHA has required employers, with the exception of small employers, to timely report workplace injury and illnesses to the Department of Labor and maintain a record of such incidents going back at least 5 years. If an employer failed to do either, they could be cited and penalized. OSHA's rule issued last December simply maintains this longstanding practice.

This resolution aims to change that record keeping requirement, or lookback period, from 5 years to 6 months. So if an unscrupulous employer fails to report a worker injury or illness and OSHA doesn't discover the underreporting and cite the employer in the first 6 months after the incident occurred, the employer is able to get away with it and the data used to identify dangerous industries or worksites is lost.

Accurate injury and illness records are critical for the protection of workers and for OSHA to direct the most efficient use of their limited resources, and the more data they have, the better. With their current resources, OSHA is only able to inspect a workplace, on average, once every 140 years. That is clearly not sufficient, especially when over 4,800 workers were killed in 2015 and almost 3 million more suffered a serious workplace injury or illnesses. The OSHA reporting rule is critical for OSHA to conduct a thorough investigation, enforce accurate recordkeeping requirements, and focus limited resources on industries and bad actors that pose the greatest risk to worker safety.

Take, for instance, the Exel Corporation, a Pennsylvania warehouse and trucking company, which hired hundreds of foreign students on temporary visas, and was cited for numerous unrecorded injuries after some students were seriously injured on the job. Only after students fought for fair pay and safer working conditions and OSHA was able to conduct an investigation was it revealed that, for years, the company had withheld wages and willfully failed to record about half the serious injuries to student workers as well as other serious health and safety violations.

By the time DOL had completed their lengthy investigation, the Wage and Hour division recovered over $200,000 in wages withheld from 1,028 foreign student workers. OSHA cited the company for dozens of unrecorded injuries, all of which occurred over the 6-month period before OSHA issued the violations, and a penalty of $283,000. About two-thirds of the $283,000 penalty was for unrecorded violations that occurred outside the 6-month statute of limitations window this CRA is proposing to codify.

In response, the Exel Corporation accepted all the penalties, agreed to pay half the total fine, and instituted a new corporate-wide program to fix their recordkeeping practices which added safety protections for roughly 40,000 workers at over 500 facilities nationwide.

None of those violations and the associated fine would have been allowed if a narrower 6-month statute of limitations was in place as this resolution proposes to do. I think it is safe to say that Exel's new corporate-wide program that added protections for 40,000 workers in 500 facilities nationwide would not have been implemented either.

Efforts to repeal the OSHA reporting rule and 45 years of OSHA enforcement precedent, without even a hearing or vigorous debate, is reckless and runs contrary to any proworker vision. The change in longstanding OSHA precedent was prompted by a DC Circuit Court ruling in the 2012 Volks Constructors v. Secretary of Labor case. After that decision, OSHA revised its recordkeeping regulation to conform with guidance provided in a concurring opinion. If there is a legal disagreement regarding the authority of OSHA to cite employers for continuing violations, we should let the legal process conclude before any congressional or legislative action is taken.

The OSHA reporting rule is a fair occupational safety standard, and that is why every administration in the last 45 years, Democratic and Republican, has enforced the requirement this rule clarifies.

Opponents of the OSHA reporting rule and supporters of this CRA resolution claim that the OSHA rule would extend the statute of limitations on recordkeeping paperwork violations and that this CRA resolution is necessary to protect jobs, eliminate burdensome regulations and protect small business. None of that is accurate.

The OSHA reporting rule does not kill jobs; it creates no new employer obligations that are different from what they were required to uphold for nearly 45 years. And the rule does not cover small businesses.

What the rule does do is save employers from killing and maiming workers. It gives OSHA the tools it needs to identify dangerous industries, reckless employers, as well as punish those who break the law at the expense of worker health and safety and businessowners who obey the law.

No law-abiding business, which values the safety of its workers and the information used to make the workplace even safer, should be at a competitive disadvantage facing a competitor that underreports injuries and cuts corners at the expense of workers' safety.

The safety of the American worker and a level playing field for law abiding employers should not be a partisan issue. I encourage my colleagues on both sides of the aisle to join me, working Americans, and the millions of law-abiding businesses that strive to create a safe workplace and oppose this resolution. Vote no on H.J. Res. 83.

Mr. VAN HOLLEN. Mr. President, last year, the Occupational Safety and Health Administration clarified employers' continuing duty to keep records of work-related injuries and illnesses. Today the congressional majority is using the Congressional Review

Act to both repeal this rule and prevent OSHA from doing anything similar. I support the rule and oppose the resolution to repeal it.

In 1970, Congress found that workplace injuries and illnesses result in lost production, lost wages, medical expenses, and disability compensation payments. In response, Congress enacted the Occupational Safety and Health Act of 1970 to ensure that employers provide workers with safe and healthful workplaces.

To carry out the law, Congress directed the Secretary of Labor to issue regulations requiring employers to make and maintain accurate records of work-related injuries and illnesses. In the legislative history of the law, the House Committee on Education and Labor found that State reporting requirements varied widely and concluded that Congress had an ''evident Federal responsibility'' to provide for ''accurate, uniform reporting standards.'' The report of the Senate Committee on Labor and Public Welfare found that ''full and accurate information is a fundamental precondition for meaningful administration of an occupational safety and health program.''

In 1971, OSHA issued its first recordkeeping regulations. OSHA revised these regulations in 2001 to make the recordkeeping system easier to use.

OSHA's recordkeeping regulations require employers to keep records of certain injuries and illnesses in the workplace and to make that information available to employees, OSHA, and the Bureau of Labor Statistics. Employers must record work-related injuries and illnesses resulting in death, loss of consciousness, days away from work, restricted work activity or job transfer, medical treatment beyond first aid, or a diagnosis of a significant injury or illness by a doctor or other healthcare professional.

Accurate injury and illness records give employers information that they need. The records make employers more aware of the kinds of injuries and illnesses that occur and the hazards that contribute to them. That allows employers to identify and correct hazardous workplace conditions. Injury and illness records thus help employers to manage workplace safety and health more effectively.

Similarly, injury and illness records give workers information that they can use. Workers who are aware of the hazards around them are more likely to follow safe work practices and to report workplace hazards. That contributes to the overall level of safety and health in the workplace.

As the UAW said in its letter opposing the resolution to disapprove of the rule: ''Accurate injury and illness records are critically important for workers and their families. Having the necessary tools to collect complete and accurate data on work-related injuries and illnesses is a key component in reducing, mitigating, and eliminating hazards and deaths in the workplace.''

Injury and illness records give OSHA an important source of information for smart enforcement. The records allow OSHA to focus its inspection on the hazards that the data reveal. The records allow OSHA to help identify the most dangerous types of worksites and the most common safety and health hazards.

As the American Public Health Association wrote: ''Public health professionals understand the critical importance of accurate information to help identify hazards in order to develop and implement better health and safety protections. One important source of that information is the records some employers are required to keep on work-related injuries and illnesses. These records are invaluable for employers, workers and OSHA to monitor the cause and trends of injuries and illnesses. Such data is essential for determining appropriate interventions to prevent other workers from experiencing the same harm.''

In 2012, in the case of AKM LLC doing business as Volks Constructors v. Secretary of Labor, the U.S. Court of Appeals for the District of Columbia Circuit held that the law does not permit OSHA to impose a recordkeeping obligation on employers that continues beyond the expiration of the law's 6-month statute of limitations. While OSHA disagreed with the court's ruling, it agreed that its recordkeeping regulations needed clarification. So OSHA issued its rule amending its recordkeeping regulations to clarify that the duty to make and maintain accurate records of work-related injuries and illnesses is an ongoing obligation. OSHA made clear that the duty to record an injury or illness continues, as long as the employer is required to keep records of the recordable injury or illness and does not expire just because the employer failed to create the necessary records when it was first required to do so.

The new rule adds no new compliance obligations. It does not require employers to make records of any injuries or illnesses for which records are not currently required to be made.

The rule clarifies that, if an employer fails to record an injury or illness within 7 days, the obligation to record continues on past the 7th day. If the employer records the injury on some later day, the violation ceases at that point, and OSHA would need to issue any citation within 6 months of the cessation of the violation.

Every Presidential administration since 1972 has supported OSHA's interpretation of the law.

Repealing the rule would lessen OSHA's enforcement ability. It would allow employers to get away with systematic underreporting of injuries over many years, and it would decrease worker safety.

As the AFL-CIO wrote in its letter opposing the resolution: ''Without the new rule, it will be impossible for OSHA to effectively enforce recordkeeping requirements and assure that injury and illness records are complete and accurate. In the absence of enforcement, there is no question that the underreporting of injuries, already a widespread problem, will get much worse, undermining safety and health and putting workers in danger.''

And as National Nurses United wrote: ''By revoking OSHA's authority to enforce recordkeeping requirements, this Congressional Review Act (CRA) resolution denudes the agency of the tools necessary to identify and target patterns of workplace hazards . . . . The elimination of OSHA's ability to enforce rules on workplace safety records allows—and even incentivizes—employers to obscure ongoing workplace hazards.''

Good decisionmaking relies on good information. OSHA's regulation helps to ensure that employers keep good records. The pending resolution to repeal that rule goes in the wrong direction, and thus I oppose the resolution and urge my colleagues to vote against it.

Mr. BLUMENTHAL. I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

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

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

Mrs. MURRAY. Mr. President, when President Trump was running for office, he made a lot of promises to the American people. He promised the middle class he would stand up for them. He promised workers he would bring good jobs back to their communities, and he promised to drain the swamp of corporate lobbyists that muck up our democracy with dysfunction.

Well, we are just over 2 months into this Presidency, and all we have seen from this administration is a series of broken promises, whether it is Cabinet picks who are billionaires, Wall Street bankers, and corporate CEOs; or his plan to jam through a healthcare bill that the President himself admits will hurt middle- and working-class families; or his proposed budget, which guts everything from job-training programs to assistance for low-income families who pay their heating bills, to meals on wheels, which provides hot meals to low-income grandparents. It is clear President Trump is standing with his billionaire and corporate lobbyist friends at the expense of the people he promised to stand up and fight for.

While we have made many improvements in our economy in the last 8 years, we have a lot of work left to do. Too many people in our country today are working multiple jobs trying to support their families and pay their bills, and they are still struggling to make ends meet. That is what we should be talking about today on the

Senate floor—how to build an economy that works for everyone. We should be working together to make sure that people are making a decent wage to support their families, that corporations aren't getting rich at the expense of their workers, and that hard-working people aren't risking their lives in dangerous conditions at work.

Instead, what we are doing today is that my Republican colleagues, with the backing of President Trump, are trying to roll back a rule that protects workers and prevents work-related deaths and injuries. This rule allows the Occupational Safety and Health Administration, or OSHA—an agency whose sole purpose is to keep workers safe on the job—to accurately monitor and prevent workplace injuries and fatalities in our Nation's most dangerous industries.

Dangerous businesses have been recording serious workplace injuries and deaths for more than four decades, and this rule simply affirms the policy enshrined in the OSHA law itself of 1970 that these records have to be accurate—a precedent of keeping workers safe and monitoring dangerous workplaces.

After a recent court case put this important safety practice at risk, OSHA issued this rule to clarify their recordkeeping practices. This rule is not new. It does not impose added obligations or costs on employers, and it was actually suggested by the court in its decision. And it does not cover small businesses with 10 employees or fewer.

We should be trying to make workplaces safer, but in rolling back this rule, President Trump and my Republican colleagues are doing exactly the opposite. This is not something we should be playing politics with. Without this rule—if it is overturned today by the Senate Republicans—some of the most dangerous industries will then be able to hide worker injuries and keep falsified records of injuries and workplace deaths, and it will make it more difficult for OSHA to punish low-road companies that are putting their workers' lives in danger.

Every year, more than 4,800 workers are killed on the job in America, and 3 million more suffer serious injuries and illnesses. We have found that it is often the same companies that are repeat offenders. Without this rule, OSHA cannot sanction employers for keeping fraudulent injury records for multiple years before OSHA walks in the door to conduct an inspection.

So many people in this country get up every day and go to work at tough, dangerous jobs to support their families and drive the economy. Those workers deserve to be able to trust that their employer isn't knowingly putting their life at risk. Without this rule, corporations and dangerous industries can take advantage of their workers, and OSHA will not have the tools it needs to stop it. We should not overturn this rule. If we do, recordkeeping will become elective.

This goes against everything President Trump promised to middle- and working-class families on the campaign trail. He promised to stand up for them, to bring back good, respectable jobs to their communities. Instead, he wants to allow his billionaire corporate friends to take advantage of workers and threaten their safety, and, unfortunately, it appears my Republican colleagues are now onboard.

Instead of doing President Trump's bidding, I urge my Republican colleagues to do what President Trump promised and start putting workers first by abandoning this deeply harmful effort.

I yield the floor.

I suggest the absence of a quorum.

The ACTING PRESIDENT pro tempore. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

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

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

NOMINATION OF NEIL GORSUCH

Mr. CORNYN. Mr. President, this week the Judiciary Committee has been considering the nomination of Judge Neil Gorsuch to fill the vacancy on the Supreme Court left by the death of the late Justice Antonin Scalia.

I think it has been a remarkable opportunity for the country—indeed, the world—to see not only somebody who is obviously very intelligent but very articulate and very committed to the basic principles that created this country, which were shaped in the framework of the Constitution.

Sometimes people forget that judges aren't legislators and legislators aren't judges and that we do have separate responsibilities. Indeed, the separation of powers between the President and the legislature and the judiciary is very important and for a good reason.

Judge Gorsuch has done a tremendous job for the last 2 days handling questions from both sides of the aisle with humility and with clarity.

I told him that I had hoped he would consider Chairman GRASSLEY's proposal that we have a camera in the Supreme Court courtroom.

Years ago, when I was on the Texas Supreme Court, we decided to have a single camera—which nobody, really, frankly noticed—in order to document and record the proceedings in the Supreme Court of Texas. It didn't turn into a sideshow. It wasn't the O.J. Simpson trial. People didn't misbehave because they were on camera. But it was a great opportunity for people to see their government and their elected officials in action.

Given the performance of Judge Gorsuch over the last couple of days and the benefits that accrue to the country as a result of learning more about his qualifications, his temperament, and his principles when it comes to judging, I hope more people will want to see that. We could all learn from it.

That would be good for our country, it would be good for the judiciary, and I think it would be good for America's standing in the world. We are in a vast minority of countries in the world when it comes to having an independent judiciary, and that is essential to our form of government and to who we are as Americans.

The country has learned a lot about Judge Gorsuch in the last few days. His career has been marked by a dedication to the law. In his decade on the bench interpreting the law, he has developed quite a record. As a matter of fact, he said that he had decided to participate in the decision of about 2,700 cases, and he has been reversed once. I find that remarkable. It is really almost hard to believe. He is clearly no extremist.

Some of our Democratic colleagues try to argue that he is not for the little guy but, as he so ably points out, he is for whoever the facts and the law say should win in a case. He doesn't view it as his role to put his thumb on the scales of justice and to predetermine a case or the outcome before the facts and the law have been applied. In short, he is not a politician. It would be totally inappropriate for a judge, given the fact that they are given lifetime tenure and they don't have to stand for election in front of the people—it would be entirely inappropriate for the judge to say: If I am confirmed, I will rule on this contentious issue this way or that way. That is not what judges do. That is what politicians do. That is why, when we stand for election, we go out and campaign and we tell people: This is what I believe in, and if you elect me, this is what I am going to do when I am elected into office. That is entirely appropriate for members of the legislative and executive branch because if the American people don't like what we are doing, they can fire us in the next election or, conversely and hopefully, if they like what we are doing, they will return us to office.

So as the judge pointed out, he said that judges actually would make ''rotten legislators,'' those are his words, not mine, because their job isn't to write the laws, it is to interpret them. They don't stand for election. They are not in intimate contact with the constituencies we all represent. Importantly, as I said at the outset, he did affirm his strong support of the separation of powers. Again, I think it is really important for everyone to acknowledge the different roles performed by different actors in our form of government. Legislators play one role, executive officers, the Presidents, and Governors in our State system play another role, and then the judiciary plays an entirely different, important but limited, role in our government.

One of our colleagues was complaining about the judge's decision in a case and that the so-called little guy lost in the case. Well, the judge said,

while he didn't necessarily like the outcome, he felt bound by the facts and the law that Congress had actually passed to render a judgment as he did in that case. I pointed out, were it otherwise—were the judge untethered to any sort of deference to precedent, that he would basically be a loose cannon and making political decisions or deciding what the outcome would be before he worked through the facts and laws to determine what the appropriate outcomes should be. I pointed out, and the judge confirmed, that if in interpreting a statute, which the court did in that case, if Congress doesn't like the outcome, then it is within Congress's power to change the law, to change the statute which would mandate a different outcome in a future case.

He pointed out, appropriately, that the role of the judiciary is for neutral and independent judges to apply the law in the people's disputes. So he is aware of the limits and the important role of the judiciary in our form of government. He also made clear his judicial philosophy is based on nothing more and nothing less than a faithful interpretation of the text of our Constitution and laws. Now, sometimes you hear people talking about, well, we have a living Constitution. To me, that suggests there is something wrong with applying the text of our existing Constitution, which was passed through constitutional amendment or originally when the Constitution was ratified by the States.

It kind of raises an interesting question. If a judge isn't bound by the text of the Constitution or of a statute, what can he use? Does he use his own value judgments? Does he use his own policy preferences? Does he use his political agenda in order to do his or her job? Obviously, I hope we would all agree that would be inappropriate.

Judge Gorsuch has also talked about the role of judicial courage, meaning following the law and the facts wherever they may lead, even though the judge, as a personal matter, may not agree with that or that may not be his personal preference. I know it sounds hard for those of us living in a political world, but actually judges do every day put their personal policy preferences aside and decide cases on the facts and the law. I believe it would be wrong of them and I believe a violation of their oath of office for them to do otherwise. What happens when there is a nominee like this who is so outstanding, so articulate, and so principled? Some of our colleagues across the aisle said: We are going to ask him some hypothetical questions. We are going to smoke him out and see if he will take the bait and prejudge some of these cases on controversial areas that will come before his Court or some other court. The judge—and I would expect nothing less—said it would compromise the independence of the judiciary and would be unethical for him to prejudge the outcome of some future case that might come before the Supreme Court. If you can imagine this, how would you feel if in a case before a court, the judge had already made a commitment to the outcome and you ended up on the short end of the stick? You wouldn't feel that was justice at all. You wouldn't feel that was fair at all. That is what the judge was doing in declining to head down that path to prejudge cases. In doing so, he followed the example of a number of previous nominees, people such as Justice Ginsburg and Justice Kagan, both nominated by Democratic Presidents. Knowing he can't answer, our colleagues have claimed they have no clue how Judge Gorsuch would perform his job and have used that as a pretext to oppose someone who is eminently qualified, but Judge Gorsuch has given them all they need. They have all the information they need in order to make an informed decision. He pledged to hear all sides of the case, to look at the merits, based on the law in question, and then and only then to come up with an unbiased and fair, impartial decision.

Can he do it? Well, the best evidence of ''can he do it'' is ''has he done it'' and the answer to that is yes. He has a decade of time on the bench, with hundreds of decisions, filled with millions of words, done in exactly the way he said he would do, to decide cases, based on the merits, in an unbiased and independent fashion.

So we have his record to judge him by, and his record is impeccable, which is the reason some of the critics have to go down this path of asking him hypothetical questions he can't ethically answer or otherwise claiming to be in the dark about his qualifications, temperament, and philosophy of judging.

It should come as no surprise that lawyers and academics and judges all across the political spectrum have spoken out in favor of the confirmation of Judge Gorsuch, agreeing that he is an independent jurist, with integrity and the right temperament, intellect, and experience to serve on the Supreme Court.

He was introduced to the committee by both of his home State Senators, the junior Senator, a Republican, and the senior Senator, a Democrat, who called Judge Gorsuch a man with ''a distinguished record of public service'' and ''outstanding integrity and intellect.'' I couldn't agree more.

Neal Katyal, a Solicitor General under President Obama, also spoke glowingly of Judge Gorsuch and provided a strong endorsement of his qualifications to serve on the bench. He was one of the first on the other side of the aisle to urge the Senate confirmation of Judge Gorsuch, citing his independence, his integrity, and his superb qualifications. The bipartisan recognition of Judge Gorsuch's fitness for this high office is nothing new because a decade ago, 10 years ago, he was confirmed by the U.S. Senate by voice vote, essentially unanimously. Not one Member of the Senate opposed his confirmation, and the truth is, nothing has really changed since then. So you would think that if some of our colleagues across the aisle thought he was good enough to be confirmed as a circuit judge to the Tenth Circuit Court of Appeals, that they could have something they could point to if they were inclined to vote no, something that happened within the intervening 10 years, but I have to tell you, there is not much there for them, if anything. In fact, his opinions have rarely elicited dissent, and he has a rare record of reversal which I think is remarkable.

In truth, he is a great jurist, and that is clear by the evolving reasons coming from our friends on the other side of the aisle as to why they had some concern. First, we heard some Senate Democrats would fight a nominee who isn't in the mainstream. Well, Judge Gorsuch passed that test with flying colors so they moved on. Next, they said they would oppose him because of his refusal to answer questions about issues that would come before the Court. As I said, not only do the ethics rules prohibit him from doing that, but the tradition set by Justices Ginsburg and Kagan rightfully dictated that he refuse to do so during the hearing. Now we hear from our Democratic colleagues that his vote must be delayed because of an ongoing FBI investigation that is completely unrelated to him. I think that is just an indication of how desperate they are to come up with a reason, any reason, to oppose this judge's confirmation.

Watching Judge Gorsuch this week, it is clear our Democratic friends are finding it hard to come up with a reason to oppose his nomination. Indeed, they are struggling to do so, and they are desperate for an excuse to oppose him, but they are not going to find a good excuse or a good reason.

I hope our colleagues will help us confirm this good man, this good judge for this office. I know our politics, when it comes to judicial confirmation, have become very contentious, but it wasn't always that way. Back when President Clinton was in office, before President Bush 43, judges were confirmed routinely by an up-or-down vote of the majority of the U.S. Senate. Indeed, Justice Scalia, whose seat will be filled by Judge Gorsuch, was confirmed overwhelmingly. I think it was by 97 votes, if I am not mistaken. Justice Ginsberg, somebody from the opposite end of the ideological spectrum, was confirmed with 96 votes or thereabouts. So I hope it is a time we can get back to the traditions of the past, which means not filibustering mainstream nominees, as some of our colleagues across the aisle have threatened to do even before the hearing began.

I would ask them this. If you can't vote for somebody like Judge Gorsuch, you are not going to be able to vote for any nominee from a Republican President because there simply isn't anybody better qualified by virtue of his

experience, his education, his training, and his temperament for this job. I hope they will reconsider.

I am happy to support his confirmation and urge all my colleagues to do so as well. If they can't vote for his confirmation, at least allow us to have an up-or-down vote, without setting the bar at 60 votes, but making it a majority vote in the U.S. Senate, which has been the tradition in this body for many, many, many years, excepting the last 8 years during the George W. Bush administration.

Mr. President, I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER (Mr. TOOMEY). The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

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

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

TRUMPCARE

Mr. MURPHY. Mr. President, the House is still on schedule to vote tomorrow on a reform of one-sixth of the American economy that the American public has not seen. This is, frankly, unprecedented—this rush job, this attempt to jam through a massive rewrite of the American healthcare system, intentionally done so fast that the American public cannot keep up with what is a truly disastrous piece of legislation. It is a train wreck. It is a dumpster fire. I cannot come up with enough words to describe how bad this legislation is going to be for the American public.

Bill Kristol, who is an icon of the conservative movement and who has been arguing for the repeal and replacement of the Affordable Care Act since it was passed, tweeted out this:

> This healthcare bill does not, A, lower costs; B, improve insurance; C, increase liberty; D, make healthcare better. So what is the point?

Frankly, many Americans, many healthcare professionals, and many consumers are asking the same question: What problem does this bill solve?

Whatever you want to call it—the American Health Care Act, TrumpCare, RyanCare—what problem does this bill solve other than a political problem?

Clearly, Republicans have a political problem. They have promised, for the last 6 years, to repeal the Affordable Care Act. Now they have control of the White House, the House, and the Senate, and they feel pressured to make good on that promise.

It does solve a political problem for the Republicans. The passage of this bill in the House or the Senate would allow my Republican friends to say: We told you we were going to repeal the Affordable Care Act, and—doggone it—we did it. But it does not solve any other problem in the American healthcare system. It makes the existing, remaining problems even worse. The Republicans know this because, for 6 years, we have heard criticism—relentless criticism—that the Affordable Care Act was rammed through the process, that it was passed without Members' knowing what was in it, that it was shoved down the throats of the American people. Well, imagine our surprise when the replacement to the Affordable Care Act is being pushed through at absolutely light speed compared to the passage of the Affordable Care Act.

So we look at what happened when the Affordable Care Act was passed, and the HELP Committee that I sit on, the Finance Committee in the Senate, the Energy and Commerce Committee, and the Ways and Means Committee held dozens of hearings—dozens of committee meetings. The Health, Education, Labor, and Pensions Committee in the Senate alone debated hundreds of amendments and accepted 130 Republican amendments to the Affordable Care Act.

This time around, the HELP Committee isn't even going to have a meeting on the replacement. The committees in the Senate aren't going to have anything to do with this bill. The substitute language that Speaker RYAN has filed likely will not even get a CBO analysis before it is jammed through the House tomorrow. Why is that? Because Republicans are so fearful that the American public will have the time to take a look at this and realize what it is.

I don't often say that Bill Kristol is right, but he is right when he says that this bill doesn't lower costs, it doesn't improve insurance, increase liberty, or make healthcare better, so what is the point?

Here are three really simple ways to understand this bill. This bill is all about higher costs for consumers, all about less care for Americans, all in order to finance tax cuts for the rich. These are the three prongs of TrumpCare: higher costs, less care, and tax cuts for the rich. You don't have to spend a lot of time deep inside this bill to figure out what it is all about.

So costs go up, CBO says 15 to 20 percent, just in the first couple of years for a number of reasons, but primary amongst them is the fact that the help that you are going to get to afford insurance just dramatically decreases. For low-income Americans, here it is: You get $1,200 less if you are 27, you get $1,100 less if you are 40, and if you are 60, you get really hosed. If you are 60, good luck affording insurance. Your subsidy goes down by $5,800. It gets even worse than that because this bill allows for the insurance companies to discriminate against older Americans by jacking up the ratios that you can charge older Americans versus younger Americans from 3 to 1 to 5 to 1, so the average low-income, sixtyish-year-old in this country will be paying about $15,000 more out of pocket for healthcare.

What problem does that solve? Talking to people in Connecticut, I didn't hear a lot of my constituents who are in their fifties and sixties say: Let me tell you the problem with the American healthcare system. I am paying way too little. I need to be paying—if I could be paying $13,000 more, that would scratch me where I itch.

Nobody says that the problem with the healthcare system today is that costs are too low. It is the opposite. Costs are too high. Yet the first prong of TrumpCare: higher costs. That is not me saying it; that is CBO saying it.

I will give my colleagues the exception to this because let's lay all of our cards out on the table. CBO does say that if you are young, healthy, and relatively affluent, you might get a lower rate. Let's be honest about that. So if you are young, healthy, and you are affluent, you might get a lower rate. But that is a sliver of the population compared to all of the people who are going to be paying higher rates, especially older people and especially low-income people, because the subsidies don't change if your income goes up, and because of the discrimination made legal in this bill, older people have to pay more.

So, basically, another way to think about this in terms of how costs are going up is the more you need healthcare, the less help you get. If you are low-income and you are older, you get less help. If you are younger and higher income, comparatively, you get more help from this bill. Again, that is not attacking a problem that I hear about very often. People who need more help tend to need more help.

Here is the second chart. All of this is done in order to give a big tax cut. So here is the amount of tax cuts in this bill for people making $10,000; here is the amount for people making $20,000 to $30,000; here is the amount of the tax cut one gets if you are at $50,000 to $60,000. We see a trend line. It is about the same amount if you are making $10,000 up to about $200,000. The amount of tax cut you get from this bill in that range is zero. But if you are making $200,000 or more, well, here is where the money is, up to the point where people who are making the highest incomes in this country get over $1 million in tax cuts.

It repeals some tax provisions in the Affordable Care Act that were used to finance the subsidies, but all of those tax provisions affect the very top income level earners. So there is a tax cut in this bill, but it gives you zero if you make less than $200,000 a year. It gives you a lot if you are making more than $200,000 a year.

Here is the last chart: less care. Here is what CBO says will happen if the Affordable Care Act remains. This is a really important line to look at here because part of the narrative, part of the explanation for this piece of legislation is that, in PAUL RYAN's words, ObamaCare is in a ''death spiral,'' and Donald Trump says it is ''collapsing.''

The Congressional Budget Office—which is run by a man who was handpicked by the Republican caucus in the

House—the Congressional Budget Office says: No, actually, it is not collapsing; it is not in a death spiral. If we do nothing and allow the Affordable Care Act to remain—yes, over 10 years, the number of people without insurance will go up by a little bit, up to 28 million, but the death spiral happens if you pass TrumpCare. There is a death spiral coming into the American healthcare system. There is a humanitarian catastrophe that is about to hit us, but it only happens if you choose to pass this piece of legislation that is pending before the House of Representatives today.

Now, I hear this legislation can't pass the U.S. Senate because my Republican colleagues understand this. So I am not necessarily talking directly to my Republican colleagues here because I trust that they understand the collapse of the American healthcare system that occurs when, in a very short period of time, you create 24 million more uninsured people.

But, remember, Donald Trump said during the campaign that no one was going to lose healthcare. Republicans in the House said that everyone who is on healthcare today will get to keep it. CBO says that is not even close to true. In the first 2 years, 14 million people lose care, and eventually those who are uninsured goes to 52 million. The Presiding Officer knows this, and my Republican colleagues here know this.

This 52 million, it is not that they are totally outside of the American healthcare system. If there is an emergency, they go to an emergency room, and the emergency room covers their care. That is the most inhumane way to run a healthcare system, to wait until you are so sick, so ill, that your cancer has ravaged your body so badly, you have to show up in the emergency room, but they will get that care—often the most expensive care—and we will all pay for it. Part of the reason that CBO says that rates will go up is because this 52 million gets their care from emergency rooms. The emergency rooms and the hospitals pass that cost along to private insurers, and everybody's premiums go up.

Here is another way to think of this. I know these numbers tend to get a little hard to digest, a little hard to understand as they get thrown around. Here is what 24 million people losing healthcare looks like. How many people is 24 million? Twenty-four million is the entire combined population of Alaska, Delaware, Hawaii, Idaho, Kansas, Maine, Montana, Nebraska, Nevada, New Hampshire, New Mexico, North Dakota, Rhode Island, South Dakota, Vermont, West Virginia, and Wyoming. This isn't a minor shift in the number of people who will not have healthcare. This is a seismic change. The entire population of 17 States loses healthcare over the course of 10 years if this bill is passed.

By the way, let's be honest about who these people are. Yes, many of them will be people losing healthcare in the private marketplace. CBO says people who have private insurance will lose it because of this bill, either because their cost-sharing goes up and they can't afford it or because their employer might not offer it any longer. But a lot of this is in the Medicaid population, and you have to make a decision. The Medicaid population is, by and large, poor people, disabled people, elderly Americans, a lot of children, a lot of kids. The Members are going to have to make a decision about whether their conscience will be OK with 24 million. Most of them are pretty sick and disabled and pretty young—if you are OK with that many people losing coverage.

So PAUL RYAN is right; it is a three-pronged approach. The three prongs are higher costs, less care, in order to finance tax cuts for the rich. It doesn't solve any problem that exists today in the healthcare system, except for maybe, as I mentioned, that very narrow issue of young, healthy, affluent Americans. They will probably do a little bit better here. But everybody else does worse.

By the way, here is what CBO says is the reason why those young, affluent healthy Americans do better—because you kick old people off of insurance. The only reason that premiums stabilize in years 3 and 4 and 5, according to CBO, is because this bill jettisons millions of older, relatively sicker Americans off of healthcare. So as you just kick old people off healthcare, then it gets a little bit cheaper for the younger people who remain.

So even the small percentage of Americans who, from a monetary standpoint, do a little bit better under this bill, they only do better because individuals who really needed care lose it under this approach.

This bill is moving really, really fast. It is moving really, really fast. Its impact is absolutely stunning. My hope is that it gets stuck somehow, that Senators of goodwill recognize, as Bill Kristol did in his tweet, that this bill doesn't actually solve any problems. Maybe they recognize that it looks an awful lot like the Affordable Care Act. For the Speaker's reputation as being a big ideas guy, there are no new ideas in this legislation. It is essentially just the Affordable Care Act dialed down from 10 to 3.5, making healthcare unaffordable for everybody. The subsidies are still there; they are just much less. The individual mandate is still there; it just applies it in a different, more cruel way. Instead of paying a penalty when you lose coverage, you now pay a penalty when you lose coverage and try to sign up again. It is the same concept; it is just the penalty applied at a different place, and the insurance requirements are there.

So there are no new ideas. If you were ideologically opposed to the Affordable Care Act, there is no reason why this solves any of your problems. And from a practical consideration, it raises costs, it doesn't improve insurance, and it kicks a lot of people off healthcare.

My final thought is this: I know this issue of healthcare has become probably the most partisan, in part because there are some real important philosophical questions at the heart of this debate. I don't apologize for the fact that I do believe that healthcare should be looked at as a human right. I really think that in this country, we give you access to education; we should give you access to healthcare as well. You are living in the most powerful, most affluent country in the world. You probably shouldn't die because you are not rich enough to afford access to a doctor. It seems like something we should be able to do for you. So there are some serious ideological differences because I know a lot of my Republican colleagues don't view it that way. They view healthcare as a commodity much more so than I do. But we have shown the ability to work together on healthcare and on some pretty controversial pieces of it.

At the end of 2016, just 2 months ago, we passed the 21st Century Cures Act. That wasn't easy. That was $6 billion of additional spending on medical research in this country. It included legislation that Senator CASSIDY and I wrote—the Mental Health Reform Act—that had some tough reforms on our insurance markets requiring insurance companies to cover more mental illness. We had to work through some very tough issues with Senator CORNYN, who opposed our legislation until we worked out issues he had, and then he became a supporter and champion of it. We had to work through some difficult issues, but we passed a big healthcare bill at the end of 2016, with Republicans and Democrats supporting it. Frankly, in the end, some progressive Democrats voted against it and some conservative Republicans voted against it. It wasn't without controversy even until that final vote. But we have shown the ability to be able to work together, so why don't we do the same thing here?

I submit there are still big problems in the healthcare system. The Affordable Care Act didn't solve every problem out there, and even some aspects of the Affordable Care Act have to be amended, have to be changed. But let's work together on ways to keep what is working in the Affordable Care Act and make improvements to the parts that aren't working as well. Let's move into territory that we haven't covered yet, like drug prices, and do something about that.

Donald Trump, the President of the United States, gave a speech earlier this week in which he told Americans that if you pass this legislation, drug prices will come ''way, way, way down.'' That is his quote, that drug prices will come ''way, way, way down.'' That is not in this bill. TrumpCare doesn't have anything that controls drug prices. Drug prices are not coming way, way, way down, but

we could work together to try to make sure that happens. We could have a tough conversation about what we are willing to pay when it comes to drugs, whether we are willing to let the rest of the world free ride on the contribution of the United States to global research and development. That would be a very important discussion to have. I bet it wouldn't get all 100 of us, but it would allow for Republicans and Democrats to work together.

Instead of ramming this bill through this process, through the reconciliation process, which means you can do it without a single Democrat supporting it, let's sit together and try to work out a bipartisan approach to improving our healthcare system.

I know why Speaker RYAN is pushing this bill through so fast. He knows it doesn't solve any problems that exist in the American healthcare system. He knows that the only problem it solves is a political problem—a political problem created by the promise that Republicans and this President made to repeal the Affordable Care Act. But because they are doing it so fast, so hamhandedly, the replacement is going to result in disaster for Americans. That is not me saying that. That is the Congressional Budget Office. That is Bill Kristol. That is Republicans and Democrats all across the country.

Whatever happens tomorrow in the House of Representatives, the Senate will have a chance to be the adults in this conversation. Senate Republicans will have a chance to take a big step back and start over, and they can start over in a partisan way, or they can start over by reaching out to Democrats and saying: Let's try to work this out together. We may not get to that point where we have a bipartisan agreement, but, boy, it would be nice if my Senate Republican colleagues would at least try because if they don't, then PAUL RYAN is right—there will be three prongs to what will be called TrumpCare, if it isn't already: higher costs for consumers, less care for Americans, all in order to finance a giant tax cut for the rich. This isn't what the American people thought they were getting, and we have a chance in the Senate to do so much better.

Mr. President, I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

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

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

NATIONAL INSTITUTES OF HEALTH BUDGET AND PHARMACEUTICAL PRICES

Mr. DURBIN. Mr. President, last Thursday was a sunny, cold day in Chicago, but I looked forward to it because there was an event that I wouldn't miss. We have a hospital there known as the Rehab Institute of Chicago. It is one of my favorites, and we have some great hospitals. The Rehab Institute of Chicago literally focuses on people who have had serious accidents, strokes, injuries and who are trying to get rehabilitated so they can function and walk.

I really got to know this hospital years ago when I had a town meeting in Chicago and talked about our returning veterans from Iraq and Afghanistan. Many of them were coming home with serious injuries from roadside bombs and the types of injuries that can change your life.

A man came up to me, and his name was Ed Edmundson. He was from North Carolina. I was kind of surprised that he was at a Chicago town meeting. He explained to me that he heard about the town meeting because he had a son named Eric who was a disabled veteran and was at the Rehab Institute of Chicago. It turns out that Eric was seriously wounded by a roadside bomb in Iraq, and during the course of the surgery afterward, there was an accident. The net result of it was that he had very limited mobility and he could no longer speak.

Eric, if I remember, was about 23 years old. He was married and the father of a little girl. Well, the VA did the best for him, and they finally came to his mom and dad and said: We can't do anything more. We need you to pick out a motorized wheelchair for Eric because he needs to be in a nursing home. His father said: He is 23 years old. He is not going to a nursing home. We are not quitting. His dad then set out to find the best hospital in the United States and came to the conclusion that the Rehab Institute of Chicago was the place.

So he came to invite me to come up and meet Eric at the hospital, which I did a couple of days later. Eric was there with his mom and dad, and he started the rehab. I went back to see him a week or so later to see how he was doing. His mom said, as I came into the room: Eric has a gift for you. I thought: A gift for me? The gift was that Eric, with a little help, was able to stand on his own feet. It was a breakthrough. Some people had said it would never happen again.

His dad said to me that Eric planned on Memorial Day to put on his full dress uniform from the Army and walk out of the front door of that hospital with a little help and show folks that they shouldn't have given up on him. They asked me if I could be there. I said: I will move Heaven and Earth; I will be there. I wasn't the only one. There were a lot of people there—the mayor, elected officials, and every TV camera in Chicago—as Eric Edmundson walked out of the front door of the Rehab Institute in Chicago.

You never forget those moments, do you? Here is a young man who risked his life for America, came back gravely injured, and through his father and mother's determination—and his own strength—he found the best place for treatment. This rehab institute does research to find ways that give people who have spinal injuries and other injuries another chance.

Well, last Thursday they opened up the new Rehab Institute of Chicago, and it is renamed. It is the Shirley Ryan AbilityLab. It is not a hospital. They call it an AbilityLab, and the reason is that they try to integrate research with actual doctors, clinicians, and patients all in the same place—not separate universities and hospitals and so forth. It is a bold idea. It is a new concept, but if anybody can pull it off, it is Dr. Joanne Smith, who heads up now the Shirley Ryan AbilityLab.

Do you know what I learned as I got out of the car to give the speech and to cut the ribbon at this new research facility? I learned that the President of the United States, Donald Trump, had just announced his new budget. Do you know what was included in his new budget? A new spending line for the National Institutes of Health. That agency is the premier medical research agency in the world, and we are lucky to have it right here in the United States. We are lucky that Congress has given more money to NIH for biomedical research last year. Senator BLUNT, a Republican of Missouri, who heads up the subcommittee with Senator MURRAY of Washington, planned on giving more this year, and we are still trying.

Do you know what President Trump suggested for next year's budget for the National Institutes of Health? He suggested cutting their appropriation by $5.8 billion. It is a $32 billion appropriation. Cutting it by $5.8 billion will bring the level of biomedical research in the United States of America down to the lowest point it has been in 16 years. That is President Trump's idea of a priority—the most dramatic cut in biomedical research in the last 16 years.

I announced it when I did the ribbon-cutting speech. First, I thanked all the folks at the Shirley Ryan AbilityLab, Dr. Smith, and Shirley and Pat Ryan. I told them if there is ever a time both political parties ought to come together and tell this President that you are just flat-out wrong, this is it. This is it because the medical research that is taking place in the National Institutes of Health is not just for those who are sick today but for those who may be diagnosed later today or tomorrow.

You know what the most frequently asked questions will be when you get that heartbreaking diagnosis? Doctor, is there anything you can do for me? Is there a medicine? Is there a procedure? Basically, is there any hope? If the NIH, or the National Institutes of Health, isn't properly funded and isn't doing its job, that answer is not always going to be a good one.

Young medical researchers don't get rich, but they love what they do. To keep them on the job doing what they should do with all of their talent and

all of their skill and all of their education, we have to promise them that we are going to continue to fund medical research in a serious way, without the peaks and valleys.

President Donald Trump does not understand that. Mick Mulvaney, head of the Office of Management and Budget, who came up with this terrible budget, doesn't understand that. To them, they are just numbers on a page. We will just cut biomedical research to the lowest level in 16 years.

A few minutes ago I had a visit from some folks from Chicago, IL. They were with the National Multiple Sclerosis Society. They come to see me each year. You will see them around the halls wearing their orange ties and orange scarves. They came to talk about multiple sclerosis, which for many of my close friends is a disabling disease they fight every day. It is a disease of the central nervous system. It interrupts the flow of information within the brain and between the brain and the body. Symptoms range from numbness to tingling, to blindness and paralysis. The progress, severity, and specific symptoms of MS of any one person can't be predicted.

The good news is that we are engaged in research that can make a difference, research that gives us hope. They talked to me about Donald Trump's cuts to the National Institutes of Health. I told them I was going to do everything in my power to restore that money so that the research continues.

Incidentally, there is another issue. It isn't just fighting the disease and doing the research. It is what is happening to the cost of the drugs that these people need to maintain their lives and that give them hope. In 2004 the average wholesale price of available MS disease-modifying therapies was $16,000. By 2013, the average price had gone up to $61,000. In 2017, the average price is up to $83,600. All of the top 10 specialty medication classes, which include MS, increased in spending, and all had increases in the price of medication. Some of these drugs have been on the market for years, and now the pharmaceutical industry is driving the costs up across the board.

When we talk about healthcare in America, it is interesting how little time we spend talking about the cost of pharmaceuticals. But how wrong we are. When the head of Blue Cross in Chicago came to see me, she said: Senator, I will bet you didn't know last year Blue Cross Blue Shield spent more money in their hospitalization plans for pharmaceuticals and medications than they spent for inpatient hospital care for those who were covered—more money on drugs than inpatient hospital care.

So what did the Affordable Care Act, which is being debated, do about the price of pharmaceuticals? Almost nothing. What does the new Republican replacement plan do about the cost of pharmaceuticals? Almost nothing. Why? Why is there this hands-off attitude when it comes to an integral part of the cost of healthcare and an integral factor in the dramatic increases in the cost of healthcare? Because pharma has friends in high places.

Watch your television sets. There are two things to watch for, if you still watch television. The first thing is to watch for all the drugs that are advertised on television. Do you know how many countries in the world allow drugs to be advertised on television? Two. And one of them is the United States.

You see all these drugs being advertised that are going to allow you to be liberated, freed, and cured, and this and that and the other thing. Then, they run through all the disclaimers. This is the one I like the best: Be sure and tell your doctor if you have had a liver transplant: Oh, Doc, did I fail to mention I had a liver transplant?

That is the kind of thing they put on television. Why does a pharmaceutical company spend all that money advertising on television? They make money off of it.

Here is how. Americans walk into their doctor's office and say: I just saw this ad for this drug, and I think it is exactly what I need. Too many doctors, instead of taking 10 minutes to explain why it isn't the drug you need, take 1 minute to write out the script. So expensive drugs make it on the market and justify the advertising on television. That is one of the grim realities of what we are facing.

When it comes to the drugs and their pricing, we know what is happening. They are running up the costs of drugs on individuals, and they can't afford it any more. I just met with some of these MS patients, and one of them told me she had gone now for weeks without medication because, she said: Senator, it is $6,000 I just don't have.

Well, we can do better than that. We should do better than that as a nation. We ought to make certain that we don't get swept away with the pharmaceutical companies and their advertising. Those are the other things you are going to see on television now. They are really beautifully done ads. They are talking about all of us wanting to survive and how the pharmaceutical industries are finding, through their research, good drugs to help us survive. I don't quarrel with that premise. That is right, but it turns out many of them are spending more money on advertising than they are on research. So this is big business. It is big profits. They are trying to protect them. It is driving up the cost of healthcare. People like my friends with multiple sclerosis are wondering how this will end and whether they will be able to pay for the treatment they desperately need.

If this means anything to those who are listening to this debate, if it means something to you or your family, you need to speak up—Democrat, Republican, Independent, Trump voter or not—you need to let this administration and this Congress know that medical research is a priority to you. If it is not, hold on tight because Donald Trump's budget is about to rip the heart out of the National Institutes of Health.

Whatever his ambition, whatever his goals, whatever his tweets, I could care less. When it comes to medical research, he is in for a fight.

TRUMPCARE

Mr. President, the Republicans promised, if they took a majority, the first thing they would do is get rid of ObamaCare. He is gone. It has to be gone too. Fifty-seven times—maybe more—in the House of Representatives, they voted to abolish ObamaCare. It didn't mean anything. He was still President then. He was going to veto whatever they passed, but they did it over and over and over. It was an article of faith, and they beat their chests and went across America saying: Get rid of ObamaCare.

Then the dog caught the bus. They got the majority in the House and the Senate, and all of those threats and promises about ObamaCare became reality. Then something else happened. People started saying to the Republican majority: And then what? What are you going to replace it with?

Well, it turns out for 6 years they have been writing speeches about abolishing ObamaCare instead of for 6 years writing plans and bills to replace it. So they slapped together a replacement plan, sent it over—I say that because it only took them a couple of weeks. They sent it over to the Congressional Budget Office, which is kind of like the umpire here, the referee, to take a look at it.

The Congressional Budget Office gave a report on the Republican replacement plan for the Affordable Care Act. This is what it said: Under TrumpCare—ObamaCare to TrumpCare—under TrumpCare, 24 million Americans will lose their health insurance; 14 million in the first year—24 million Americans out of a nation of what, 350 million, 360 million. That is a pretty large group.

We know what happens when people lose their health insurance. They still get sick. When they get sick, they go to the emergency room when it is too bad, and the emergency room takes care of them. Then the hospital, because the person does not have health insurance, chalks up the cost of that health to charity care and passes it along to everyone else with health insurance.

Under TrumpCare, seniors, rural communities, and lower and middle-income families will see their premiums and out-of-pocket costs soar, according to the Congressional Budget Office. Under TrumpCare, Medicare's solvency will shrink by 4 years. Medicare, you remember, is the program primarily for seniors started back in the 1960s to make sure that when you got to a point in life, age 65, you may not be working, no longer have insurance through your

employer, the government Medicare plan would cover you.

Has it worked? Ask 60 million Americans who count on it. Yes. What about the results? Since the 1960s, people are living longer. We know Medicare works, but the cost of healthcare has been going up, and we worried about its long-term solvency. It turns out the Affordable Care Act, which we passed, brought some savings to healthcare and added 10 years of solvency to Medicare.

Now, the Republicans want to repeal the Affordable Care Act, and it will reduce the solvency of Medicare by 4 years—4 years sooner Medicare will go insolvent. The fiscally conservative Republican Party has come up with an answer, which leads to sooner insolvency for Medicare. Under TrumpCare, $880 billion in Federal Medicaid funding to States will be eliminated. What does it mean? Well, let me tell you the story of Judy.

Judy works at a motel in Southern Illinois. She is in her sixties. She is a hard-working lady. There is not a lazy bone in her body. She works in the hospitality room where you get the free breakfast at the motel. She is the one who smiles and cleans off the table and makes sure you are happy. I got to know her. Judy asked me about all of this stuff going on with affordable care. I asked her: Would you mind working with my office? Let's see what we can do for you.

It turns out that Judy, as hard as she works, makes a very low income. She qualified for Medicaid, which meant health insurance that did not cost her anything because her income was so low. She couldn't believe it. For the first time in her life—for the first time in her life she had health insurance—Medicaid—providing her health insurance. It was a good thing too because just shortly afterward she was diagnosed with diabetes. Now comes the proposal from the Republicans to remove so many people across America from Medicaid. Where does that leave Judy? Back where she started, working hard, with diabetes, a low income, and no health insurance. Terrible things can happen to you if you have diabetes and don't have some medical home or a doctor you can count on.

That is the reality of what TrumpCare will mean to Judy in Southern Illinois. One trillion dollars will be cut from programs that serve low- and middle-class families so the Republican approach can cut taxes for the wealthiest people in America. I am not making that up.

They are raising the premiums for working families to pay. They are cutting off seniors and others from Medicaid coverage so they can give tax breaks to the wealthiest superrich in America. It is going to cost us healthcare jobs across America. Downstate Illinois, those are good-paying jobs. The Illinois Hospital Association says we are going to lose them.

This Republican bill, TrumpCare, is bad for seniors, bad for middle-class families, bad for people with disabilities. It is not very good for kids. Half of the kids in America are born under and taken care of by Medicaid. It is bad for the States, bad for just about everyone who is not healthy or wealthy. Yet the House Republican leadership is intent on moving forward with TrumpCare this week.

The President came to the House Republicans yesterday and said: If you don't support me on this vote, I am coming after your districts to defeat you.

This approach is going to increase premiums for seniors in one of the most fundamental ways. We said in our bill that we voted for that you could not have a disparity in premiums more than 3 to 1. So the premiums charged to a 20-year-old and the premiums charged to a 60-year-old could be no different than a 3-to-1 margin. The Republicans changed that and made it 5 to 1.

That is why the American Association of Retired Persons opposes TrumpCare and why seniors across the country are waking up to the reality that they are in for a jolt when it comes to the premiums they have to pay.

Senator SUSAN COLLINS of Maine, a Republican, has said: ''This is not a bill I could support in its current form . . . it really misses the mark.'' As Senator COLLINS noted, this bill does not come close to achieving the goal of allowing low-income seniors to purchase health insurance.

Senator BILL CASSIDY, a Republican from Louisiana, said:

> The CBO score was, shall we say, an eye-popper. . . . Can't sugarcoat it. . . . Doesn't look good.

Senator and Dr. CASSIDY, Republican from Louisiana, said that. He went on to say:

> That's not what President Trump promised. . . . That's not what the Republicans ran on.

Senator TOM COTTON, Republican of Arkansas, said:

> I'm afraid that if [House Republicans] vote for this bill, they're going to put the House majority at risk next year. . . . Just from a practical standpoint, I don't think this bill is going to reduce premiums for working Americans. . . . I think it's going to cost coverage for many Americans.

Why do we want to rush this process? It took us more than 2 years to write a bill, and it is still a bill that needs more work. I voted for it. To think that they can replace it in a matter of weeks, with this slap-dash approach, is not fair to America. It is not fair to people who count on health insurance for peace of mind and coverage when they desperately need it.

I see my friend on the floor. I am going to close. I released a report today, and it is one I am going to share across the board in Illinois before our delegation votes this week. This bill in Illinois means that 311,000 people I represent would lose their private health insurance. By 2020, the average enrollee in Illinois would see their health insurance costs increase by over $3,000—by 2026, almost $5,000.

The impact is particularly severe for Illinoisans ages 55 to 64. They would see their costs of premiums increase by over 50 percent. Illinois hospitals, they are against it too. They know that a lot of downstate hospitals and inner-city hospitals can't survive this Republican replacement plan.

I will close with a letter from Christine McTaggart of Watseka, IL. Here is what she said to me: ''I wake up every day since the election fearing that a complete repeal will happen and for me that translates into a death sentence.''

Christine was originally diagnosed with stage IIIb inflammatory breast cancer in September of 2012. Given this type of aggressive cancer, her prognosis was poor. She went through 16 cycles—16—of chemotherapy, a bilateral mastectomy, 33 radiation treatments, failed reconstruction and chronic tissue issues, and thyroid cancer as well.

After all of that, in 2014, she learned her breast cancer was back. This time in her bones, stage IV. In her letter to me, Christine McTaggart of Watseka wrote:

> When the Affordable Care Act became law, I had no idea my life would come to depend on policies such as pre-existing conditions not excluding you from coverage . . . and lifetime maximums being eliminated. If ACA were repealed, I would no longer have coverage as my chronic ongoing treatment has far exceeded the old lifetime maximums. . . . I would have to choose between bankruptcy for treatments I cannot afford and rolling the dice, waiting for death.

She ends with this:

> I thank you for your tireless advocacy on this issue. . . . My life literally depends on it.

What we need to do is take repeal off the table, and this Senator will pull a chair up to the table. Let's make the Affordable Care Act work. Let's do it in a bipartisan way. Let's not look for a slam dunk for either political party. Let's try to do the right thing for America. We are not going to make the extremes in either political party happy, but if millions of Americans have health insurance and can find a way to pay for it, then we will do our job.

I yield the floor.

The PRESIDING OFFICER (Mr. GARDNER). The Senator from Louisiana.

Mr. CASSIDY. Mr. President, I ask unanimous consent that at 4:50 p.m. the remaining time on H.J. Res. 83 be yielded back and the joint resolution be read a third time and the Senate vote on the resolution with no interviewing action or debate.

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

The PRESIDING OFFICER. The Senator from Rhode Island.

CLIMATE CHANGE

Mr. WHITEHOUSE. Mr. President, on the day of the news reporting the World Meteorological Organization is

declaring that 2016 was the hottest year ever recorded, and further declaring that the planet is now in what they call, ''truly uncharted territory,'' I rise for my 161st ''Time to Wake Up'' speech, in this case to update my colleagues on the state of our oceans.

I am from the Ocean State. In January, the National Oceanic and Atmospheric Administration released a report with the U.S. Geologic Survey, the Environmental Protection Agency, researchers at Rutgers University, Columbia University, and the South Florida Water Management District.

The report updates global sea level rise estimates—perhaps not a big issue for Colorado but a big issue for Rhode Island. It made region-specific assessments for our American coastline. Based on updated peer-reviewed scientific literature, the report raised the previous upper range, or extreme, scenario for average global sea level in the year 2100 by an additional half a meter.

NOAA and its partners then tailored their findings to the U.S. coastline based on regional variations in ocean circulation and gravitational pull and local land conditions like erosion, subsidence, and groundwater depletion, all of which affect the local impacts of global sea level rise. They found that under the higher scenarios, all regions in the United States, except Alaska, can expect sea level rise higher than the global mean average. The news was particularly harsh for the western Gulf of Mexico and for the northeast Atlantic coast—Virginia through Maine, including my home State of Rhode Island.

Our coastal managers, like Rhode Island's Coastal Resources Management Council—the CRMC, we call them—are taking these new estimates seriously and incorporating the high scenario into their planning. Under the new scenario, the Northeast is expected to see 9 vertical feet of sea level rise by the end of the century. That means that a child born today in Providence, RI, at Women & Infants Hospital is likely to live long enough to see this 9-foot vertical sea level rise take place along our shores.

By the way, when you go up 9 feet, the shore goes back many, many hundreds of feet in many places. In Rhode Island, what CRMC is now planning for is between 9 and 12 vertical feet of sea level rise for our State. That is going to hit Rhode Island communities pretty hard.

Rhode Island's CRMC and our University of Rhode Island have developed together something called STORMTOOLS. It is an online research tool that projects the effects of this sea level rise and additional storm surge onto the State's coastal properties.

The tool actually now needs to be updated because it currently maxes out at 7 feet of sea level rise, which was the previous high scenario. Now that we have raised it to 9 to 12 feet, they are going to have to go back and redo it.

This is what it looks like based on the 7-foot max. Here is 7 feet of sea level rise in Newport, RI. This is the harbor. This is downtown Newport. America's Cup Avenue, which runs right through there, will be taken out. Through this area are a lot of very successful businesses that appeal to the people who come to visit historic Newport, RI.

Through here, we have some of the most significant working wharves still in the Newport area. Then this area here, called The Point, is a historic section that goes back into the 18th and in some cases 17th centuries. These buildings, of course, will be flooded. There is the downtown Newport fire station in the middle of that as well, so it affects our safety infrastructure.

This is further up the bay in Rhode Island. This is Barrington here. This is the town of Warren. As you can see in the blue, there are a lot of places where homes and businesses go underwater just under the 7-foot scenario. Some of the stuff that goes underwater is pretty critical.

Here in this bluish part is the Warren wastewater treatment plant. You can't have a wastewater treatment plant that is under water, so that is a very significant investment for Warren to have to face.

I went to the Warren Town Hall not too long ago to meet with the manager and the folks who work there to hear from them about what they needed in order to accommodate this new risk.

Remember that the sea level rise that we are looking at here is just the floor that high tides and storms ride in on. In this simplified illustration, we can see a coastal city with sea level rise encroaching on its infrastructure. Then we add to that the king tides. When celestial bodies line up so the tides are stronger than usual and, therefore, higher than usual, they are called king tides. That is not a scientific term, but it is the lay term for them.

These king tides already push water into the streets of Miami and over the tops of the wharves of Boston on clear, sunny days—just from the tide. If you add on top of that a strong coastal storm, our city here does not stand a chance. Homes are destroyed, businesses are ruined, damages reach the billions, and lives perhaps are lost.

America's coastal communities are not prepared for the future. Part of that is because so many people are denying the prospect of this future, but also we haven't caught up.

Federal Emergency Management Agency flood maps are the things that guide flood insurance for most coastal property owners. FEMA's estimates, however, fall alarmingly short, we have discovered, for coastal communities like those in Rhode Island, as the FEMA studies rely on outdated data and incomplete models. This means that people along America's coast who rely on these models can be lulled into a false sense of comfort if their home falls outside one of FEMA's high risk zones but, in actuality, is in harm's way. So Rhode Island officials are out right now trying to educate everyone living and working along our State's coast about the flooding dangers that are fueled by climate change.

It is not just State officials. Insurance and mortgage companies are starting to take these changes into account. Even the government-backed mortgage giant, Freddie Mac, is girding for broad housing losses from climate-driven flooding. Let me quote them: ''The economic losses and social disruption may happen gradually,'' Freddie Mac says on its website, ''but they are likely to be greater in total than those experienced in the housing crisis and great recession.''

Think about that. That is pretty serious business, if you are saying that the housing damage and the consequent financial harm is going to be greater than the housing crisis and great recession that we just lived through.

Some effects of climate change may not even be insurable, Freddie Mac says, and unlike the 2008 housing crash, owners of homes that are literally under water—not just financially under water—would have little expectation of their homes' values ever recovering and, therefore, little incentive to keep making mortgage payments which would, in turn, add to steeper losses for lenders and for insurers. This is deadly serious economic business.

Shoreline counties are just 18 percent of the United States in land area, but they account for around 38 percent of the country's employment and 43 percent of our GDP. Each year, the sea and storms will take a higher toll on the roads, the bridges, the seawalls, the power and wastewater treatment plants, and the military facilities that serve that economically productive shore.

Despite all this, President Trump's proposed ''America First'' budget blueprint zeros out the Global Climate Change Initiative, ends U.S. contributions to international climate change programs, eliminates EPA programs that conduct climate change research and implement the Clean Power Plan, ends NOAA's coastal and marine management, research, and education grants and programs, including the sea grant cooperative research program, shifts NASA's Earth science budget, which includes climate research, out to deep space exploration, and cuts funding for the Department of Energy's Office of Science.

Obviously they don't like science very much.

The President's proposal—if enacted—would accelerate the grim future laid out in NOAA's sea level rise report and in Rhode Island's STORMTOOLS projections. As that grim future accelerates, it is actually science that gives us the headlights to perceive the oncoming threats. Cuts to CRMC of as much as 60 percent would cripple the STORMTOOLS project that provides Rhode Island our headlights.

The laws of thermodynamics will still govern the rise of our warming ocean waters. That is not going away. The laws of chemistry will still cause carbon dioxide to acidify seawater. That will not stop. The laws of biology will still affect vital coastal ecosystems and valuable ocean species and transmit the harms of climate change into those areas.

The laws of economics mean that this will all have a pretty bleak effect on the prosperity of Americans. All that it gains is that we will just be blinder to what is coming at us.

If the President were to forgo just one weekend at Mar-a-Lago, which POLITICO and the Washington Post estimate costs U.S. taxpayers $2 to $3 million each weekend, that money from one weekend could fund Rhode Island's entire sea grant program for a year, helping us guide offshore energy and commercial ocean development, protecting important fishing grounds and the State's vital fishing industry. That is economic effect in Rhode Island.

When the ocean starts lapping on the stairs of Mar-a-Lago, President Trump may be hard-pressed to continue denying what all of our scientific agencies are reporting and predicting. This graphic from the Boston Globe shows at 7 feet of sea level rise what is in store for the President's posh resort. The NOAA high scenario for that area actually projects for Florida's Atlantic coast sea level rise just over 8 feet by the end of the century—though this image understates the flooding that is going to take place at Mar-a-Lago in this century. That just shows 7 feet of sea level rise. An added foot of water not shown, plus that king tide problem I discussed, and storm surge—when you have a good wind kicking up, and it blows the surface of the ocean and raises the tide further—will all amplify these effects. Bye-bye, Mar-a-Lago.

It is time that we in Congress put fossil fuel interests aside. They have had their way with us quite long enough. It is time for us to start doing what is right by all of the Americans who live and work near the coast and will be facing this predicament in the real world.

If the President and this Congress remain beholden to this shameless, polluting industry, we will lose our chance to protect ourselves. It is time that we wake up to the reality of climate change, wake up to the reality of sea level rise, wake up to the reality of ocean acidification, and start to do something about it.

We can't say we weren't warned. We are just rotten with fossil fuel money and will not listen.

Mr. President, I yield the floor.

The PRESIDING OFFICER. The Senator from Tennessee.

Mr. ALEXANDER. Mr. President, while the Senator from Rhode Island is still here, I was pleased to join with him in an article published in the New York Times not long ago. We don't agree on everything, but we do agree on this: Climate change is a serious problem, and it makes no sense to close nuclear power plants while they are safely operating and producing 60 percent of our carbon-free electricity in the United States.

So I thank him for his partnership on that article in the New York Times.

Mr. WHITEHOUSE. I appreciate the chairman saying that very much.

TVA

Mr. ALEXANDER. Mr. President, today I come to the floor to express my opposition once again to the possibility that the Tennessee Valley Authority—the TVA, as we call it—might raise our electric bills and waste more than $1 billion buying electricity the region does not need by agreeing to purchase power from the Clean Line Energy Partners' proposed Plains & Eastern wind power transmission project.

Congress has a responsibility to conduct oversight of TVA's decisions and also to ensure that TVA is fulfilling its missions, as defined by the TVA Act. Although TVA does not receive any Federal funding from Congress, TVA is a Federal corporation, and its board members are nominated by the President of the United States and confirmed by the Senate.

The House Transportation and Infrastructure Committee and the Senate Environment and Public Works Committee, the committees responsible for the oversight of TVA, have held hearings to discuss TVA's budget and policies.

So as a U.S. Senator, today I am here to exercise my oversight responsibilities on TVA. Clean Line Energy Partners, a Texas-based company, is proposing to build giant, unsightly transmission towers from Oklahoma, through Arkansas, to Tennessee—known as the Plains & Eastern Clean Line—to carry comparatively more expensive, less reliable electricity to Tennessee and other Southeastern States.

For the first time ever, Federal eminent domain will be used over the objection of the State of Arkansas and both of Arkansas's U.S. Senators to acquire the land necessary for the transmission line. In order to move forward with the construction of a single 700-mile, high-voltage, direct current transmission line, Clean Line Energy Partners must find utilities in the Southeast that are willing to purchase the power produced by an Oklahoma wind farm and transmitted by the Plains & Eastern Clean Line. For this reason, Clean Line Energy Partners and their supporters have been urging the Tennessee Valley Authority to agree to a long-term power purchase agreement for wind power.

In November, shortly after the election, the Southern Alliance for Clean Energy said: "We strongly encourage TVA's Board of Directors to immediately contract for at least 1,000 megawatts of wind power on the Plains and Eastern Clean Line." Why the rush, I would ask. The answer is this: Federal subsidies for wind power—subsidies that waste billions of dollars of taxpayer money each year—end after 2019. A petition being pushed by the Southern Alliance for Clean Energy urging TVA to purchase the power spells this out. They said: "Critical deadlines regarding the Federal production tax credit for wind power are fast approaching. . . . The time to contract for low-cost wind power is now."

So last December, I wrote to the TVA and said: "There should not be a rush to approve any proposal from Clean Line Energy Partners. This is a big, expensive decision and should be left to the new board next year."

While this decision should be left to a full TVA board when all of its members are confirmed, I don't know why either a board with three vacancies, which is what we have today, or a complete board with all of its members confirmed would even consider approving such a deal. A contract with Clean Line Energy Partners could cost TVA ratepayers more than $1 billion over the next 20 to 30 years, the typical length of such an agreement. TVA would be disregarding its mission to provide low-cost power to the region if it were to contract for power the region doesn't need regardless of the source of the electricity.

In recent years, according to TVA, power demand throughout the Tennessee Valley has declined.

In 2013, TVA began working with its customers to develop a long-term plan to meet the region's power needs through 2033. In 2015, when TVA completed its Integrated Resource Plan, that plan concluded—this is TVA talking—that "there is no immediate need for new base load plants after Watts Bar Nuclear Unit 2 comes online and upgrades are completed at Browns Ferry Nuclear Plant." As a result of this conclusion, because TVA did not need power, TVA decided last year to sell the unfinished Bellefonte nuclear power plant.

For the foreseeable future, TVA has said it doesn't need any new baseload power and doesn't plan on any major new capital construction projects. This is good news for ratepayers because it means TVA can reduce debt and keep electric rates low. So why would TVA announce that it doesn't need new power for the next 15 years, sell a nuclear power plant capable of producing reliable baseload power for the next 60 years, and then turn around and buy unreliable wind power that might only be available for 20 or 30 years until the turbines break down?

TVA is, generally speaking, on a very good path. Its leadership has made sound decisions that will benefit ratepayers and our region. To fulfill its mission to provide safe, clean, reliable, and affordable power for the region's homes and businesses—that is its mission—it has opened the first nuclear power reactor in the 21st century. And I may say, going back to Senator WHITEHOUSE's speech, nuclear power is

emission free—no sulfur, no nitrogen, no mercury, no carbon. Nuclear power produces 60 percent of all of our carbon-free electricity. TVA is also placing pollution control equipment on all of its coal plants and is completing new natural gas plants. The TVA has done this while reducing its debt and reducing electric rates, which is good news for jobs and economic development in the region. Even if TVA did need more power, which it has said it does not, TVA should not agree to buy more wind power which is comparatively unreliable and expensive.

A look at TVA's previous experience with wind power illustrates how unreliable it can be, especially in our region. In 2001, TVA opened its first commercial-scale wind project in the Southeast. It is generous to say that it has been a failure. This project on Buffalo Mountain near Knoxville has the capacity to generate 27 megawatts of electricity; however, according to TVA, in 2016—last year—the Buffalo Mountain wind turbines produced only 4.3 megawatts on average. Capacity is 27 megawatts and generation was 4.3 megawatts—that is just 16 percent of their rated capacity. In other words, these turbines, which cost as much as $40 million to build and must cost millions more over the life of the contract, produce little electricity and little value to TVA's ratepayers.

Wind usually blows at night when consumers are asleep and don't need as much electricity. Until there is some way to store large amounts of wind power, a utility still needs to operate gas, nuclear, or coal plants when the wind doesn't blow. For example, take a recent TVA peak summer day. On July 26, 2016, Tennessee Valley homes and businesses consumed 29,512 megawatts of electricity—nearly all of TVA's capacity of 33,000 megawatts of electricity. Part of TVA's capacity on that day included contracts for nearly 1,250 megawatts of electricity produced by wind power. However, at the peak demand during the day, when power is most urgently needed, those wind turbines with a rated capacity of 1,250 megawatts actually delivered only 185 megawatts of electricity. So on a day when the Tennessee Valley needed power the most, wind turbines provided less than 15 percent of their rated capacity and less than 1 percent of the total electricity needed to power our region's homes and businesses.

Not only is wind power unreliable, it can be more expensive than nuclear, which also produces zero emissions, or natural gas, which is low emission.

TVA is currently completing a new 900-megawatt natural gas plant for roughly $975 million that will improve air quality in Memphis and be one of the most efficient natural gas plants in the world. Natural gas plants usually operate for at least 30 years and according to TVA can provide power in as little as 20 minutes to meet peak demand during hot summer afternoons and cold winter nights.

Last year, TVA opened the country's first nuclear power reactor in the 21st century, Watts Bar 2, at a cost of $5 billion. Watts Bar 2 will safely provide 1,150 megawatts of power more than 90 percent of the time for the next 40, 60, and possibly even 80 years, all of it emission free, no sulfur, no nitrogen, no mercury, no carbon.

The point is, TVA has concluded that it doesn't need more power for the foreseeable future; therefore, its board should resist obligating TVA's ratepayers for any new large power contracts, much less contracts for comparatively expensive and unreliable wind power. Instead, TVA should continue to provide low-cost, reliable power to the region because that boosts economic development throughout the Tennessee Valley.

I thank the Presiding Officer, and I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

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

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

Under the previous order, all remaining time for debate on H.J. Res. 83 has been yielded back.

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

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

Mr. SASSE. Mr. President, I ask for the yeas and nays.

The PRESIDING OFFICER. Is there a sufficient second?

There appears to be a sufficient second.

The clerk will call the roll.

The assistant bill clerk called the roll.

Mr. CORNYN. The following Senators are necessarily absent: the Senator from Georgia (Mr. ISAKSON) and the Senator from Kentucky (Mr. PAUL).

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

The result was announced—yeas 50, nays 48, as follows:

[Rollcall Vote No. 93 Leg.]

YEAS—50

Alexander	Fischer	Perdue
Barrasso	Flake	Portman
Blunt	Gardner	Risch
Boozman	Graham	Roberts
Burr	Grassley	Rounds
Capito	Hatch	Rubio
Cassidy	Heller	Sasse
Cochran	Hoeven	Scott
Collins	Inhofe	Shelby
Corker	Johnson	Strange
Cornyn	Kennedy	Sullivan
Cotton	Lankford	Thune
Crapo	Lee	Tillis
Cruz	McCain	Toomey
Daines	McConnell	Wicker
Enzi	Moran	Young
Ernst	Murkowski	

NAYS—48

Baldwin	Gillibrand	Murray
Bennet	Harris	Nelson
Blumenthal	Hassan	Peters
Booker	Heinrich	Reed
Brown	Heitkamp	Sanders
Cantwell	Hirono	Schatz
Cardin	Kaine	Schumer
Carper	King	Shaheen
Casey	Klobuchar	Stabenow
Coons	Leahy	Tester
Cortez Masto	Manchin	Udall
Donnelly	Markey	Van Hollen
Duckworth	McCaskill	Warner
Durbin	Menendez	Warren
Feinstein	Merkley	Whitehouse
Franken	Murphy	Wyden

NOT VOTING—2

Isakson	Paul

The joint resolution (H.J. Res. 83) was passed.

The PRESIDING OFFICER. The majority leader.

EXECUTIVE SESSION

EXECUTIVE CALENDAR

Mr. MCCONNELL. Mr. President, I move that the Senate proceed to executive session to consider Calendar No. 20, David Friedman to be Ambassador to Israel.

The PRESIDING OFFICER. The question is on agreeing to the motion.

The motion was agreed to.

The PRESIDING OFFICER. The clerk will report the nomination.

The senior assistant legislative clerk read the nomination of David Friedman, of New York, to be Ambassador Extraordinary and Plenipotentiary of the United States of America to Israel.

CLOTURE MOTION

Mr. MCCONNELL. Mr. President, I send a cloture motion to the desk.

The PRESIDING OFFICER. The cloture motion having been presented under rule XXII, the Chair directs the clerk to read the motion.

The senior assistant legislative clerk read as follows:

CLOTURE MOTION

We, the undersigned Senators, in accordance with the provisions of rule XXII of the Standing Rules of the Senate, do hereby move to bring to a close debate on the nomination of David Friedman, of New York, to be Ambassador Extraordinary and Plenipotentiary of the United States of America to Israel.

Mitch McConnell, Steve Daines, John Cornyn, Tom Cotton, Bob Corker, John Boozman, John Hoeven, James Lankford, Roger F. Wicker, John Barrasso, Lamar Alexander, Orrin G. Hatch, David Perdue, James M. Inhofe, Mike Rounds, Bill Cassidy, Thom Tillis.

Mr. MCCONNELL. Mr. President, I ask unanimous consent that the mandatory quorum call with respect to the nomination be waived.

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

LEGISLATIVE SESSION

Mr. MCCONNELL. Mr. President, I move to proceed to legislative session.

The PRESIDING OFFICER. The question is on agreeing to the motion.

The motion was agreed to.

PROVIDING FOR CONGRESSIONAL DISAPPROVAL OF A RULE SUBMITTED BY THE FEDERAL COMMUNICATIONS COMMISSION—MOTION TO PROCEED

Mr. MCCONNELL. Mr. President, I move to proceed to S.J. Res. 34.

The PRESIDING OFFICER. The clerk will report the motion.

The senior assistant legislative clerk read as follows:

Motion to proceed to Calendar No. 16, S.J. Res. 34, a joint resolution providing for congressional disapproval under chapter 8 of title 5, United States Code, of the rule submitted by the Federal Communications Commission relating to ''Protecting the Privacy of Customers of Broadband and Other Telecommunications Services.''

The PRESIDING OFFICER. The question is on agreeing to the motion.

The motion was agreed to.

PROVIDING FOR CONGRESSIONAL DISAPPROVAL OF A RULE SUBMITTED BY THE FEDERAL COMMUNICATIONS COMMISSION

The PRESIDING OFFICER. The clerk will report the joint resolution.

The senior assistant legislative clerk read as follows:

A joint resolution (S.J. Res. 34) providing for congressional disapproval under chapter 8 of title 5, United States Code, of the rule submitted by the Federal Communications Commission relating to ''Protecting the Privacy of Customers of Broadband and Other Telecommunications Services.''

The PRESIDING OFFICER. The Senator from Arizona.

Mr. FLAKE. Mr. President, I rise in support of my resolution of disapproval under the Congressional Review Act of the FCC's broadband privacy restrictions. As chairman of the Senate Judiciary Committee's Privacy Subcommittee, I have spent more than a year closely examining this issue.

In February of 2015 the FCC, under then-Chairman Tom Wheeler, took the unprecedented step of reclassifying broadband providers as ''common carriers'' under title II of the Communications Act. In other words, on a 3-to-2 party-line vote, the FCC decided that internet service providers should be treated like telephone companies for regulatory purposes. The decision encroached on the Federal Trade Commission's jurisdiction to regulate ISP privacy policies, stripping these companies of their traditional privacy regulator.

Recognizing that his actions to impose net neutrality on ISPs created regulatory uncertainty, last spring Chairman Wheeler began to float the idea of implementing new FCC privacy rules. The FCC decided, again on a 3-to-2 party-line vote, to move forward with the rule change just before election day. The whole process was unsettling, to say the least.

The FCC ultimately decided to commandeer an area of regulatory authority for itself, without any meaningful check on this unilateral action. Once it initiated the bureaucratic power grab, it proceeded to establish new rules restricting the free speech of its regulatory target.

I submitted comments to the agency expressing my constitutional concerns about its proposed rule. I wasn't alone in doing so. Noted Harvard law professor Larry Tribe, hardly one to be confused for a conservative, did the same. But the rules were finalized nonetheless.

While the FCC recently took a step in the right direction by staying the application of the privacy rules, these midnight regulations are still hanging out there. Congress needs to repeal these privacy restrictions in order to restore balance to the internet ecosystem and provide certainty to consumers.

These regulations have altered the basic nature of privacy protection in the United States. For decades, the FTC policed privacy based on consumer expectations for their data, not bureaucratic preferences. These consumer expectations were just common sense: Sensitive data deserves more protection than nonsensitive data.

Unfortunately, the FCC rules dispensed with this commonsense regulatory approach. Under the new rules, what matters isn't what the data is but, rather, who uses it. This creates a dual-track regulatory environment where some consumer data is regulated one way if a company is using it under the FCC's jurisdiction and an entirely different way if its use falls under the FTC, or the Federal Trade Commission.

This is all confusing enough, but it gets worse. In the consumer technology sector, innovation is the name of the game. Companies are constantly rolling out new products and competing to win over consumers. By the same token, consumers are always on the lookout for the newest gadget or app. But the FCC's privacy order makes it increasingly difficult for consumers to learn about the latest product offerings from broadband providers. Instead of being notified about faster and more affordable alternatives for their family's home internet needs, under the FCC's privacy order, Arizonans might get left in the dark.

The FCC's heavyhanded data requirements restrict the ability of broadband providers to offer services tailored to their customers' needs and interests, and they lead to inconsistent treatment of otherwise identical data online. When a regulation diminishes innovation, harms consumer choice, and is just all-around confusing, it is a bad regulation. The FCC's privacy rule for ISPs is a bad regulation.

When it chose to impose needlessly onerous privacy regulations on broadband providers while leaving the rest of the internet under the successful FTC regime, the FCC unfairly picked one politically favored industry—the edge providers—to prevail over a different industry—broadband.

Repealing the FCC's privacy action is a crucial step toward restoring a single, uniform set of privacy rules for the internet. The FTC's privacy rules are the result of an ongoing, data-driven effort to understand and protect consumer expectations. That is the FTC. The FCC's rules, on the other hand, are the hasty byproduct of political interest groups and reflect the narrow preferences of well-connected insiders.

To sum all of this up, the FCC's midnight privacy rules are confusing and counterproductive. This CRA will get rid of it, pure and simple. But let me say what it won't do. Despite claims to the contrary, using this CRA will not leave consumers unprotected. That is because the FCC is already obligated to police the privacy practices of broadband providers under section 222 of the Communications Act, as well as various other Federal and State laws.

Both Chairman Wheeler and Chairman Pai agree on that point. Just last week, Chairman Pai wrote to my friends on the other side of the aisle confirming this legal fact.

This resolution will not disrupt the FCC's power, nor will it infringe on the FTC's jurisdiction elsewhere. Neither will it affect how broadband providers currently handle consumer data. Broadband providers are currently regulated under section 222, and they will continue to be after these midnight regulations are rescinded.

Passing this CRA will send a powerful message that Federal agencies can't unilaterally restrict constitutional rights and expect to get away with it. I urge my colleagues to support this resolution of disapproval.

I yield back the remainder of my time.

The PRESIDING OFFICER. The Senator from Florida.

Mr. NELSON. Mr. President, we are talking about taking privacy rights away from individuals if we suddenly eliminate this rule. Do you want a large company that is an internet provider, that has all the personal, sensitive information because of what you have been doing on the internet—do you want that company to be able to use that for commercial purposes without your consent? That is the issue.

If you want to protect people's privacy, I would think you would want to require that an individual who has paid money for the internet provider to provide them with the internet—you go on the internet, and you go to whatever site you want. You do business. You do personal business. You do banking. You go on the internet and you buy things. You talk about your children's school, about when you are going to pick up your children, maybe what your children want to wear to school. You want to talk on the internet about anything that is personal. Do you want that internet provider to have access to

that information to be used for commercial purposes without your consent? If you ask that question to the American people, they are going to give you a big, resounding no.

Should the internet provider use that information if you give your consent? Then that is fair game. If you give your consent so that they can alert you before a certain day—you might want to give a certain gift to your wife on her birthday, and they might have all that information, but maybe you don't want them to have the information about where your children go to school.

Personal, sensitive information is what we are talking about; therefore, the whole issue here is, do you want the internet provider to be able to use that information without the person's consent, or do you want the person to have to actually effectively opt-in in order to give the internet provider that consent? To me, this is a clear-cut case of privacy.

You can fancy it up, talking about FCC rules and so forth—and we have the author of the Telecom Act, Senator MARKEY, here, and he is going to talk about this and protections that were put in for telephones. But back then, remember, it was just you call from this number to this number on such and such a day for such and such a period of time. Even that was protected. But now—just think about this—we are talking about all the personal transactions that you do every day through the internet.

So I rise today in opposition to this resolution brought under the Congressional Review Act to disapprove the Federal Communications Commission's broadband consumer privacy rules. I would think that the distinguished Senator sitting in the Chair, who values privacy as he does—that this is going to be something he would be concerned about, as well as every other Senator in this Chamber, because you know that if you ask your constituents ''Do you want your privacy invaded without your consent?'' you know what the answer is going to be.

Americans care about their online privacy. They want to have control over how their personal information is exploited by third parties. In fact, a recent survey by the Pew Research Center found that 91 percent of adults feel they have lost control of how their personal information is collected and then used. That same study found that 74 percent of Americans believe it is very important that they be in control of who can get information about them, and a majority believe that their travels around the internet—the sites they visit and how long they spend in that location—are sensitive information that should be protected. I hope the Senators are going to pay attention to this because we are talking about sensitive, personal information.

Do you know that your geolocation is something that you are transmitting over the internet? Do you want your location and where you have been to be in the hands of somebody who could use that for commercial purposes? I don't think so. That is why this past October the FCC provided broadband subscribers with tools to allow them to have greater control over how their personal online information is used, shared, and then sold.

The FCC has been protecting telephone customers' privacy for decades, and it updated its longstanding privacy protections to protect the privacy of broadband customers. In fact, it is safe to say that what the FCC did last October was the most comprehensive update to its consumer privacy and data protection rules in decades.

The FCC put in place clear rules that require broadband providers to seek their subscribers' specific and informed consent before using or sharing sensitive personal information and give broadband customers the right to opt out of having their nonsensitive information used and shared if they chose to do so. The FCC also gave broadband subscribers additional confidence in the protection and security of their data by putting in place reasonable data security and breach notification requirements for broadband providers.

Simply put, the FCC decided to put American consumers—each one of us who pays these monthly fees for our broadband service—in the driver's seat of how their personal online data is used and shared by the broadband provider to which they have been paying a monthly fee to use their service. Is that too much to ask? I don't think so.

Please understand that broadband providers know a lot about every one of us. In fact, it may be startling, the picture that your broadband provider can develop about your daily habits and then sell to the highest bidder.

Your home broadband provider can know when you wake up every day either by knowing the time each morning that you log on to the internet to check the weather and news of the morning or through a connected device in your home.

That provider may know immediately that you are not feeling well, that you kind of feel sick, assuming you peruse the internet, like most of us do, to get a quick check on your symptoms. In fact, your broadband provider may know more about your health and your reaction to illness than you are willing to share with your doctor. Think about that.

Personal privacy? If you let this go to the highest bidder, personal privacy of sensitive information is going to be out the window.

Your home broadband provider can build a profile about your listening and viewing habits given that today most of us access music, news, and video programming over broadband.

Your broadband provider may have a better financial picture of you than even your bank or your brokerage firm or your financial adviser because they see every website you visit across every device in your home and can build a thorough profile about you through these habits.

If you live in a connected home, the home of the future—and the future is now, by the way—they may know even more details about how you go about your day-to-day activities. Your mobile broadband provider knows how you move about through the day, your geolocation. They know through information about that geolocation and the internet activity. All of that is through—guess what—this mobile device. Don't you think this is connected to the internet? And that is not to mention the sort of profile a broadband provider can start to build about our children from their birth. It is a gold mine of data, the holy grail, so to speak.

It is no wonder that broadband providers want to be able to sell this information to the highest bidder without the consumer's knowledge or consent. And they want to collect and use this information without providing transparency or being held accountable. Is this what you want to inflict upon your constituents in your State by changing this rule about their personal, sensitive privacy? I don't think so. You better know what you are doing when you vote tomorrow. This vote is coming about noon tomorrow. You better know.

As a country, we have not stood for this in the past, this kind of free utilization of information by entities that may want to have a unique look at who we are. We place stringent limits on the use of information by our doctors. We place stringent limits on our banks. When it comes to our children, I mean, that ought to be off-limits.

Broadband providers can build similar profiles about us and in fact may be able to provide more detail about someone than any one of those entities can. Passing this Senate resolution will take consumers out of the driver's seat and place the collection and use of their information behind a veil of secrecy, despite the rhetoric surrounding our debate today suggesting that eliminating these commonsense rules will better protect consumers' privacy online or will eliminate consumer confusion.

Don't fall for that argument, Senators. In fact, the resolution will wipe out thoughtful rules that were the product of months of hard work by the experts at the agency on regulating communications networks of all kinds. Those rules were crafted based upon a thorough record developed through an extensive multimonth rulemaking proceeding. The FCC received more than one-quarter of a million filings during this proceeding. They listened to the American people.

The agency received extensive input from stakeholders in all quarters of the debate, from the broadband providers and telephone companies to the public interest groups and from academics to individual consumers. We are going to wipe all of this away at noon tomorrow

with a vote that you can do it by 50 votes in this Chamber? I don't think this is what the people want.

On top of this, the rules are based on longstanding privacy protections maintained by the FCC for telephone companies, as well as the work of and the principles advocated by the Federal Trade Commission and advocated by State attorneys general and others in protecting consumer privacy. The FCC rules put in place basic safeguards for consumers' privacy based on three concepts that are widely accepted as the basis for privacy regulation in the United States and around the world: notice, choice—individual choice, consumer choice—and security, those three. They are not the radical proposals that some would have you believe they are.

First, the rules require broadband providers to notify their customers about what types of information it collects about the individual customers, when they disclose or permit access to that information, and how customers can provide consent to that collection and disclosure.

Second, the rules give consumers choice by requiring broadband providers to obtain a customer's affirmative opt in; in other words, I give you my consent before you can use or share my sensitive personal information.

As I mentioned earlier, sensitive information includes a customer's precise geographic location—I don't think you want some people to know exactly where you are—your personal information, health, financial, information about your children, your Social Security number—how many laws do we have protecting Social Security numbers—the content you have accumulated on the web, web browsing, and application usage information.

For information considered nonsensitive, broadband providers must allow customers to opt out of use and sharing of such information. Broadband providers must provide a simple, persistently available means for customers to exercise their privacy choices.

Third, broadband providers are required to take reasonable measures to protect customers' information from unauthorized use, disclosure, or access. They must also comply with specific breach notifications. In other words, if somebody has busted the internet and stolen all of this information from the site, don't you think you ought to be notified that your personal information was hacked? Well, that is one of the requirements.

So then I ask my colleagues: What in the world is wrong with requiring broadband providers to give their paying customers clear, understandable, and accurate information about what confidential and potentially highly personal information those companies collect? What is wrong with getting their consent to collect that information from their subscribers?

What is wrong with telling customers how their information is collected when they use their broadband service? What is wrong with telling customers with whom they share this sensitive information? What is wrong with letting customers have a say in how their information is used? What is wrong with recognizing that information about a consumer's browsing history and ap usage, sensitive and personal information, should be held to a higher standard before it is shared with others? What is wrong with all of that?

What is wrong with seeking a parent's consent before information about their children's activities or location is sold to the highest bidder? Do we as parents not go out of our way to protect our children's well-being and their privacy? Trying to overturn this rule is what is wrong.

What is wrong with protecting consumers from being forced to sign away their privacy rights in order to subscribe to a broadband service? I want your internet service. Do I have to sign away the rights to my private information—private, sensitive information? What is wrong with making companies take reasonable efforts to safeguard the security of consumers' data?

What is wrong with making companies notify their subscribers when they have had a breach? Again, I ask my colleagues: What in the world is wrong with giving consumers increased choice, transparency, and security online?

Supporters of the joint resolution fail to acknowledge the negative impact this resolution is going to have on the American people. This regulation is going to wipe away a set of reasonable, commonsense protections. I want to emphasize that. Is it common sense to protect our personal, sensitive, private information? Of course it is. But we are just about—in a vote at noon tomorrow, with a majority vote, not a 60-vote threshold, a majority vote here—we are just about to wipe all of that out. It will open our internet browsing histories and application usage patterns up to exploitation for commercial purposes by broadband providers and third parties who will line up to buy your information.

It will create a privacy-free zone for broadband companies, with no Federal regulator having effective tools to set rules of the road for collection, use, and sale of that uniquely personal information of yours. It will tie the hands of the FCC because they cannot go back. Once this rule is overturned, they cannot go back and redo this rule. It will tie the hands of the Federal Communications Commission and eliminate the future ability to adopt clear, effective privacy and data security protections for you as a subscriber, in some cases even for telephone subscribers.

To be sure, there are those who disagree with the FCC's broadband consumer privacy rules. There is an avenue for those complaints. These same companies that are pushing the joint resolution have filed for reconsideration of the rule at the FCC, and there is a judicial system. That is the appropriate way. Go back and get the FCC to amend—if you all are so concerned—or let the judicial system work its will, but do not do it in one fell swoop in a majority rule in this body tomorrow at noon.

In fact, the critics of the FCC's rules have an open proceeding at the FCC in which they can argue on the record with an opportunity for full public participation to change and alter these rules.

If the FCC did it—you have a new FCC, a new Chairman, a new majority on the FCC—let them be the ones to amend the rules after all the safeguards of the open hearings, of the comment period, all of that. By contrast, what we are using here to invade our privacy is a blunt congressional instrument called the Congressional Review Act. It means that all aspects of the rules adopted by the FCC must be overturned at once, including changes to the FCC's telephone privacy rules.

It would deny the agency the power to protect consumers' privacy online, and it would prevent the FCC—get this—prevent them, the FCC, the regulatory body that now has a new chairman and a new majority—it would prevent the FCC from ever adopting even similar rules. I don't think that is what we want to do because it does not make sense. That is exactly what we are about to do.

I also want to address the argument that the FCC rules are unfair to broadband providers because the same rules do not apply to other companies in the internet ecosystem. Supporters of this resolution will argue that the other entities in the internet ecosystem have access to the same personal information that the broadband providers do.

They argue that everyone in the data collection business should be on a level playing field. Well, I ask my colleagues whether they have asked their constituents that question directly. Do Americans really believe that all persons who hold data about them should be treated the same? I venture to guess that most Americans would agree with the FCC that companies that are able to build detailed particulars about you and build those particular pictures about your lives through unique insights because of what you do every day in their internet usage—shouldn't those companies be held to a higher standard?

In addition, the FCC's rules still allow broadband providers to collect and use their subscribers' information. The providers merely need to obtain consent from those activities when it comes to their subscribers' highly sensitive information.

The FCC also found that broadband providers, unlike any other companies in the internet ecosystem, are uniquely able to see every packet of information that a subscriber sends and receives—every packet of information that you

send or receive over the internet while on their networks. So if you have a provider, they are on your iPhone, and you are using them, they are seeing everything. That is not the case if you go to Google because Google sees only what you do while you are on Google. But the internet provider, the pipe that is carrying your information—they see everything that you do.

Supporters of the joint resolution also hold out the superiority of the Federal Trade Commission's efforts on protecting privacy. They argue that there should be only one privacy cop on the beat. But, folks, that ignores reality. The FTC doesn't do everything. There are a number of privacy cops on the beat. Congress has given the FCC, the FTC, the FDA, and NHTSA regulatory authority to protect consumers' privacy.

You had better get this clear because the FCC is the only agency to which Congress has given statutory authority to adopt rules to protect broadband customers' privacy. The FTC, the Federal Trade Commission, does not have the rulemaking authority in data security, even though commissioners at the FTC have asked Congress for such authority in the past. Given recent court cases, the FTC now faces even more insurmountable legal obstacles to taking action, protecting broadband consumers' privacy.

So don't be fooled by this argument that folks are telling you over here that it ought to be the FTC, the Federal Trade Commission. As many have pointed out, elimination of the FCC's rules will result in a very wide chasm, where broadband and cable companies have no discernible regulation while internet ''edge'' companies abide by the FTC enforcement efforts.

Without clear rules of the road, broadband subscribers will have no certainty of choice about how their private information can be used and no protection against its abuse—no protection, my fellow Americans, of your personal, sensitive, private data. That is why this Senator supports the FCC's broadband consumer privacy rules.

I want to encourage my fellow Senators: You had better examine what you are about to do to people's personal privacy before you vote to overturn this rule tomorrow.

I urge my colleagues to vote against the joint resolution.

Mr. President, I yield the floor.

The PRESIDING OFFICER (Mr. TILLIS). The Senator from South Dakota.

ORDERS FOR THURSDAY, MARCH 23, 2017

Mr. THUNE. Mr. President, I ask unanimous consent that when the Senate completes its business today, it adjourn until 9:30 a.m., Thursday, March 23; further, that following the prayer and pledge, the morning hour be deemed expired, the Journal of proceedings be approved to date, the time for the two leaders be reserved for their use later in the day, and morning business be closed; finally, that the Senate resume consideration of S.J. Res. 34.

The PRESIDING OFFICER. Is there objection?

Without objection, it is so ordered.

Mr. THUNE. Mr. President, the internet has grown at an unbounded rate in the years since its inception, a phenomenon no one can argue with. Much of that growth can be attributed to the light-touch regulatory approach that the government adopted in the early days of the web.

As chairman of the Commerce Committee, which has jurisdiction over the internet, I have worked hard to promote policies that encourage the private sector to invest in and grow the internet ecosystem as a whole. All of that is jeopardized, however, if government bureaucrats have the ability to overregulate the digital world. When it comes to overregulating the internet, one need look no further than the Democratic-controlled Federal Communications Commission under President Obama.

In a world that was turning away—it was literally turning away from the legacy telecommunication services and, instead, toward dynamic internet applications, the FCC found its role gradually diminishing. This is an inevitable and good byproduct, I might add, of a more competitive environment brought about by technological innovation and successful light-touch policies.

Yet the Obama FCC fought hard against this technological progress and, instead, pursued an aggressively activist and partisan agenda that put government edicts ahead of real consumer desires. Over the last 2 years, the FCC has made a stunning bureaucratic power grab. First, the FCC stripped away the Federal Trade Commission's authority to police internet providers and seized that for itself by recharacterizing such services as monopoly-era telecommunications.

Then in 2016, the FCC, which has little experience regulating internet privacy, decided to turn our country's privacy laws on their head by abandoning the time-tested enforcement approach of the FTC, the Federal Trade Commission. These actions by the FCC ignored both common sense and real world data and, instead, focused on hypothetical harms of the future.

Ignoring years of internet ecosystem precedent, where everyone was treated the same, the FCC's 2016 broadband privacy regulations would apply only to certain parts of the internet. This is a source of significant concern because at any particular time, consumers will not have reasonable certainty of what the rules are and how their privacy decisions will be applied.

Are you at home on Wi-Fi? At home on a smartphone? Using your smartphone on a friend's Wi-Fi? Using the Internet at a library? Each of these could have very different privacy implications for a consumer because of the FCC's piecemeal approach to privacy, leading to more confusion and uncertainty, not increased privacy protections, as promised.

In enacting these lopsided rules, the FCC seems to have gone out of its way to disregard established FTC practice by creating new regulations that differ significantly from the FTC's tried-and-true framework. The FTC's privacy regime is clear, easy to understand, and applies evenly throughout the marketplace. By contrast, the FCC's rules are complex, confusing, and often lead to the same data being treated inconsistently online.

The FCC's action would harm consumers in other ways as well. Even though no consumer wants to be in the dark about newer and cheaper services, the FCC's rules actually make it more difficult for customers to hear about new, innovative offerings from their broadband providers. And because the FCC imposed heavy-handed data requirements on these internet companies, they will have less ability to offer services that are tailored to their customers' needs and interests. Furthermore, the FCC unfairly distorted the marketplace when it imposed unnecessarily onerous privacy restrictions on broadband providers while leaving the rest of the internet under the strong and successful regime at the FTC.

When speaking about the economic opportunities the internet now affords us, President Obama's last FCC chairman declared that ''government is where we will work this out.''

''Government is where we will work this out.''

Well, I couldn't disagree more. I believe the marketplace should be the center of the debate over how our digital networks would function, not the FCC. I believe consumers and job creators should be the ones deciding about new technologies, not the government.

The resolution before us today is the first step toward restoring regulatory balance to the internet ecosystem. The best way for that balance to be achieved is for there to be a single, uniform set of privacy rules for the internet—the entire internet—rules that appropriately weigh the need to protect consumers with the need to foster economic growth and continued online innovation.

The FCC is simply the wrong venue for that effort. Its statutory scope is too narrow, and it lacks institutional expertise on privacy. The current chairmen of the FCC and the FTC both recognize this, having jointly called for returning jurisdiction over broadband providers' privacy and data security practices to the FTC ''so that all entities in the online space can be subject to the same rules.''

For those reasons, I support the resolution before us that would provide congressional disapproval of the Obama administration's misguided and unfair attempts to regulate the internet, and I encourage my colleagues to support the resolution as well.

To those people who have heard that this resolution somehow results in the elimination of all online protections for consumers, I can assure you those

claims are simply unfounded scaremongering. If this resolution is enacted, it will repeal only a specific rulemaking at the FCC that has yet to be implemented. What we are talking about here hasn't even been implemented yet. It will not touch the FCC's underlying statutory authority. Indeed, the FCC will still be obligated to police the privacy practices of broadband providers, as provided for in the Communications Act. The new chairman of the FCC confirmed this when he appeared before the Commerce Committee earlier this month. No matter what happens with this resolution, the FTC will continue to have its authority to police the rest of the online world.

It is my hope that once the Senate passes this resolution, the House will move quickly to take it up and send it to the President for his signature because, before our country can get back on the right track, we must first move past the damaging regulations adopted in the waning days of the Obama administration.

I thank Senator FLAKE for his leadership on this issue. Without his tireless efforts, we would not be here today, standing ready to move decisively toward a better future for the internet.

I urge my colleagues to support the resolution that we will vote on tomorrow at noon.

MORNING BUSINESS

COMMITTEE ON THE BUDGET

RULES OF PROCEDURE

Mr. ENZI. Mr. President, I ask unanimous consent that the rules of the Senate Committee on the Budget for the 115th Congress be printed in the RECORD.

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

RULES OF PROCEDURE

I. MEETINGS

(1) The committee shall hold its regular meeting on the first Thursday of each month. Additional meetings may be called by the chair as the chair deems necessary to expedite committee business.

(2) Each meeting of the committee, including meetings to conduct hearings, shall be open to the public, except that a portion or portions of any such meeting may be closed to the public if the committee determines by record vote in open session of a majority of the members of the committee present that the matters to be discussed or the testimony to be taken at such portion or portions—

(a) will disclose matters necessary to be kept secret in the interests of national defense or the confidential conduct of the foreign relations of the United States;

(b) will relate solely to matters of the committee staff personnel or internal staff management or procedure;

(c) will tend to charge an individual with crime or misconduct, to disgrace or injure the professional standing of an individual, or otherwise to expose an individual to public contempt or obloquy, or will represent a clearly unwarranted invasion of the privacy of an individual;

(d) will disclose the identity of any informer or law enforcement agent or will disclose any information relating to the investigation or prosecution of a criminal offense that is required to be kept secret in the interests of effective law enforcement; or

(e) will disclose information relating to the trade secrets or financial or commercial information pertaining specifically to a given person if—

(i) an act of Congress requires the information to be kept confidential by Government officers and employees; or

(ii) the information has been obtained by the Government on a confidential basis, other than through an application by such person for a specific Government financial or other benefit, and is required to be kept secret in order to prevent undue injury to the competitive position of such person.

(f) may divulge matters required to be kept confidential under other provisions of law or Government regulations.

(3) Notice of, and the agenda for, any business meeting or markup shall be provided to each member and made available to the public at least 72 hours prior to such meeting or markup.

II. CONSIDERATION OF BUDGET RESOLUTIONS

(1) If the chair of the committee makes proposed legislative text of a concurrent resolution on the budget available to all committee members by 12:00 p.m., five days prior to the start of a meeting or markup to consider the resolution, during that meeting or markup:

(a) it shall not be in order to consider a first degree amendment unless the amendment has been submitted to the chief clerk by 5:00 p.m. two days prior to the start of the meeting or markup, except that an amendment in the nature of a substitute offered by the chair of the committee shall not be required to be filed in advance, and

(b) it shall not be in order to consider a second degree amendment unless the amendment has been submitted to the chief clerk by 5:00 p.m. on the day prior to the start of the meeting or markup, and

(c) it shall not be in order to consider a side-by-side amendment unless the amendment has been submitted to the chief clerk by 5:00 p.m. on the day prior to the start of the meeting or markup, and the amendment is filed in relation to a particular first degree amendment that is considered by the committee.

(2) During consideration of a concurrent resolution on the budget, it shall not be in order to consider an amendment that would have no force or effect if adopted.

III. ORDER OF RECOGNITION

Those members who are present at the start of any meeting of the committee including meetings to conduct hearings, shall be recognized in order of seniority based on time served as a member of the committee. Any members arriving after the start of the meeting shall be recognized, in order of appearance, after the most junior member.

IV. QUORUMS AND VOTING

(1) Except as provided in paragraphs (2) and (3) of this section, a quorum for the transaction of committee business shall consist of not less than one-third of the membership of the entire committee: Provided, that proxies shall not be counted in making a quorum.

(2) A majority of the committee shall constitute a quorum for reporting budget resolutions, legislative measures or recommendations: Provided, that proxies shall not be counted in making a quorum.

(3) For the purpose of taking sworn or unsworn testimony, a quorum of the committee shall consist of one Senator.

(4)(a) The committee may poll—

(i) internal committee matters including those concerning the committee's staff, records, and budget;

(ii) steps in an investigation, including issuance of subpoenas, applications for immunity orders, and requests for documents from agencies; and

(iii) other committee business that the committee has designated for polling at a meeting, except that the committee may not vote by poll on reporting to the Senate any measure, matter, or recommendation, and may not vote by poll on closing a meeting or hearing to the public.

(b) To conduct a poll, the chair shall circulate polling sheets to each member specifying the matter being polled and the time limit for completion of the poll. If any member requests, the matter shall be held for a meeting rather than being polled. The chief clerk shall keep a record of polls; if the committee determines by record vote in open session of a majority of the members of the committee present that the polled matter is one of those enumerated in rule I(2)(a)–(e), then the record of the poll shall be confidential. Any member may move at the committee meeting following a poll for a vote on the polled decision.

V. PROXIES

When a record vote is taken in the committee on any bill, resolution, amendment, or any other question, a quorum being present, a member who is unable to attend the meeting may vote by proxy if the absent member has been informed of the matter on which the vote is being recorded and has affirmatively requested to be so recorded; except that no member may vote by proxy during the deliberations on Budget Resolutions unless a member is experiencing a health issue and the chair and ranking member agree to allow that member to vote by proxy on amendments to a Budget Resolution.

VI. HEARINGS AND HEARING PROCEDURES

(1) The committee shall make public announcement of the date, place, time, and subject matter of any hearing to be conducted on any measure or matter at least 1 week in advance of such hearing, unless the chair and ranking member determine that there is good cause to begin such hearing at an earlier date.

(2) At least 24 hours prior to the scheduled start time of the hearing, a witness appearing before the committee shall file a written statement of proposed testimony with the chief clerk who is responsible for circulating the proposed testimony to all members at the same time. The requirement that a witness submit testimony 24 hours prior to a hearing may be waived by the chair and the ranking member, following their determination that there is good cause for the failure of compliance.

VII. COMMITTEE REPORTS

(1) When the committee has ordered a measure or recommendation reported, following final action, the report thereon shall be filed in the Senate at the earliest practicable time.

(2) A member of the committee, who gives notice of an intention to file supplemental, minority, or additional views at the time of final committee approval of a measure or matter, shall be entitled to not less than 3 calendar days in which to file such views, in writing, with the chief clerk of the committee. Such views shall then be included in the committee report and printed in the same volume, as a part thereof, and their inclusions shall be noted on the cover of the report. In the absence of timely notice, the committee report may be filed and printed immediately without such views.

VIII. USE OF DISPLAY MATERIALS IN COMMITTEE

Committee members may use the electronic display system provided in the committee hearing room or physical graphic displays during any meetings or hearings of the committee. Physical graphic displays are limited to the following:

Charts, photographs, or renderings:

Size: no larger than 36 inches by 48 inches.

Where: on an easel stand next to the member's seat or at the rear of the committee room.

When: only at the time the member is speaking.

Number: no more than two may be displayed at a time.

IX. CONFIRMATION STANDARDS AND PROCEDURES

(1) Standards. In considering a nomination, the committee shall inquire into the nominee's experience, qualifications, suitability, and integrity to serve in the position to which he or she has been nominated. The committee shall recommend confirmation if it finds that the nominee has the necessary integrity and is affirmatively qualified by reason of training, education, or experience to carry out the functions of the office to which he or she was nominated.

(2) Information Concerning the Nominee. Each nominee shall submit the following information to the chief clerk, who will distribute to the chairman and ranking member at the same time:

(a) A detailed biographical resume which contains information concerning education, employment, and background which generally relates to the position to which the individual is nominated, and which is to be made public;

(b) Information concerning financial and other background of the nominee which is to be made public; provided, that financial information that does not relate to the nominee's qualifications to hold the position to which the individual is nominated, tax returns or reports prepared by federal agencies that may be submitted by the nominee shall, after review by the chair, ranking member, or any other member of the committee upon request, be maintained in a manner to ensure confidentiality; and,

(c) Copies of other relevant documents and responses to questions as the committee may so request, such as responses to questions concerning the policies and programs the nominee intends to pursue upon taking office.

(3) Report on the Nominee. After a review of all information pertinent to the nomination, a confidential report on the nominee may be prepared by the committee staff for the chair, the ranking member and, upon request, for any other member of the committee. The report shall summarize the steps taken and the results of the committee inquiry, including any unresolved matters that have been raised during the course of the inquiry.

(4) Hearings. The committee shall conduct a hearing during which the nominee shall be called to testify under oath on all matters relating to his or her suitability for office, including the policies and programs which he or she would pursue while in that position. No hearing or meeting to consider the confirmation shall be held until at least 72 hours after the following events have occurred: the nominee has responded to the requirements set forth in subsection (2), and, if a report described in subsection (3) has been prepared, it has been presented to the chairman and ranking member, and is available to other members of the committee, upon request.

50TH ANNIVERSARY OF THE VIETNAM WAR

Mr. KING. Mr. President, this month Togus VA Maine Healthcare System will observe the 50th anniversary of the Vietnam war by honoring veterans of the Vietnam war era and their families. Togus will welcome veterans, their families, and communities in a ceremony at the Togus Theater in Augusta on March 23, 2017, to commemorate their service and sacrifices and to thank them for dedicating both strength and service in defense of our freedom.

Throughout the war, the United States deployed nearly 3 million servicemembers to Vietnam. Over 58,200 Americans made the ultimate sacrifice, and more than 150,000 were wounded during the conflict. Our veterans selflessly served this country, and they deserve to be recognized for their unwavering patriotism, courage, and resilience that exemplifies the strength of the American spirit and our Nation's commitment to democracy worldwide.

Maine played a critical role in the war effort. Those who served in the Vietnam war represent the largest contingent of veterans in Maine, and their record of service has earned them our eternal gratitude. Nearly 48,000 soldiers from Maine served in Vietnam, and almost 350 Mainers lost their lives or went missing in action during the war.

For this observance of the 50th anniversary of the Vietnam war, I am proud to recognize the brave Americans who served, both overseas and here on the homefront. Their service makes this country great, and their countless personal sacrifices to protect our freedoms can never be fully repaid. It is my honor to express my gratitude to our veterans for their service during the Vietnam war and their many contributions to the State of Maine and our great Nation.

RECOGNIZING SMALL BUSINESS DEVELOPMENT CENTERS

Mr. RISCH. Mr. President, on behalf of myself and my colleague Senator SHAHEEN, I would like to recognize the contributions made to our Nation and its small businesses by the good work of America's small business development centers. As chairman and ranking member of the Senate Committee on Small Business and Entrepreneurship, Ranking Member SHAHEEN and I understand the impact that boosting small businesses makes, with 99.7 percent of all firms across America being small businesses and their employees making up 48 percent of the total workforce.

America's small business development centers provide small businesses across the country with high-quality, low- or no-cost consulting, and a variety of educational programs. These centers operate in all 50 States to support an established network of small businesses while encouraging new entrepreneurs to develop and execute their unique vision, helping innovators get their own small businesses up and running.

Small business development centers are successful because they provide the services of a large consulting firm on a locally scaled level in areas that may go unnoticed by other programs. They provide tailored, individualized attention to over 450,000 entrepreneurs a year, which resulted in $6.9 billion in new sales in 2015. That same year, America's small business development centers aided in the creation of over 100,000 jobs, and the small businesses they serve averaged a growth rate of 15.5 percent, which is nearly eight times the national average.

One of many success stories that can be told is that of Velma, a marketing software firm in Nampa, ID. Founded in 2006, the firm focused on empowering loan officers to create stronger relationships through a customized direct email program. The recession of 2008 hit Velma hard, and in 2010, the company entered into the small business development centers business accelerator program. The structure of the program provided organizational discipline, and the firm pivoted to providing email marketing for mortgage companies. Since the firm began participating in the accelerator program, Velma has quadrupled its employees and created a sustained positive cash flow.

It is a privilege for my colleague and I to recognize America's Small Business Development Centers Day today, March 22, 2017, and we wish them continued success as they work to support the next generation of America's small business owners and entrepreneurs.

Mrs. SHAHEEN. Mr. President, as ranking member of the U.S. Senate Committee on Small Business and Entrepreneurship, it is a privilege to join Chairman RISCH as we celebrate the first ever Small Business Development Center Day, which will unite the more than 1,000 small business development centers, SBDCs, across the country with the hundreds of thousands of entrepreneurs they have assisted in their 37-year history.

Small businesses are the engine of our economy, creating two out of every three new jobs in the United States. As Chairman RISCH stated, since 1980, America's SBDCs have provided these small businesses with high-quality, low- or no-cost consulting, and a variety of educational programs across the country. Together with SBA's other resource partners—women's business centers, veterans business outreach centers, and SCORE chapters—SBDCs have enhanced the ability of America's small businesses to grow and create jobs.

To provide some context for what this means to our economy, the association representing SBDCs estimates that SBDC clients start a new business every 30 minutes, create a new job every 5 minutes, generate $100,000 in

new sales every 7.5 minutes, and raise $100,000 in capital every 11 minutes. Job growth for SBDC clients is nearly 10 times greater than job growth for the average business.

Under the leadership of Dr. Richard Grogan, the New Hampshire SBDC State director, New Hampshire SBDCs have helped thousands of small business owners and entrepreneurs realize their dreams, start new businesses, and create jobs. Last year alone, New Hampshire SBDC counseled and trained more than 2,500 businesses and assisted in the formation of more than $39 million in capital for New Hampshire's small businesses.

For example, NH SBDC has been instrumental for Julie Lapham, the founder and chief sales officer of a startup in Dover, NH, called Popzup. Popzup is a family-owned business that provides a new popcorn product for health-conscious consumers. As Julie explained it, her local SBDC helped to prepare her for a Shark Tank-style pitch competition in which she took home a first-prize award of $10,000. They have helped her understand her financing options and continue to stay involved and support her company's growth.

I hope my colleagues will join me and Chairman RISCH in celebrating SBDC Day and acknowledging their local SBDCs for their accomplishments and the role that they play in helping small businesses create jobs.

ADDITIONAL STATEMENTS

REMEMBERING PABLITA TA-NEZ-BAH ABEYTA

• Mr. UDALL. Mr. President, Ta-Nez-Bah means in Navajo ''one who completes a circle.'' Ta-Nez-Bah was an apt middle name for Pablita Abeyta whose life encircled art, advocacy, and dedication to Native peoples.

Pablita Ta-Nez-Bah Abeyta was born in Gallup, NM, in 1953, to Narciso Ha-So-De Abeyta and Sylvia Ann (Shipley) Abeyta. Her father was Navajo and an internationally recognized painter and silversmith. Her mother was Anglo and a Quaker and an accomplished ceramist and weaver in her own right.

Pablita and her six siblings were raised in and around the arts and the traditions of the Navajo people. Each had an artistic talent. Her sister Elizabeth was a masterful sculptor and ceramic artist; her brother Tony is a highly acclaimed painter and jeweler; and her sister Alice Seely is a nationally recognized sculptor, painter, and jeweler.

Pablita attended the Institute for American Indian Arts in Santa Fe and received a masters in public affairs from the University of New Mexico in 1983.

She then headed off to Washington, DC, where she would combine advocacy and art the rest of her life and where she would play a key role in founding the Smithsonian Institution's National Museum of the American Indian, NMAI.

Pablita had a full career on Capitol Hill for many years until her retirement, always advocating for Native causes. She lobbied for the Navajo Nation; worked as a legislative aide to U.S. Representative Ben Nighthorse Campbell from Colorado; staffed the U.S. House Interior Committee's Office of Indian Affairs under my uncle, U.S. Representative Mo Udall; held a legislative liaison position at the Smithsonian Institute; and served as special assistant with the NMAI.

Pablita attended the first congressional hearing on NMAI in 1987, worked for its establishment through congressional legislation, and worked on its highly successful private fundraising drive. Her work was instrumental to starting and building the museum.

Pablita was also an accomplished sculptor. Inspired by the strength, beauty, and serenity of Native women, her sculptures have been described as ''smooth, round and sensuous.'' Her artwork won many awards at the Santa Fe Indian Market, was included in a Smithsonian National Museum of American History exhibition, and is held in the permanent collection of the NMAI. Pablita commented of her sculptures that ''. . . the female figurines sing, talk, and reflect the seasons and Navajo spiritual ceremony. I am making a statement with my art about the importance of family, community and my heritage.''

Pablita passed away January 31, 2017, at age 63. She completed many circles in her life, and I honor all that she accomplished.•

REMEMBERING WILSON M. HALONA

• Mr. UDALL. Mr. President, I wish to pay tribute to Wilson Miles Halona, an outstanding member of the Navajo Nation, a loving husband and father, and a courageous American veteran. Sadly, at age 95, he passed away February 28, 2017.

Mr. Halona was born January 1, 1922, in the Chuska Mountains near Tohatchi, NM. His maternal clan was the Ashiihi, Salt People Clan, and his paternal clan was To'hani, Near the Water People Clan. He was the son of sheep herders, Barney and Annie Halona. One of his sons tells the story of Mr. Halona's mother going into labor with him as she was herding sheep in the middle of winter. She stopped to give birth, outside in the cold, and then went back to herding. He came from strong stock.

This is the second time I have had the privilege to honor Mr. Halona. The first was on November 20, 2012, at the Pueblo Indian Cultural Center in Albuquerque, New Mexico. Mr. Wilson was a World War II hero, but had not received the recognition he deserved. Almost 60 years after the war, his family worked to make sure he received the acknowledgment and medals he earned for his bravery and service.

Mr. Halona was part of the D-Day invasion. Serving in the Army, he and his fellow soldiers landed in Normandy, on Utah Beach, in July 1944. They were part of the third wave of American soldiers to land, and there were already many casualties scattered on the beach.

Mr. Halona was a gunner. As he and his battalion started moving inland, they encountered heavy gunfire from Germans who were dug into mountaintops along the beach in cement bunkers. The American troops returned the gunfire and fought for over 3 hours before they destroyed two German bunkers. Mr. Halona's battalion stopped further casualties and took control of the beachfront.

They headed to Brussels and then on to Bonn and Luxembourg, where the U.S. had established a military base. Winter came upon them, and they were snowed in for 4 months. After the snow cleared, the battalion moved to take over Munich, where they saw firsthand the death and destruction of the Holocaust. In Stuttgart, they drove out the Germans, captured Hitler's top generals, transferred them to jail in Nuremburg, and kept guard. Mr. Halona himself guarded Reichsmarschall Hermann Goering for several hours. Mr. Halona credited his Navajo traditions and prayers for helping him during and after the war.

When Mr. Halona was finally given the honors owed in 2012, he received the Good Conduct Medal, European-African-Middle Eastern Campaign Medal with one Silver Service Star, World War II Victory Medal, the Honorable Service Lapel Button WWII, and the Sharpshooter Badge with Rifle Bar Presentation. I was deeply honored that he asked me to present his medals.

Mr. Halona served the Navajo Nation with distinction as well. He was a member of the Navajo Nation Council for four terms and president of the Tohatchi chapter for eight terms. He was first appointed to the advisory board for the Navajo Housing Authority and then served as its first chair. He was instrumental in developing the housing authority—The Navajo Housing Authority was one of the first tribal housing authorities to be funded by the U.S. Department of Housing and Urban Development—and making sure that Navajo people had better living conditions. He worked to develop the Indian Health Service within the Navajo Nation and to build schools on the reservation. He even helped create the Navajo rodeo association. Mr. Halona's service to his tribe stretched far and deep.

Mr. Halona was married to his wife, Ruby Arviso, from 1942 until her passing in 2013. He had 7 children, and is survived by 5, along with 16 grandchildren and 29 great-grandchildren.

Wilson Miles Halona lived a life of service to family, tribe, and Nation. I honor his life and his work.•

MESSAGE FROM THE PRESIDENT

A message from the President of the United States was communicated to the Senate by Mr. Pate, one of his secretaries.

PRESIDENTIAL MESSAGE

NOTICE OF THE CONTINUATION OF THE NATIONAL EMERGENCY WITH RESPECT TO SOUTH SUDAN THAT WAS DECLARED IN EXECUTIVE ORDER 13664 OF APRIL 3, 2014—PM 3

The PRESIDING OFFICER laid before the Senate the following message from the President of the United States, together with an accompanying report; which was referred to the Committee on Banking, Housing, and Urban Affairs:

To the Congress of the United States:

Section 202(d) of the National Emergencies Act (50 U.S.C. 1622(d)) provides for the automatic termination of a national emergency unless, within 90 days prior to the anniversary date of its declaration, the President publishes in the *Federal Register* and transmits to the Congress a notice stating that the emergency is to continue in effect beyond the anniversary date. In accordance with this provision, I have sent to the *Federal Register* for publication the enclosed notice stating that the national emergency declared in Executive Order 13664 of April 3, 2014, with respect to South Sudan is to continue in effect beyond April 3, 2017.

The situation in and in relation to South Sudan, which has been marked by activities that threaten the peace, security, or stability of South Sudan and the surrounding region, including widespread violence and atrocities, human rights abuses, recruitment and use of child soldiers, attacks on peacekeepers and humanitarian workers, and obstruction of humanitarian operations, continues to pose an unusual and extraordinary threat to the national security and foreign policy of the United States. For this reason, I have determined that it is necessary to continue the national emergency declared in Executive Order 13664 with respect to South Sudan.

DONALD J. TRUMP.

THE WHITE HOUSE, *March 22, 2017.*

MESSAGE FROM THE HOUSE

At 12:31 p.m., a message from the House of Representatives, delivered by Mr. Novotny, one of its reading clerks, announced that the House has passed the following bill, without amendment:

S. 305. An act to amend title 4, United States Code, to encourage the display of the flag of the United States on National Vietnam War Veterans Day.

The message also announced that the House has passed the following bills, in which it requests the concurrence of the Senate:

H.R. 1297. An act to amend the Homeland Security Act of 2002 to make technical corrections to the requirement that the Secretary of Homeland Security submit quadrennial homeland security reviews, and for other purposes.

H.R. 1353. An act to amend the Homeland Security Act of 2002 to require certain additional information to be submitted to Congress regarding the strategic 5-year technology investment plan of the Transportation Security Administration.

MEASURES REFERRED

The following bills were read the first and the second times by unanimous consent, and referred as indicated:

H.R. 1297. An act to amend the Homeland Security Act of 2002 to make technical corrections to the requirement that the Secretary of Homeland Security submit quadrennial homeland security reviews, and for other purposes; to the Committee on Homeland Security and Governmental Affairs.

H.R. 1353. An act to amend the Homeland Security Act of 2002 to require certain additional information to be submitted to Congress regarding the strategic 5-year technology investment plan of the Transportation Security Administration; to the Committee on Commerce, Science, and Transportation.

MEASURES PLACED ON THE CALENDAR

The following bill was read the second time, and placed on the calendar:

H.R. 1181. An act to amend title 38, United States Code, to clarify the conditions under which certain persons may be treated as adjudicated mentally incompetent for certain purposes.

EXECUTIVE AND OTHER COMMUNICATIONS

The following communication was laid before the Senate, together with accompanying papers, reports, and documents, and was referred as indicated:

EC–1032. A communication from the President of the United States, transmitting, pursuant to law, the Budget Blueprint of the United States Government for Fiscal Year 2018 received during adjournment of the Senate in the Office of the President of the Senate on March 16, 2017; referred jointly, pursuant to the order of January 30, 1975 as modified by the order of April 11, 1986; to the Committees on the Budget; and Appropriations.

REPORTS OF COMMITTEES

The following reports of committees were submitted:

By Mr. HOEVEN, from the Committee on Indian Affairs, without amendment:

S. 249. A bill to provide that the pueblo of Santa Clara may lease for 99 years certain restricted land, and for other purposes (Rept. No. 115–8).

INTRODUCTION OF BILLS AND JOINT RESOLUTIONS

The following bills and joint resolutions were introduced, read the first and second times by unanimous consent, and referred as indicated:

By Ms. BALDWIN (for herself and Mrs. CAPITO):

S. 693. A bill to amend the Public Health Service Act to increase the number of permanent faculty in palliative care at accredited allopathic and osteopathic medical schools, nursing schools, social work schools, and other programs, including physician assistant education programs, to promote education and research in palliative care and hospice, and to support the development of faculty careers in academic palliative medicine; to the Committee on Health, Education, Labor, and Pensions.

By Mr. KING (for himself and Mr. CORNYN):

S. 694. A bill to amend the Internal Revenue Code of 1986 to increase the standard charitable mileage rate for delivery of meals to elderly, disabled, frail, and at risk individuals; to the Committee on Finance.

By Mr. WARNER (for himself and Ms. COLLINS):

S. 695. A bill to avoid duplicative annual reporting under the Internal Revenue Code of 1986 and the Employee Retirement Income Security Act of 1974, and for other purposes; to the Committee on Health, Education , Labor, and Pensions.

By Mrs. FISCHER (for herself, Mrs. MCCASKILL, and Mr. HELLER):

S. 696. A bill to amend title 5, United States Code, to appropriately limit the authority to award bonuses to Federal employees; to the Committee on Homeland Security and Governmental Affairs.

By Mr. DAINES:

S. 697. A bill to amend the Internal Revenue Code of 1986 to lower the mileage threshold for deduction in determining adjusted gross income of certain expenses of members of reserve components of the Armed Forces, and for other purposes; to the Committee on Finance.

By Ms. CANTWELL (for herself, Ms. MURKOWSKI, Mrs. MURRAY, and Mrs. FEINSTEIN):

S. 698. A bill to establish a national program to identify and reduce losses from landslide hazards, to establish a national 3D Elevation Program, and for other purposes; to the Committee on Commerce, Science, and Transportation.

By Mr. MURPHY (for himself, Mr. TESTER, Mrs. MURRAY, Mr. MARKEY, Mr. BLUMENTHAL, Ms. BALDWIN, Mr. BENNET, Mr. SCHATZ, and Mr. FRANKEN):

S. 699. A bill to amend title 38, United States Code, to direct the Secretary of Veterans Affairs to furnish mental and behavioral health care to certain individuals discharged or released from the active military, naval, or air service under conditions other than honorable, and for other purposes; to the Committee on Veterans' Affairs.

By Mrs. MURRAY (for herself, Ms. BALDWIN, Mr. BENNET, Mr. BROWN, and Mrs. GILLIBRAND):

S. 700. A bill to improve the reproductive assistance provided by the Department of Defense and the Department of Veterans Affairs to severely wounded, ill, or injured members of the Armed Forces, veterans, and their spouses or partners, and for other purposes; to the Committee on Veterans' Affairs.

By Mrs. GILLIBRAND (for herself, Mr. BLUMENTHAL, Mr. MORAN, Mrs. CAPITO, Mr. KING, and Ms. COLLINS):

S. 701. A bill to improve the competitiveness of United States manufacturing by designating and supporting manufacturing communities; to the Committee on Commerce, Science, and Transportation.

By Mr. RISCH (for himself, Mr. CRAPO, and Mr. PERDUE):

S. 702. A bill to amend the National Labor Relations Act and the Labor Management

Relations Act, 1947 to deter labor slowdowns at ports of the United States, and for other purposes; to the Committee on Health, Education, Labor, and Pensions.

By Mr. MORAN (for himself and Mr. ROBERTS):

S. 703. A bill to extend the authority of the Secretary of the Interior to carry out the Equus Beds Division of the Wichita Project; to the Committee on Energy and Natural Resources.

SUBMISSION OF CONCURRENT AND SENATE RESOLUTIONS

The following concurrent resolutions and Senate resolutions were read, and referred (or acted upon), as indicated:

By Mr. VAN HOLLEN (for himself and Mr. CARDIN):

S. Con. Res. 11. A concurrent resolution recognizing the life and legacy of Henrietta Lacks during Women's History Month; to the Committee on the Judiciary.

ADDITIONAL COSPONSORS

S. 158

At the request of Mr. RUBIO, the name of the Senator from Utah (Mr. LEE) was added as a cosponsor of S. 158, a bill to eliminate the payroll tax for individuals who have attained retirement age, to amend title II of the Social Security Act to remove the limitation upon the amount of outside income which an individual may earn while receiving benefits under such title, and for other purposes.

S. 260

At the request of Mr. CORNYN, the names of the Senator from South Dakota (Mr. ROUNDS) and the Senator from Kentucky (Mr. PAUL) were added as cosponsors of S. 260, a bill to repeal the provisions of the Patient Protection and Affordable Care Act providing for the Independent Payment Advisory Board.

S. 261

At the request of Mr. BLUNT, the name of the Senator from Oklahoma (Mr. INHOFE) was added as a cosponsor of S. 261, a bill to amend the Federal Food, Drug, and Cosmetic Act to improve and clarify certain disclosure requirements for restaurants and similar retail food establishments, and to amend the authority to bring proceedings under section 403A.

S. 266

At the request of Mr. HATCH, the name of the Senator from Oklahoma (Mr. INHOFE) was added as a cosponsor of S. 266, a bill to award the Congressional Gold Medal to Anwar Sadat in recognition of his heroic achievements and courageous contributions to peace in the Middle East.

S. 382

At the request of Mr. MURPHY, his name was added as a cosponsor of S. 382, a bill to require the Secretary of Health and Human Services to develop a voluntary registry to collect data on cancer incidence among firefighters.

S. 407

At the request of Mr. CRAPO, the names of the Senator from Wisconsin (Ms. BALDWIN), the Senator from New Hampshire (Mrs. SHAHEEN) and the Senator from Washington (Mrs. MURRAY) were added as cosponsors of S. 407, a bill to amend the Internal Revenue Code of 1986 to permanently extend the railroad track maintenance credit.

S. 425

At the request of Mr. CARDIN, the name of the Senator from Washington (Ms. CANTWELL) was added as a cosponsor of S. 425, a bill to amend the Internal Revenue Code of 1986 to improve the historic rehabilitation tax credit, and for other purposes.

S. 534

At the request of Mrs. FEINSTEIN, the name of the Senator from Hawaii (Ms. HIRONO) was added as a cosponsor of S. 534, a bill to prevent the sexual abuse of minors and amateur athletes by requiring the prompt reporting of sexual abuse to law enforcement authorities, and for other purposes.

S. 573

At the request of Mr. PETERS, the name of the Senator from Maryland (Mr. VAN HOLLEN) was added as a cosponsor of S. 573, a bill to establish the National Criminal Justice Commission.

S. 591

At the request of Mrs. MURRAY, the name of the Senator from Hawaii (Ms. HIRONO) was added as a cosponsor of S. 591, a bill to expand eligibility for the program of comprehensive assistance for family caregivers of the Department of Veterans Affairs, to expand benefits available to participants under such program, to enhance special compensation for members of the uniformed services who require assistance in everyday life, and for other purposes.

S. 636

At the request of Mrs. MURRAY, the name of the Senator from California (Mrs. FEINSTEIN) was added as a cosponsor of S. 636, a bill to allow Americans to earn paid sick time so that they can address their own health needs and the health needs of their families.

S. 637

At the request of Mr. WYDEN, the name of the Senator from Montana (Mr. TESTER) was added as a cosponsor of S. 637, a bill to amend titles XI and XVIII of the Social Security Act to provide greater transparency of discounts provided by drug manufacturers.

S. 672

At the request of Mr. CRUZ, the name of the Senator from Mississippi (Mr. WICKER) was added as a cosponsor of S. 672, a bill to require a report on designation of North Korea as a state sponsor of terrorism, and for other purposes.

S. 681

At the request of Mr. TESTER, the names of the Senator from Ohio (Mr. BROWN) and the Senator from New Hampshire (Mrs. SHAHEEN) were added as cosponsors of S. 681, a bill to amend title 38, United States Code, to improve the benefits and services provided by the Department of Veterans Affairs to women veterans, and for other purposes.

S.J. RES. 17

At the request of Mr. CORNYN, the name of the Senator from Kentucky (Mr. PAUL) was added as a cosponsor of S.J. Res. 17, a joint resolution approving the discontinuation of the process for consideration and automatic implementation of the annual proposal of the Independent Medicare Advisory Board under section 1899A of the Social Security Act.

S.J. RES. 27

At the request of Mr. CASSIDY, the name of the Senator from Mississippi (Mr. WICKER) was added as a cosponsor of S.J. Res. 27, a joint resolution disapproving the rule submitted by the Department of Labor relating to ''Clarification of Employer's Continuing Obligation to Make and Maintain an Accurate Record of Each Recordable Injury and Illness''.

S. CON. RES. 6

At the request of Mr. BARRASSO, the name of the Senator from Mississippi (Mr. COCHRAN) was added as a cosponsor of S. Con. Res. 6, a concurrent resolution supporting the Local Radio Freedom Act.

S. RES. 88

At the request of Ms. STABENOW, the name of the Senator from Illinois (Ms. DUCKWORTH) was added as a cosponsor of S. Res. 88, a resolution expressing the sense of the Senate that the President and the Secretary of State should ensure that the Government of Canada does not permanently store nuclear waste in the Great Lakes Basin.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. DAINES:

S. 697. A bill to amend the Internal Revenue Code of 1986 to lower the mileage threshold for deduction in determining adjusted gross income of certain expenses of members of reserve components of the Armed Forces, and for other purposes; to the Committee on Finance.

Mr. DAINES. Mr. President, since 2001 our Nation has frequently called upon members of the National Guard and Armed Forces Reserve to confront our enemies and protect our interests around the globe.

Without the contributions from the Guard and Reserve components, the joint force would be far less capable and unable to perform many critical tasks.

Often, members of the Guard and Reserve incur out-of-pocket expenses to travel to and from their training locations. There are many challenges that these servicemembers face, but subsidizing the cost of training with after-tax income should not be one of them.

This issue is particularly relevant to Montana. My home State is widely recognized as having one of the highest

per capita veteran populations in the Nation, with many Montanans serving in the Guard or Reserve. The distances between homes and training sites can be challenging. As the son of a marine, I understand the costs associated with service.

With a deep appreciation for the commitment and sacrifice expected from members of Guard and Reserve, I offer the Tax Relief for Guard and Reserve Training Act. This bill lowers the mileage threshold from 100 to 50 for tax-deductible expenses. This change would put the Guard and Reserve on equal footing with most government and military travel regulations.

The Tax Relief for Guard and Reserve Training Act is a reasonable reform, specifically targeted at those who are often asked to shoulder burdens for the common good.

Mr. President, I ask unanimous consent that the text of the bill be printed in the RECORD.

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

S. 697

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the ''Tax Relief for Guard and Reserve Training Act''.

SEC. 2. REDUCTION OF MILEAGE THRESHOLD FOR DEDUCTION IN DETERMINING ADJUSTED GROSS INCOME.

(a) IN GENERAL.—Subparagraph (E) of section 62(a)(2) of the Internal Revenue Code of 1986 is amended—

(1) by striking ''100 miles'' and inserting ''50 miles'', and

(2) by striking ''for any period'' and inserting ''for any period (without regard to whether such period includes an overnight stay)''.

(b) EFFECTIVE DATE.—The amendments made by this section shall apply to taxable years beginning after December 31, 2016.

SEC. 3. EXEMPTION FROM 2 PERCENT FLOOR ON MISCELLANEOUS ITEMIZED DEDUCTIONS.

(a) IN GENERAL.—Subsection (b) of section 67 of the Internal Revenue Code of 1986 is amended—

(1) by striking ''and'' at the end of paragraph (11),

(2) by striking the period at the end of paragraph (12) and inserting '', and'', and

(3) by adding at the end the following new paragraph:

''(13) the deductions allowed by section 162 which consist of expenses paid or incurred by the taxpayer in connection with the performance of services by such taxpayer as a member of a reserve component of the Armed Forces of the United States for any period (without regard to whether such period includes an overnight stay) during which such individual is more than 50 miles away from home in connection with such services.''.

(b) EFFECTIVE DATE.—The amendments made by this section shall apply to taxable years beginning after December 31, 2016.

SUBMITTED RESOLUTIONS

SENATE CONCURRENT RESOLUTION 11—RECOGNIZING THE LIFE AND LEGACY OF HENRIETTA LACKS DURING WOMEN'S HISTORY MONTH

Mr. VAN HOLLEN (for himself and Mr. CARDIN) submitted the following concurrent resolution; which was referred to the Committee on the Judiciary:

S. CON. RES. 11

Whereas Henrietta Lacks, an African-American woman born on August 1, 1920, in Roanoke, Virginia, was raised by her grandfather on a tobacco farm in Clover, Virginia;

Whereas Henrietta Lacks married David ''Day'' Lacks in 1941 in Halifax County, Virginia, and they later moved to the Baltimore County, Maryland, community of Turner Station, to build a life for themselves and their 5 children, Lawrence, Elsie, David, Deborah, and Joseph (Zakariyya);

Whereas, in 1951, Henrietta Lacks, at the age of 31, was diagnosed with cervical cancer, and despite receiving painful radium treatments, Henrietta Lacks passed away on October 4, 1951;

Whereas medical researchers took samples of Henrietta Lacks' tumor during her treatment and the HeLa cell line from her tumor proved remarkably resilient;

Whereas Henrietta Lacks died 8 months after her cancer diagnosis, leaving behind her children, husband, and ''immortal cells'' that would change the world;

Whereas HeLa cells were the first immortal line of human cells, doubling every 24 hours, dividing and replenishing indefinitely in a laboratory, and successfully growing outside of the human body for longer than 36 hours;

Whereas Henrietta Lacks' cells are unique, grow by the millions, and are commercialized and distributed worldwide to researchers, resulting in advances in medicine;

Whereas the advances made possible by Henrietta Lacks' cells and the revenues the advances generated were not known to her family for more than 20 years;

Whereas an estimated 50,000,000 metric tons of HeLa cells have been distributed around the world to become the subject of more than 74,000 studies;

Whereas Henrietta Lacks' prolific cells continue to grow and contribute to remarkable advances in medicine, including the development of the polio vaccine, and drugs for treating the effects of cancer, HIV/AIDS, hemophilia, leukemia, and Parkinson's disease;

Whereas Henrietta Lacks' cells have been used in research that has contributed to the understanding of the effects of radiation and zero gravity on human cells;

Whereas Henrietta Lacks' immortal cells have informed research on chromosomal conditions, cancer, gene mapping, and precision medicine;

Whereas Henrietta Lacks' legacy has been recognized around the world through memorials, conferences, museum exhibitions, libraries, and print and visual media;

Whereas Henrietta Lacks and her family's experience is fundamental to modern bioethics policies and informed consent laws that benefit patients nationwide by building patient trust and protecting research participants;

Whereas the family of Henrietta Lacks entered the groundbreaking HeLa Genome Data Use Agreement in 2013 with the medical, scientific, and bioethics communities, giving the family a role in regulating HeLa genome sequences and discoveries;

Whereas Women's History Month is celebrated in March to pay tribute to the many contributions women have made to the United States; and

Whereas Henrietta Lacks and her immortal cells have made a significant contribution to global health, scientific research, quality of life, and patient rights: Now, therefore, be it

Resolved by the Senate (the House of Representatives concurring), That Congress, during Women's History month—

(1) celebrates the life of Henrietta Lacks, an African-American woman who unknowingly changed the face of medical science, contributing to lasting, worldwide improvements in health;

(2) honors Henrietta Lacks as a hero of modern medicine for her contributions to the medical discoveries resulting from her HeLa cells, which helped make possible some of the most important medical advances of the last century; and

(3) recognizes the legacy of Henrietta Lacks, which has contributed to developments in bioethics and patient rights that benefit all of the people of the United States.

AUTHORITY FOR COMMITTEES TO MEET

Mr. CORNYN. Mr. President, I have 9 requests for committees to meet during today's session of the Senate. They have the approval of the Majority and Minority leaders.

Pursuant to rule XXVI, paragraph 5(a), of the Standing Rules of the Senate, the following committees are authorized to meet during today's session of the Senate:

COMMITTEE ON COMMERCE, SCIENCE, AND TRANSPORTATION

The Committee on Commerce, Science, and Transportation is authorized to hold a meeting during the session of the Senate on Wednesday, March 22, 2017, at 10 a.m. in room 106 of the Dirksen Senate Office Building, to conduct a hearing on ''The Promises and Perils of Emerging Technologies for Cybersecurity.''

COMMITTEE ON ENVIRONMENT AND PUBLIC WORKS

The Committee on Environment and Public Works is authorized to meet during the session of the Senate on March 22, 2017, at 10 a.m. in room 406 of the Dirksen Senate office building.

COMMITTEE ON FOREIGN RELATIONS

The Committee on Foreign Relations is authorized to meet during the session of the Senate on Wednesday, March 22, 2017 at 10 a.m., to hold a hearing entitled ''Flashing Red: The State of Global Humanitarian Affairs.''

COMMITTEE ON HEALTH, EDUCATION, LABOR, AND PENSIONS

The Committee on Health, Education, Labor, and Pensions is authorized to meet, during the session of the Senate, to conduct a hearing entitled ''Nomination of Alex Acosta to serve as Secretary of Labor'' on Wednesday, March 22, 2017, at 9 a.m., in room 430 of the Dirksen Senate Office Building.

COMMITTEE ON HOMELAND SECURITY

The Committee on Homeland Security and Governmental Affairs is authorized to meet during the session of

the Senate on Wednesday, March 22, 2017, at 10 a.m. to conduct a hearing titled ''Perspectives from the DHS Frontline: Evaluating Staffing Resources and Requirements.''

COMMITTEE ON THE JUDICIARY

The Committee on the Judiciary is authorized to meet during the session of the Senate, on March 22, 2017, at 9:30 a.m., in room SH–216 of the Hart Senate Office Building, to continue a hearing entitled ''The Nomination of the Honorable Neil M. Gorsuch.''

COMMITTEE ON VETERANS' AFFAIRS

The Committee on Veterans' Affairs is authorized to meet during the session of the Senate on Wednesday, March 22, 2017, at 10 a.m., in room SD–G50 of the Dirksen Senate Office Building.

SUBCOMMITTEE ON AIRLAND

The Subcommittee on Airland of the Committee on Armed Services is authorized to meet during the session of the Senate on Wednesday, March 22, 2017, at 3:30 p.m.

SUBCOMMITTEE ON OCEAN, ATMOSPHERE, FISHERIES, AND COAST GUARD

The Committee on Commerce, Science, and Transportation is authorized to hold a meeting during the session of the Senate on Wednesday, March 22, 2017, at 2:30 p.m. in room 253 of the Russell Senate Office Building.

PRIVILEGES OF THE FLOOR

Mr. MERKLEY. Mr. President, I ask unanimous consent that my intern, Brandy Boyce, be granted privileges of the floor for the remainder of the day.

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

Mr. MURPHY. Mr. President, I ask unanimous consent that Dr. Laura Willing, a health fellow in my office, be granted floor privileges for the remainder of the year.

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

Mr. NELSON. Mr. President, I ask unanimous consent that a detailee, Randolph Clark, and a fellow, Stacey Stern Albert, who have worked on this issue for the Commerce Committee, be granted floor privileges for the remainder of this session.

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

REPORTS OF COMMITTEES

The following reports of committees were submitted on March 21, 2017:

By Mr. THUNE, from the Committee on Commerce, Science, and Transportation, with an amendment in the nature of a substitute:

S. 19. A bill to provide opportunities for broadband investment, and for other purposes (Rept. No. 115–4).

By Mr. THUNE, from the Committee on Commerce, Science, and Transportation, without amendment:

S. 89. A bill to amend title 46, United States Code, to exempt old vessels that only operate within inland waterways from the fire-retardant materials requirement if the owners of such vessels make annual structural alterations to at least 10 percent of the areas of the vessels that are not constructed of fire-retardant materials and for other purposes (Rept. No. 115–5).

S. 96. A bill to amend the Communications Act of 1934 to ensure the integrity of voice communications and to prevent unjust or unreasonable discrimination among areas of the United States in the delivery of such communications (Rept. No. 115–6).

By Mr. HOEVEN, from the Committee on Indian Affairs, without amendment:

S. 140. A bill to amend the White Mountain Apache Tribe Water Rights Quantification Act of 2010 to clarify the use of amounts in the WMAT Settlement Fund (Rept. No. 115–7).

APPOINTMENTS

The PRESIDING OFFICER. The Chair, on behalf of the Vice President, pursuant to 10 U.S.C. 4355(a), appoints the following Senators to the Board of Visitors of the U.S. Military Academy: the Honorable KIRSTEN E. GILLIBRAND of New York (Committee on Armed Services) and the Honorable CHRISTOPHER MURPHY of Connecticut (Committee on Appropriations).

The Chair, on behalf of the Vice President, pursuant to Section 1295b(h) of title 46 App., United States Code, appoints the following Senators to the Board of Visitors of the U.S. Merchant Marine Academy: the Honorable GARY C. PETERS of Michigan (At Large) and the Honorable BRIAN SCHATZ of Hawaii (Committee on Commerce, Science and Transportation).

The Chair, on behalf of the Vice President, pursuant to 14 U.S.C. 194(a), as amended by Public Law 101–595, and further amended by Public Law 113–281, appoints the following Senators to the Board of Visitors of the U.S. Coast Guard Academy: the Honorable MARIA CANTWELL of Washington (Committee on Commerce, Science and Transportation) and the Honorable RICHARD BLUMENTHAL of Connecticut (At Large).

The Chair, on behalf of the Vice President, pursuant to 10 U.S.C. 6968(a), appoints the following Senators to the Board of Visitors of the U.S. Naval Academy: the Honorable JEANNE SHAHEEN of New Hampshire (Committee on Appropriations) and the Honorable BENJAMIN CARDIN of Maryland (At Large).

The Chair, on behalf of the Vice President, pursuant to 10 U.S.C. 9355(a), appoints the following Senators to the Board of Visitors of the U.S. Air Force Academy: the Honorable TOM UDALL of New Mexico (Committee on Appropriations) and the Honorable MAZIE K. HIRONO of Hawaii (Committee on Armed Services).

PROVIDING FOR CONGRESSIONAL DISAPPROVAL OF A RULE SUBMITTED BY THE FEDERAL COMMUNICATIONS COMMISSION—Continued

ORDER FOR ADJOURNMENT

Mr. THUNE. Mr. President, if there is no further business to come before the Senate, I ask unanimous consent that it stand adjourned under the previous order, following the remarks of Senators SCHATZ and MARKEY.

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

The Senator from Hawaii.

Mr. SCHATZ. Thank you, Mr. President.

It is really a simple proposition and it is a scary one. As soon as this legislation is enacted, internet service providers can collect your browsing data and sell it without your permission. Right now there is a lot of conversation about who has jurisdiction, the FTC or the FCC, and who is more appropriate to govern internet privacy, whether this should be public sector or private sector, but the basic question is this for the pending legislation, Should ISPs, your internet service provider, be allowed to collect your browsing data without your permission and sell it? I think the answer for 98 percent of the public is a resounding no.

Right now there is a single Federal agency that has the authority to protect consumers and their privacy when it comes to data collected by ISPs, and that is the FCC, the Federal Communications Commission, but the Republicans are proposing that the Congress strip the FCC's ability to protect your privacy, and when they succeed, the American people will lose the very few Federal protections they have when it comes to online privacy.

Think about how much of your life is on line today—banking, health, your interactions with your kids, your kids' interactions with other kids. It is incredibly personal, and it is not just confidential information in a traditional sense or in a legal sense, it is really a complete picture of everything you are. That is why this is worth fighting about. It is worth protecting. That is why the FCC made these rules—to recognize that we live so much of our lives online and that in a lot of instances we don't really feel like we have a choice about whether we are going to engage in a contract to get broadband service. That is a necessity for many of us. Consumers deserve some basic protections, not only do the Republicans want to get rid of the FCC rule that basically says an ISP cannot collect your data and sell it for commercial purposes, but they want to do it in a way that will ensure that no Federal agency, not a single one, will have jurisdiction over privacy for consumers using broadband. They are trying to take the referee off the playing field and for good.

The problem is very simple. There are actually two agencies that could have jurisdiction over privacy online, but there was a Ninth Circuit Court decision that made a ruling that removes the jurisdiction of the Federal Trade Commission over online privacy in the broadband space. So of the two agencies, the FTC and FCC, the FTC, according to this Federal court, no longer has jurisdiction. Now it is on the FCC's

side of the house, but if we repeal the FCC rule, the way the Congressional Review Act runs is that it will prevent us from ever addressing something ''substantially similar'' again. This isn't about agreeing or disagreeing with this rule. This isn't about whether you think the FCC or FTC ought to appropriately deal with this. This isn't a question about whether you think we should exercise our prerogatives in the public or private sectors. This is about whether you think nobody should have jurisdiction over your privacy online.

So what is the solution here?

Well, we should work with private sector leaders, the FCC, and the FTC to find a comprehensive approach to privacy online. That is what this legislative body should be doing. Instead of aggressively digging into this issue on behalf of consumers, we are actually blowing up the only thing we have, which is this FCC rule. To repeat, by using the Congressional Review Act, Republicans are forever preventing the FCC from protecting your privacy if you use broadband.

I want to end by noting that 55 years ago this month, President Kennedy gave a seminal speech about consumer rights. He spoke about the march of technology, how it had outpaced old laws and regulations, and how fast that progress had occurred. He noted that in just a few decades supermarkets went from carrying 1,500 products to more than 6,000, doctors wrote 90 percent of their prescriptions for drugs that no one had even heard of 20 years before, but let's fast forward to the present day, and we have blown those numbers out of the water. The average supermarket carries 40,000 products; in 2015 alone, the FDA approved 51 new drugs; and of course we now have the internet, which in the United States grew from 148 million users to nearly 240 million in just 15 years. The next nonincremental change in technology in our lives will be the internet of things, in which we will have tens of billions of devices connected to each other and interacting with us whether we like it or not. So the march of technology goes on, but what stays the same is the bedrock principle that President Kennedy outlined; that consumers have the right to be safe, they have the right to be informed, they have the right to choose, and they have the right to be heard. Those rights are in jeopardy. The FCC took a small but important step, and now the Republicans are blowing that up.

Let me be clear. This is the single biggest step backward for online privacy in many years, and we have failed the American people when it comes to their privacy. We should be staring this problem in the face, but what we are doing tonight and tomorrow is making it worse. That is why I will vote no, and I will urge my colleagues to vote no on this resolution.

I yield the floor.

The PRESIDING OFFICER. The Senator from Massachusetts.

Mr. MARKEY. Thank you, Mr. President.

We have a historic debate going on here in Congress. Yes, there is a lot of discussion about the Russians cracking into our elections using electronic technologies. We have a President of the United States who is contending that his predecessor in the White House wiretapped his apartment in the Trump Tower. We have stories about the compromise of websites all across America—this company, that company, millions of healthcare records, people's privacy compromised, front page, above the fold. This is huge. What is going on in our country when this new technology allows for such an invasion into the privacy of the President of the United States, of citizens all across our country?

These hearings are going on right now in rooms all across Capitol Hill. Everyone is concerned. Everyone is cross-examining witnesses, saying: How can this happen in our country? And then they are told: Oh, it is this new electronic technology which is out there. It allows for the ability to be able to crack into the privacy of Presidents and ordinary citizens. It makes it possible to make television sets that are purchased and then can be turned, from a remote distance, into a monitoring device just looking at you in your living room. How can this happen? What are the rules? Is there going to be any protection for the American people? So night after night, story after story, look at the compromise of the privacy, the security in our country, but out here on the Senate floor tonight we have the Republican response. The Republicans are saying to the American consuming public: You have no privacy. If you are at home, if you have Comcast or Verizon, if you have AT&T, and they are gathering all this information about you as your broadband provider, every site you go to, everything you are doing, everything your children are doing, what they are saying as of tonight, no privacy, no privacy if you have bandwidth. Everything is out there to be captured by these big broadband barons, and then they can sell it. They can sell it.

What is the Republicans' answer?

They say: Well, the internet thrives because of a light touch—a light touch. No, ladies and gentlemen, that is not what created what we have here today. We had to pass new regulations in 1996. I know, I was there. I was the Democrat on the committee in the House. There was no broadband—not one home in America had broadband in 1996. Can I say that again? Not one home in America in 1996 had broadband.

Today, for a 12-year-old, a 50-inch screen plugged into broadband, that is a constitutional right. It didn't exist in 1996 anywhere. Was it because it hadn't been invented, that people hadn't thought through broadband, they hadn't thought through what was possible? No. It was because these companies decided, because they were pretty much all monopolies, that they weren't going to deploy it. So we had to change the rules in order to unleash this revolution.

Now they are saying: Yes, but a light touch says no privacy protections. That would be bad. People don't really want privacy protections. That is not how I remember it when I was growing up.

When I was growing up, when the salesman knocked on the front door, you know what my mother would say? Don't answer the front door. We don't want the salesman in our living room. That is what my mom said. Now, is it different today? Is everyone saying: Yes, come on in. Come into the kitchen. Come into the living room. Come into the bedroom. Come look at the kids who are sick. Come look at Grandma who is sick. We want you to see our house. We want you to know everything about us, Mr. Salesman.

Now the broadband provider knocks on the front door. The broadband provider says: I want to provide this great new service with a light touch. Let us go into the key rooms into your house—in your living room, in your bedroom—let us put in this broadband technology, but we are also going to gather all this information about every member of your family—your mother, your father, your children—and we are just going to gather it all, and then we are going to sell it to anybody we feel like selling it to.

Let me ask you this. Have the values of the American people changed in one generation or are they the same? Do people want total strangers to know everything about you, and you have no right to say no? None? Because that is what this debate is about tonight, ladies and gentlemen. It is all about whether the Republicans are going to take away the rights of people to protect their children, to protect their families from having all of this information which the broadband providers encourage people to put online to be then sold as a product. Did you go to a healthcare website to find out something about a disease a child in your family has? Well, that is now a product to be sold. There are plenty of insurance companies that would love to know all the people who have gone to that website to find out about that disease. Do you really want that? That is what this debate is all about. How much privacy are people entitled to in this country?

Are we going to give it to the broadband companies to determine that? That is what we are voting for tonight. They are saying: We need harmonization, meaning we need a standard which is voluntary—voluntary. The broadband companies decide what the level of privacy is. You subscribe to that company. You now have that level of privacy protection. What does that mean? That means if they don't want to provide any privacy protection, that is the standard. They are saying: Well,

that law could then be enforced because they promised you no privacy. Now, if they violate that policy in any way, we could go after them. That really is what the Republican Party thinks about the private, most intimate information that ordinary families put online because there is only one company that knows everything, and that is the broadband provider, that is Verizon, Comcast, AT&T. Every other one of the thousands of websites, they know what is on their websites. They don't know what is on the other websites. Only one company, your broadband provider, knows everything—has all of your information. Now what is the standard? What is the standard? The Republicans say: No standard. Don't worry about it.

Yes, the Federal Communications Commission put a new rule on the books. Yes, the Federal Communications Commission says that if they want to gather this information about your children, they have to get your permission in order to sell that information to somebody else. That is the rule right now. They gather information about your children. They have it. If they want to sell it, they have to get your permission. You have to check a box. Yes, take all of the information on my child's computer, and sell it. Sell it to people out there who want to know about my child.

That is the rule today. What they will say, as we vote tomorrow at noontime, is no more permission from the parents—none, zero, zilch.

You are on your own, kids.

Sorry, parents. The Republican Senate decided you don't keep those protections. Why? Because it is a light touch. People really do not care about privacy in the modern era. It is kind of like—privacy? Get over it. You don't have any. Get over it. Get over it, say the Republicans. You don't have any privacy.

Now we are going to hear them shedding crocodile tears about all of the electronic hacking that goes on in the United States. But do you know that all of that combined is not even a thimble compared to the compromise of the privacy of 320 million Americans that is going to be possible after this rule is repealed tomorrow? It is the rule that gives American families the right to say: No, I don't want you gathering that information about my children. No, I don't want you to sell information about my children. That is gone. That is the vote the Republicans will cast tomorrow. The die is cast. They are all going to do it.

It is unbelievable to me that, in one generation, we have gone from people not letting the salesman into the living room to allowing one company to come in and gather every bit of information about every member of the family who is online all day long. It is amazing to me.

Do you want to know what I believe? I believe I have the same values that my grandmother had. I believe I have the same values as my mother had. I don't want anyone coming into my living room. My mother didn't want anyone coming into the living room. My grandmother didn't want anyone coming into the living room, and I am sure my great-grandmother in Ireland didn't want anyone coming into the living room to whom they did not give permission to come into the living room, especially when the kids were at home, but that is not the Republican view. The Republican view is: Oh, the big broadband barons don't like it? That is great. That is fine.

What is next? Think about it. They can get the information about when all of your family members are online, where they went, who they were talking to, who they emailed. All of it is available to the broadband company. It is just a product to be sold to the highest bidder.

Who wants this information out there? You can make billions of dollars by selling this information to other companies that would love to data mine your family so that they can profile your kids, profile grandma—profile anybody in your family—just so they can start to send in information and try to sell you stuff.

Do we really want people to be able to sell this as a product? The privacy of America is for sale. Is that what we have reached—that we are monetizing privacy?

We are saying: Hey, we are just getting in the way of the entrepreneurial spirit of America. Do you know what? For our whole history, we have gotten in the way of the entrepreneurial spirit of America. The salesman knocks on the door, and you tell the salesman: Go away. You are not getting into our living room, Mr. Entrepreneur. We don't want you in our living room.

So there are two sides to this. Yes, you want the entrepreneurial spirit to thrive, but, simultaneously, you should have a right to say: No, Mr. Entrepreneur. I don't want your product. I don't want you in my living room. I don't want you to have access to all of the information of my children. Sorry, Mr. Entrepreneur. I am sure you could have made a fortune, but the fortune comes at too high of a price.

Ultimately, the founding principles of our society are that, yes, we are capitalists, but we are capitalists with a conscience. We understand that there should be limits to how far you can go in making a buck. There should be a limitation.

What the Grand Old Party wants to do is to roll back the broadband privacy rules that give you an ability, if you want, to say yes. You can just click and say yes to all of these companies. Take all of my information. Take all of grandma's information. Take all of the kids' information. You can just check that and say yes. That is in the law. Do you want to give up all of your privacy? Push ''yes.'' Yet, under the existing law, you can also push ''no.'' I don't want to give up my privacy. It should be the consumer's choice. It shouldn't be Big Congress's and Big Government's.

Big Government is now deciding you have no privacy. The government is moving in. Replacing Big Mother and Big Father is Big Government. Big Government is siding with Big Business and Big Broadband. That is what is happening here today, and it is leaving behind Big Mother and Big Father, who care about their kids. They are taking away the authority that parents have had since the beginning of time up until now.

The broadband revolution now makes it possible to monetize privacy—to make money, to give entrepreneurs a chance through light touch regulation—which will create more jobs out there. Jobs for whom? Jobs for people who are learning about your kids, jobs for people who are learning about how to make money off of your kids, jobs for people who do not care about your kids. They care only about making a few more bucks.

How hard is this? Which business school do you have to go to to have a 3-by-5 card to figure this out? It is pretty simple, huh?

What is the job of the Senate? The job of the Senate is to ensure that we animate these technologies with human values, that we say to the inventor, to the entrepreneur: Oh, I love that whole idea of an automobile; that is fantastic. But do you know what? Why don't you build in some brakes? We are going to put up speed limits. We are going to have seatbelts. We are not going to allow you just to put it out on the road and just endanger the public or the passengers. We are going to have some rules.

It is great. Yes, invent that new medicine, but we are also going to say to you: Hey, do you know what? We are going to have a child's safety cap on top of that medicine so a kid cannot get access to it.

We balance it. We animate each new technology with the values that our parents had and that our grandparents brought from the old country. It does not change. It is always the same. The polling is 80 percent—Democrat, Republican, Independent, every ethnic group, every income group.

Do you know who does not like the rules? Entrepreneurs—entrepreneurs who want to monetize your privacy.

But it is always going to be at 80 percent, because what is, really, the differentiating issue? Why would a Republican mother want her kids to have their privacy compromised? You know that she does not. You know she does not. She doesn't even know that this debate is going on. She doesn't even know that, after they repeal this rule, it will be the Wild West.

So there are real rules. Again, it is the most important set of rules because it is the broadband provider. They get every bit of information. This is not just: Oh, I subscribed to this newspaper, and I am reading this newspaper. Oh, I am at Google. Oh, I am

over here at ESPN sports. Oh, oh, oh. There are hundreds of thousands of websites, and that website knows only about what you did on that website. No, that is not what the broadband company knows. They know everything. They know everywhere you went. That is why they want this repealed. Just think of how valuable that is. Just think of how much money they can make by selling all of that information about you and your family.

That is what we are debating tonight. We are debating a fundamental change in our country. Is it a heavy touch as opposed to a light touch to say that people's privacy—that the security of their families—should be protected? Then let's just shut down these hearings we are having and all of the crocodile tears being shed about what is happening in our society.

How can all of this happen?

We go into top secret briefings. We get told: Oh, they tapped into this. They cracked into that. People—Senators—sit there, and they ''tsk, tsk'' as to how terrible it is. Then, simultaneously, up here on the Senate floor, they say: Oh, by the way, we are just going to take away the right of a mother and father to say, ''No, you cannot crack into the information that our family is putting online.'' Oh, sure. You don't want to get into the way of an entrepreneur who can figure out how to make money off of that. Why would we care about that?

The absurdity of it all—the total absurdity of it all—is that all of these people who are ''entrepreneurs'' can get fabulously rich without compromising children's privacy, grandma's privacy.

For somebody in the family who has a disease and just wants to go to that website and find out about that disease all by himself and who does not want anybody else in the family to know, why can't he do that without wondering whether everyone else who went that website is now going to have that information sold? The phone company or the cable company will say: Oh, great. Let's go find the insurance company that is in this region that would want to know that that person might have that disease. You might not want to give him insurance, especially after the Affordable Care Act is repealed by the Republicans.

Who cares about that, right? You have no privacy. Get over it, say the Republicans. Get over it.

Just think if we applied that to phone calls. What if people said the phone company should be able to sell the number of the person and the name of the person whom you called? How would you feel about that? Would you like that to be a product? You called this person at this time for a half an hour. Then you called that person back again another half an hour later. Then you called him again at night. Would you like people to know that—just as a product—and get the name, the number, the time, and how long the call lasted? We have laws against that.

Would you like people to know which channels you are switching to? Say you have a satellite dish and are switching from channel to channel, and at 11 o'clock at night, you are just going to stop on this channel. They know which channel you stopped on.

I passed a law back in 1999 that prohibits that information of which channel you stop on from ever being made public. You cannot sell that information. I am proud of that. Whose business is that? But it is there. They have it. They have that information.

Now we have reached a broadband revolution. Oh, isn't this great? Isn't this a fantastic revolution? Didn't it occur because there was a light touch? No, there was not a light touch. You see, we deregulated the telephone industry and the cable industry so that we could have the broadband revolution beginning in 1996.

But here is the paradox of deregulation. The paradox of deregulation is that you need more regulations in order to make sure that the competing companies can gain access to the capital markets to raise the money so as to finally put pressure on the telephone and cable companies to deploy broadband. That is the paradox of deregulation. You need more, so you open it up to more competitors who then wind up forcing these companies to finally deploy broadband even though they had it decades beforehand. Interesting, isn't it? It is the paradox of deregulation. You need more.

Even as we did that, we knew that we were going to need privacy laws because this aggregation of information is something that goes right to the heart of this kind of tension that exists in a capitalist society.

Some people say: No rules. You are interfering with my ability to make money.

That is what the car company said about airbags, and that is what the car company said about seatbelts: Do not mandate to have us put it in as it is going to undermine our product.

But, over time, mothers and fathers finally said: No, no, no. You cannot do that. I don't want the kids in the front seat with no seatbelts. I don't want people in our family in the backseat with no seatbelts.

The same thing is true with safety device after safety device. So privacy plays that role when we are talking about information.

Now, if the first step is broadband, no privacy, then, logically, they should support the whole idea that if you are on your iPhone and you have called 50 people today, it is a product. So all of those people you called should be information the telephone company can sell. What would the argument be from the other side? The other side would say, that is a light touch. That is a light touch. It is going to make it possible for the phone company to make more money. And believe me, they would make a lot of money if they could sell the information about who every American called all day long.

Well, they don't want to touch that because phones are still kind of sensitive. They don't want to go there. But broadband, that is different. Websites, that is different. For some reason, that is different because what you are doing on the website, what you are doing with your email in the modern era is what you do on your phone every day, right? It is what you do on your phone. So the goal has to be that we have the accountability for the Republicans as we do this, this evening.

President Trump is constantly railing about the fake violations of his privacy—totally fake violations of his privacy. You would think that a crime had been committed, but there wasn't. It never happened. But the way he yells about it, it is almost un-American for anyone to compromise the privacy of him or anybody else. But these are going to be very real compromises of the privacy of ordinary people in our country.

So I am just going to give to my colleagues the little Constitution that is now on the books to provide protections for all Americans. It is very simple. It requires the broadband company to, No. 1, get consumer consent before using or sharing subscribers' personal information—get your consent—No. 2, promote transparency by saying to the broadband company that they have to tell each consumer that they are actually collecting this information about them. They have to constantly be telling you that. No. 3 is to ensure that the broadband companies adopt data security protections and notify consumers if a breach occurs; that is, if all of this information is now wide open for God knows who—some hacker who has gained information—they have to put in the toughest possible security. Then, if it does get compromised, they have to tell the consumers immediately. They can't delay a month because it might be bad PR, 2 months because they are afraid it is going to affect their bottom line. They have to let people know that their personal information has been compromised.

So that is it. That is what is bugging them. That is what is bugging the Republicans. They want to make sure you don't keep these protections.

So what does that mean? Well, after we vote tomorrow, after the Republicans take these rules, these protections off the books, after the internet service providers, or the ISPs, get what they want, ISP will no longer stand for ''internet service provider.'' It is going to stand for ''information sold for profit.'' It is going to stand for ''invading subscriber privacy.'' That is what ISP will stand for after tomorrow at noontime, high noon—the end of privacy online, except for a light touch where it is voluntary. And we know these broadband companies are definitely voluntarily going to give the highest possible protections to American families. We know that. Because if they wanted the highest possible protections, they have them right now. They

want them off the books so they don't have to do anything. It will be voluntary.

So these broadband behemoths want to take control away from the subscribers and relentlessly collect and sell your sensitive information without permission. It could be about your health, about your finances, about your children. It can track your location, draw a map of where you shop, where you work, where you eat, where your children go to school, and then sell that information to data brokers.

That is going to be an incredibly profitable industry that the Republicans are opening up this week. Right now, they are drafting up their business plans, just a 3-by-5 card all across the country. They have already basically decided that the Republicans are going to have these votes; so let's get on with these new rules.

The broadband industry says that they are an unnecessary burden, but, in fact, this whole area is one that actually goes to the heart of who we are as Americans. I think that whether you are a very conservative person or a very liberal person, there should be a small core number of American values that brings us together, and I would put privacy in that group. We can fight over the Affordable Care Act. We can fight over how many new nuclear weapons we need. We can fight over gay marriage. We can fight over many, many issues—some of them religious, some of them just strategic in terms of what is best for our country moving forward—but how can we fight over your family's privacy? I don't understand the ideological differentiation that is artificially being created by the broadband companies' insisting that the Republicans repeal those privacy laws because all of this is now going to be done without your consent, without your permission.

If they wanted to document now how many times you search online for heart disease, breast cancer, opioid addiction treatments, and then sell that information to an insurance company, they are going to be able to do that. You are giving them permission just by subscribing. And you know what they say: Oh, the marketplace will work; you can just go to the other broadband providers in town. Oh, there is no other broadband provider in town? You are in rural America? Oh, sorry, you have to use our company. Oh, there are no rules if you want to use our company—no rules.

They will say: Well, let the marketplace sort it out. What marketplace? Maximum, in most places, there are two companies you can have broadband service from, and they are both going to say privacy protection is voluntary. So there is no privacy. It is all going to happen without your consent, and they will just say: Oh, it is just so we can harmonize the rules. Yes, they are going to harmonize the rules. They are going to harmonize them so it is very efficient. You have the same nonexistent voluntary guidelines that the broadband companies are going to put on the books.

So you should want to choose, yourself, what information Verizon—if it discloses information about your family—gets to disclose. You should decide that, not Verizon. You should decide that. What they really want is to allow AT&T to choose whether it protects consumers' sensitive information from breaches and unauthorized use, and guess what the broadband barons' choice is going to be? They are going to choose to pocket their profits and throw your privacy out the door.

Republicans want to sideline the Federal Communications Commission—our broadband privacy cop on the beat—and create an unregulated Wild West where internet providers can do whatever they want with your private information. They want to allow broadband companies to write their own privacy rules. That is like asking a burglar to program your security system. It makes no sense. Oh, come on in, Mr. Burglar, program my security system, and then you can do whatever you want in my living room when I am gone on vacation this weekend. Just take anything you want—any of my private information, any of my private furniture, anything you like in the house.

So we know the broadband industry—your wireless, your cable, your telecommunications provider. They can't self-regulate themselves. These same companies struggle to show up on time to install or to fix your service. You might have to wait all day to have the cable guy come and fix your cable system. They give you a range that goes like this: Well, we will be there between 9 in the morning and 5 in the afternoon; right? And now they are saying: You can trust us. We are going to protect your privacy. You know we are the cable company. You know we are the broadband company. You can trust us.

Do we really trust the broadband industry to determine what privacy protections they give to their customers? Strong broadband privacy rules mean that we don't have to do anything. That is their definition. Let's be clear. The big broadband barons want to monetize this. The subscribers have already given them money. It costs a lot of money to subscribe to broadband service so the kids can have a 50-inch screen that is plugged in to be able to see all of these things that are on the incredible multidimensional, multifunctional screens. We are already paying a fortune for it. But they say that is not enough. That is not enough. We need, say the broadband companies, to ensure that we can also make more money, and then taking all that information by invading your privacy and selling it. Broadband providers want to do more than simply provide Americans access to the internet. They want to sell that privacy information to the highest bidder.

This brings us to the great divide between ISPs and those who wish to protect the free and the open internet. The 21st century broadband internet is not a luxury. It is an essential telecommunications service, just like telephone service. Just as telephone companies cannot sell information about Americans' phone calls, an internet service provider should not be allowed to sell sensitive consumer information without affirmative consent of that family.

In fact, by putting the broadband privacy rules on the books, the FCC did harmonize privacy protections. They harmonized broadband privacy protections with the privacy framework that has prevented telephone companies from mining and selling information about our phone conversations for decades. Yes, that is what they did at the FCC. They said: the same protections for broadband information as we have for phone company information when you are dialing the numbers of people all day long. That is how they harmonized it. They said that in the 21st century, broadband is the essential service that the phone was in the 20th century, and the information on both should be given the same level of protection. That is harmonization. That is a reflection of the revolution that took place in telecommunications in the 1996 Telecommunications Act. That is what they are trying to take off the books—the harmonization of the standards that go back to grandma and grandpa. They made sure in 1934, when the Communications Act was written, that those protections were there. But, somehow or other, in 2017, it is no longer important that people don't know whom you called, that people don't know whom you are online interacting with.

So why did they do it? Well, they did it because broadband and telephone services are essential telecommunications services that Americans rely upon to thrive in the modern economy. The Federal Communications Commission, last year, under Barack Obama, just made sure that you got the same privacy protections. Broadband and telephone companies should not be allowed to exploit their privileged positions as telecom gatekeepers to use, to share, to sell sensitive information about Americans' online activities or phone calls. Yet, here we are, chipping away fundamental broadband privacy protections from the American public.

Now, all of this begs the question: What other privacy protections are the Republicans now going to put on the chopping block? Do they now oppose the FCC's rules preventing telephone companies from collecting, using, and selling sensitive information about Americans' phone calls? They certainly oppose the FCC's rules for preventing broadband companies from partaking in similar interests and practices.

Now, the broadband industry will tell us that these rules are unfair because they are different from the privacy

rules for websites—Google, Facebook. Why should there be different rules? Well, every person out there knows what the difference between Google and the broadband provider is. Google is one app; it is not thousands of apps. So the whole argument is fallacious from the get-go. When you use Google, you understand what your relationship is with Google. When you use ESPN.com, you know what the relationship is with ESPN.com. But when you are using every service, now you are talking about the broadband companies. They are the only ones that know everything about you, what you are doing online, all day long, every single day. That is under the jurisdiction of the Federal Communications Commission, following along their supervision of the telephone industry, which they have had rules on the books to ensure that information can't be sold without your permission.

Why is this so important? It is important because in the 21st century, having broadband service is like having oxygen in your lungs. Everyone uses it. Everyone is using it all day long. Everyone's information is in the hands of these companies. People might as well stop breathing as to disconnect from their broadband provider. That is why we need strong rules—not self-regulation—to prevent the internet service providers from mining and selling our data without consent.

This is, for me, a historic fight to defend America's fundamental right to privacy. The broadband industry will say that if we don't take these rules off the books, subscribers will be confused. There will be one set of standards for the individual website and another set of standards for the entire broadband internet service provider industry. Frankly, consumers are only more confused about why we aren't doing more to tackle these important privacy issues. Consumers are confused about why we are spending time on the Senate floor taking away privacy protections. Consumers are confused about why we would allow broadband companies to sell their sensitive information to banks, to insurance companies, to advertisers, to anyone else willing to pay top dollar for your personal information without your consent. They are confused about why we would rescind the rules ensuring broadband providers adhere to the best data security practices protecting subscribers' sensitive information from breaches and unauthorized use, when we know there are unauthorized hacks every single day. We are in a historic fight to defend America's fundamental right to privacy online, a fight to allow consumers, innovators, entrepreneurs, the millions of Americans all across this country who rely upon the internet to control their own information.

Instead of protecting our healthcare, instead of protecting our environment and protecting our privacy, Republicans want to give it all away to their friends and allies and big corporations. Those corporations don't care about consumer rights. They have one concern, and one concern only, and that is their bottom line. That is making money.

The cornerstone of our country is capitalism with a conscience—with a conscience. Massachusetts' unemployment rate is 3.2 percent. We are proud of that. We are a capitalist State. Massachusetts is proud to have one of the lowest unemployment rates in our country. We believe in capitalism, but we also believe we can have capitalism with a conscience. In this instance, it means the protection of the privacy of people online, from having that family's sacred, secret information compromised for a profit, with no ability—no ability, no right, none—for a family to say no. Take the broadband service or leave it. If you take it, you have no privacy.

The only people in this country who can protect those families are 100 Senators who will be voting tomorrow. I ask the Republican Senators, why would they strip this privacy protection from ordinary families? Why would they deny the right? All I can say is, overnight, all we can really say is we tried. We really tried to protect the privacy of Americans. That vote tomorrow will represent that showdown moment.

If we lose, please, out of good conscience, Republicans, just stop all this public concern about the compromise, the privacy, the President, the national security apparatus in our country. Believe me, the ordinary American is going to be made far more vulnerable tomorrow than anything any Russian entity is ever going to do. It is going to be what we did to ourselves, what we allowed to happen to our own citizens at the hands of their own United States Senate that is going to be a far greater threat to every ordinary family in our country.

I urge a ''no'' vote from my fellow colleagues on the Senate floor tomorrow. This goes right to the heart of whether we understand technology, we understand the responsibility we have for the American people, to protect them from the worst aspects of it.

There is a Dickensian quality to the internet: It is the best of technologies, and it is the worst of technologies, simultaneously. This technology can enable. It can ennoble. We want that to be extracted from the internet. But it can also degrade. It can also debase. It is the job of the U.S. Senate to protect the American people from that aspect of the internet. Tomorrow, if the Republicans have their way, they will remove the protections of the privacy of Americans and allow for an expansion of the degrading and the debasing of the privacy that ordinary Americans are entitled to in our country.

I thank the Presiding Officer for giving me the opportunity to be here.

Mr. President, I yield the floor.

ADJOURNMENT UNTIL 9:30 A.M. TOMORROW

The PRESIDING OFFICER. Under the previous order, the Senate stands adjourned until 9:30 a.m. tomorrow.

Thereupon, the Senate, at 7:07 p.m., adjourned until Thursday, March 23, 2017, at 9:30 a.m.

EXTENSIONS OF REMARKS

TRIBUTE TO SYLVIA BARNARD—CALIFORNIA'S 24TH CONGRESSIONAL WOMAN OF THE YEAR

HON. SALUD O. CARBAJAL

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, March 22, 2017

Mr. CARBAJAL. Mr. Speaker, I rise today in honor of Women's History Month. Every year, we dedicate the month of March to give special recognition to the accomplishments and sacrifices made by America's women. I consider it an honor to highlight the extraordinary women who are making a difference in my district. I would like to recognize one outstanding woman: Sylvia Barnard, of Santa Maria, California.

After facing incredible challenges in her early life, Sylvia has risen to not only empower herself, but other women facing similar difficulties in our community. Once a single mother on welfare at nineteen years old, Sylvia decided that pursuing a higher education was the best way to ensure a better life for her and her daughter and went on to get her Bachelor's Degree from the University of California, Santa Barbara (UCSB). Wanting to help other single mothers, Sylvia used her education from UCSB to write a book titled ''One Mother to Another.'' Her book focuses on the importance of determination, resilience, and the positive impact of higher education.

Currently, she passionately dedicates herself to leading The Good Samaritan Shelter, which gives support to the homeless and other vulnerable populations, serving almost 2,000 people per year. The agency also helps veterans, parolees, mothers fighting addictions, and those in rehabilitation. As the Executive Director, Sylvia has grown the small agency from a shelter that had only eight rooms to one that now has over fifteen rooms for people to escape living on the street.

Sylvia began working at the Great Samaritan Shelter over sixteen years ago as a grant writer, and about ten years ago took the helm of the organization. Under the helm of her leadership, the shelter is now the largest homeless shelter provider for the Santa Maria area.

She has gone above and beyond the call of duty and is a force of light and positivity for vulnerable communities in Santa Maria. I ask all Members to join me today in honoring an exceptional woman of California's 24th Congressional District, Sylvia Barnard, for her incredible service to her community.

HONORING MS. LEONA EGELAND RICE

HON. MIKE THOMPSON

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, March 22, 2017

Mr. THOMPSON of California. Mr. Speaker, I rise today to honor Leona Egeland Rice upon her retirement after over four decades of public service and leadership in California. Ms. Rice has served our state as a teacher, an elected official, and an advocate for quality healthcare.

A native of Tucson, Arizona, Ms. Egeland Rice came to California to earn a master's degree in education at San Jose State University. She stayed in California as she began her family and her career as a science teacher. While political issues always interested her, Ms. Egeland Rice first became personally involved in the public sphere through her instrumental role in the campaign to build a new sewage treatment plan to prevent ocean pollution.

After the success of her first community organizing experience, Ms. Egeland Rice found a new passion for local involvement. She worked with the Santa Clara County Supervisor's office to ensure women were appointed to boards and commissions in the county. In 1974, she launched her first campaign for the California State Assembly and won with over 57 percent of the vote. When she took office, only one other woman served in the State Assembly. Ms. Egeland Rice later led the charge to change members' title from ''Assemblyman'' to ''Assembly Member'' to reflect the body's growing diversity.

During her three terms in the Assembly, Ms. Egeland Rice successfully championed important legislation to improve children's welfare, public health, and access to healthcare across the state. After leaving the State Assembly, Ms. Rice became Chief Deputy Director for the California Department of Human Services, where she established an office in Los Angeles and worked on maternal and children's health.

Ms. Egeland Rice returned to Northern California to spend time with her family in 1998. There she began working with The Doctors Company, a physician-owned insurance company. She helped lead the company's growth over the past two decades, and served as Senior Vice President of Government Relations as well as Executive Director of the company's charitable foundation. As The Doctors Company expanded beyond California, Ms. Egeland Rice developed partnerships with other state governments. Furthermore, she championed the Corporate Charitable program and implemented an Employee Charitable Gift Matching program.

Mr. Speaker, Leona Egeland Rice has served as a dedicated and influential teacher, public servant, and business leader in our community for over four decades. Therefore, it is fitting and proper that we honor Ms. Egeland Rice here today and extend our best wishes for an enjoyable retirement.

PERSONAL EXPLANATION

HON. LOUISE McINTOSH SLAUGHTER

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Wednesday, March 22, 2017

Ms. SLAUGHTER. Mr. Speaker, I was unavoidably detained and missed Roll Call vote numbers 176, 177, 178, 179, 180 and 181. Had I been present, I would have voted Aye on votes 178 and 181. I would have voted Nay on votes 176, 177, 179 and 180.

IN RECOGNITION OF ANN ARBOR'S BOY SCOUT TROOP 4 IN THE CENTENNIAL YEAR OF ITS FOUNDING

HON. DEBBIE DINGELL

OF MICHIGAN

IN THE HOUSE OF REPRESENTATIVES

Wednesday, March 22, 2017

Mrs. DINGELL. Mr. Speaker, I rise today to recognize Ann Arbor's Boy Scout Troop 4 in the year of its centennial. Boy Scout Troop 4 has been a pillar of the Ann Arbor community and has contributed to the well-being of southeast Michigan through its century of activism and service.

Founded in March 1917 with an original membership of ten boys and three adult leaders, Boy Scout Troop 4 has provided Ann Arbor youth with skills and experience while serving the community at large. The group expanded rapidly during the 1920s and 30s and established itself as a key part of Ann Arbor civic life. The troop has continued to build on its early success and has collectively served over 1,800 boys from Ann Arbor and the surrounding areas since its founding, including over 150 that have achieved the rank of Eagle Scout. Today, Troop 4 continues to remain active in Ann Arbor through projects like Scouting for Food, which provides nutrition to needy individuals, as well as staffing local events like Kerrytown Bookfest and the Saline Celtic Festival. Additionally, the troop hosts camping events and trips for scouts around the state. These initiatives equip the Boy Scouts with experience and ability to become leaders in the community.

Troop 4's long and distinguished history of service has helped create generations of civic-minded individuals who have the skills and experience that will serve them throughout their lives. Through projects like restoring the St. Helena Light Station and visits to cultural institutions like the Cranbrook Institute and the Jackson Space Institute, the leadership and members of Troop 4 have continued to build on its historic legacy and the accomplishments of its alumni. It is my hope that Troop 4 continues to serve as a model for activism and help inspire leadership and a spirit of service in the community in the coming years.

Mr. Speaker, I ask my colleagues to join me in honoring Ann Arbor's Boy Scout Troop 4 on

its centennial in recognition of the troop's distinguished history. The troop has played a key role in the growth and development of the state through its service projects and cultivation of a new generation of community leaders.

TRIBUTE TO DAWN ADDIS—CALIFORNIA'S 24TH CONGRESSIONAL WOMAN OF THE YEAR

HON. SALUD O. CARBAJAL

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, March 22, 2017

Mr. CARBAJAL. Mr. Speaker, I rise today in honor of Women's History Month. Every year, we dedicate the month of March to give special recognition to the accomplishments and sacrifices made by America's women. I consider it an honor to highlight the extraordinary women who are making a difference in my District. I would like to recognize one outstanding woman: Dawn Addis, of Morro Bay, California.

Dawn saw the need for women in San Luis Obispo County to rise together and vocalize their demand for equal rights, which led to her becoming the co-founder and co-organizer of the Women's March San Luis Obispo (SLO). Her hard work and dedication granted San Luis Obispo County residents the opportunity to participate in the single biggest one-day demonstration in our nation's history. Dawn offered her community a platform to join a larger movement and have their voices be heard.

Because of Dawn's leadership, about 10,000 people marched in unity through the streets of downtown San Luis Obispo. She also ensured that the march remained peaceful and non-violent by working with the San Luis Obispo Police Chief. She worked from various community members to organize a successful, inclusive and safe event. The response from San Luis Obispo citizens about restoring their hope for the future was a testimony for the importance of Dawn's work.

Dawn's leadership empowered women from across San Luis Obispo County and allowed them to take part in a larger national conversation. I ask all Members to join me today in honoring an exceptional woman of California's 24th Congressional District, Dawn Addis, for her incredible service to her community.

MEMPHIS COMMERCIAL APPEAL OP-ED

HON. STEVE COHEN

OF TENNESSEE

IN THE HOUSE OF REPRESENTATIVES

Wednesday, March 22, 2017

Mr. COHEN. Mr. Speaker, I include in the RECORD the following op-ed I recently wrote for the Memphis Commercial Appeal:

Last year, then-candidate Donald Trump condescendingly said to African Americans, ''You live in your poverty, your schools are no good, you have no jobs . . . What the hell do you have to lose?''

We now know the answer: a lot.

Changes at the Department of Justice (DOJ), alone, are alarming. Instead of serving its traditional role as guardian of civil rights, DOJ is in full retreat. It has reversed course on voting rights, abandoning opposition to a Texas voter ID law in which a federal court found 600,000 registered voters did not have IDs necessary to vote.

Instead of protecting citizens from police who illegally discriminate against African Americans, Attorney General Jefferson Beauregard Sessions III has stated he does not favor the type of consent decrees used in Baltimore and Chicago to remediate conditions.

Sessions has also rolled back President Obama's efforts to phase out private prisons. African Americans not only make up a disproportionate share of the U.S. prison population, but appear more likely to be sent to private prisons, where the DOJ Inspector General has warned there are more security incidents than in public prisons.

Sessions has threatened to thwart the will of voters in states that have legalized marijuana. African Americans are three times more likely than whites are to be arrested for marijuana, despite usage being virtually the same.

The new Education Secretary thinks HBCUs, ''are the real pioneers when it comes to school choice.'' This is ignorant of segregation that necessitated the creation of HBCUs. Betsy DeVos has an education record that does not bode well for public schools, which have provided a path for African Americans to achieve the American Dream.

The new HUD Secretary, Dr. Ben Carson, said within days of assuming office that slaves were ''immigrants,'' a comment that bewildered many, including the NAACP. The President's recently-released budget proposal cuts $6 billion from this agency that so many rely on.

The outlook for a minimum wage increase under this Administration is nil. The President's first pick to head the Department of Labor opposed a raise, despite there not having been one since 2009. According to the Economic Policy Institute, 35 percent of African-American workers would benefit from a minimum wage increase.

Critical programs that help the most vulnerable such as Meals on Wheels, heating and energy assistance, and nutrition aid to women and children (WIC) would be drastically cut or eliminated in the President's budget. In addition, the budget eliminates Community Development Block Grants and HOME programs that provide affordable housing for low-income residents. Legal Services Corporation, which helps those who cannot afford legal representation, and the Minority Business Development Agency, which helps promote minority-owned businesses, would be eliminated. Massive cuts to these vital programs would be devastating to Memphis.

While these cuts would have a disproportional impact on African Americans, most cuts will affect all those who are economically disadvantaged and in need of government assistance.

Republicans are also rushing a health care plan that takes from low and middle-income families and gives to the rich. According to the non-partisan Congressional Budget Office, 24 million more Americans would be uninsured by 2026 under this plan. Insurance costs for citizens over 50 years of age would increase dramatically, and financial assistance would be drastically cut for those in need. All while millionaires and billionaires receive massive tax breaks.

During Black History Month, Trump showed his ignorance of the African American experience when he suggested Frederick Douglas was alive. His cabinet is on pace to have the fewest African Americans of any administration in recent memory.

While some African Americans have enjoyed prosperity and acceptance, it is undeniable that African Americans still suffer from vestiges of slavery and Jim Crow. Discrimination and institutional racism have held so many back and left many in need of government relief. Over the last half century, much of America's progress has been measured by how it has dealt with its original sin of slavery. Civil rights, voting rights, advances in health care, public education, social justice and ladders of opportunity to enter the middle class have been markers by which we have judged presidential administrations. Sadly, this administration is failing on all counts.

CONGRATULATING JERRY ANDERSON FOR HIS INTRODUCTION INTO THE OHIO ASSOCIATED PRESS HALL OF FAME

HON. ROBERT E. LATTA

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Wednesday, March 22, 2017

Mr. LATTA. Mr. Speaker, I want to recognize WTOL's Emmy Award-winning anchor, Jerry Anderson, for his election to the Ohio Associated Press Hall of Fame. For more than 40 years, Jerry has served Northwest Ohio as a valued and trustworthy face on the local news, and this honor is well deserved.

In 1974, Jerry Anderson started his career in Bowling Green on the radio airwaves for WFOB. Jerry began his television news career in 1980, and he has become one of the top media members in the region. Jerry was awarded an Emmy for Outstanding News Anchor in the NATAS region in 2001.

With a career that has touched on local, regional, and national news, Jerry covered countless important events to the people of Toledo and surrounding areas. So far in his career, Jerry has brought four national political conventions, the inaugurations of three presidents, and Pope John Paul II's visit to Detroit into the living room of families in Northwest Ohio.

A proud Ohioan, Jerry should also be celebrated for support of local charitable efforts, including earning his certification as an auctioneer so he may volunteer for more than 20 charity auctions annually. Jerry also donates numerous hours as an emcee at community events to help raise funding for local schools, disadvantaged families, and individuals with disabilities.

Mr. Speaker, the Ohio Associated Press Hall of Fame recognizes broadcasters that have ''served with exceptional distinction and honor in the field of journalism.'' When you think of the upstanding work he has done for over four decades, it's clear those words describe Jerry Anderson. Once again, congratulations to Jerry on this high honor.

TRIBUTE TO NANCY WEISS—CALIFORNIA'S 24TH CONGRESSIONAL WOMAN OF THE YEAR

HON. SALUD O. CARBAJAL

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, March 22, 2017

Mr. CARBAJAL. Mr. Speaker, I rise today in honor of Women's History Month. Every year, we dedicate the month of March to give special recognition to the accomplishments and

sacrifices made by America's women. I consider it an honor to highlight the extraordinary women who are making a difference in my District. I would like to recognize one outstanding woman: Nancy Weiss, of Santa Barbara, California.

After graduating from Boston University, Nancy attended the Culinary Institute with the hope of becoming one of the nation's best chefs. Soon after graduating from the Culinary Institute, she went to work for chef Gabino Sotelino. Nancy quickly became the head chef of a restaurant in Arizona, but wanted to create a place of her own. She opened an upscale pizzeria called Pop's, and two years after the opening her restaurant was featured on a PBS television special titled ''Great Chefs of the West.''

Now, Nancy is the Director of Food Services for the Santa Barbara School District (SBUSD), and she has revolutionized food service for our students to an incredibly high standard. She has eradicated fried foods, high fructose corn syrup, and frozen entrees from the menu to give students the healthiest choices for their daily meals. Nancy has also made an enormous mark on making public school cafeterias more environmentally friendly by banning Styrofoam trays.

Nancy is dedicated to the health of her students, and guarantees that every fruit and vegetable are sourced from local Santa Barbara farmers. Nancy has also enlisted a fleet of six food trucks to serve students at elementary schools without a cafeteria, and two preschool sites without meal programs. Nancy wants to ensure that our students can eat well during the summer months, and has expanded her responsibilities to include serving Santa Barbara's kids over school vacations.

She has gone above and beyond the call of duty and has led the way for current and future Food Service Directors. I ask all Members to join me today in honoring an exceptional woman of California's 24th Congressional District, Nancy Weiss, for her incredible service to her community.

DUNK CITY

HON. FRANCIS ROONEY

OF FLORIDA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, March 22, 2017

Mr. FRANCIS ROONEY of Florida. Mr. Speaker, I rise today in honor of Florida Gulf Coast University with their return into March Madness for a second year in a row. The Eagles scored a big win against the No. 3 seed North Florida on Sunday. This is the third NCAA Tournament appearance for the Eagles since 2013.

I applaud the Florida Gulf Coast Eagles and Head Coach Dooley for their victory. There is a reason why FGCU is known as Dunk City—now go shut down more shot clocks.

THE NATIONAL ENDOWMENT FOR THE ARTS AND ITS IMPACT IN THE THIRTIETH DISTRICT OF TEXAS

HON. EDDIE BERNICE JOHNSON

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Wednesday, March 22, 2017

Ms. EDDIE BERNICE JOHNSON of Texas. Mr. Speaker, the National Endowment for the Arts was established in 1965 as an investment in our shared culture as a nation. President Lyndon Johnson at the signing ceremony for the National Foundation on the Arts and the Humanities Act stated that ''In the long history of man, countless empires and nations have come and gone. Those which created no lasting works of art are reduced today to short footnotes in history's catalog.'' I could not agree with this statement more.

Over the past five years, the NEA has provided grants totaling more than $1.4 million to local artists and organizations within the thirtieth district of Texas. In return, these artists and organizations have shared their unique forms of expression throughout the region by creating programs focused on uniting communities around art, bringing arts awareness to underserved areas, and strengthening arts education programs in our local schools.

In his first budget request, the President has proposed to eliminate the NEA. I believe the elimination of this agency would be a grave mistake that would have a negative economic, educational, and cultural impact on countless urban and rural communities across the country.

Programs such as the Dallas City of Learning, which provides a summer education program for more than 35,000 students, would not be as successful as they are today without support from the NEA. Countless performances, exhibitions, and festivals would be affected by this disastrous policy proposal.

Mr. Speaker, I rise today to strongly oppose the President's budget proposal which calls for eliminating funding to the National Endowment for the Arts. We must ensure that arts programs across the country are funded so that future generations will understand the culture of our time instead of this great period being a mere footnote in history.

HONORING MILFORD ''BUDDY'' BOSTICK

HON. BILL FLORES

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Wednesday, March 22, 2017

Mr. FLORES. Mr. Speaker, I rise today to honor Milford "Buddy" Bostick of Waco, Texas, who passed away on January 4, 2017.

Buddy Bostick selflessly served our nation and Central Texas in so many ways, and he will be missed greatly.

Buddy was born on May 18, 1918 in McLennan County, Texas. He graduated from Moody High School and later attended Baylor University, where he started his journalism career as a radio announcer for WACO Radio. Here Buddy planted the seeds of what would become a successful career in media broadcasting.

Upon graduating, Buddy worked as a radio announcer in Tennessee and Arkansas before eventually returning to Texas. He served his country during World War II as part of the Army Air Corps and upon returning home he continued to pursue his goal of owning his own radio station. He would ultimately do so much more. In 1955, Buddy obtained a license to launch KWTX-TV in Waco and two years later he launched KBTX-TV in Bryan. Since their founding, these two CBS affiliates have provided news and entertainment to hundreds of *thousands of families throughout Central Texas. In fact, KBTX was one of the first stations capable of color transmission, and was the first in the Brazos Valley to use color news film.

Buddy would go on to establish other television and radio stations across Texas and even into Louisiana. Then, in the 1970s he and a business partner purchased a controlling interest in the local Beilmead State Bank, changed the name to American Bank, and expanded it to a second location.

Buddy took a risk at the time when he chose to establish a television station in a town with a population of just 20,000. The media landscape in the 1950's was dominated by radio and newspapers. Yet Buddy had a vision and the desire to invest in a new form media to serve the public. In this endeavor, he was the epitome of a businessman and entrepreneur. Above all, he was a family man. He met his wife, Virginia, while attending Baylor University, and they were married for 74 years before she passed away in 2014. They are survived by their two daughters, Ellen and Martha, and ten grandchildren and great-grandchildren. Buddy was often quoted saying, ''nothing lasts forever.'' Though I am confident that one thing will—Buddy Bostick's legacy will have an impact for generations to come.

My wife, Gina, and I offer our deepest and heartfelt condolences to the entire Bostick family. We also lift up the family and friends of Buddy in our prayers.

As I close, I ask that all Americans continue to pray for our country, for our military men and women, who protect us abroad, and for our first responders, who protect us here at home.

TRIBUTE TO SUZANNE CURTIS—CALIFORNIA'S 24TH CONGRESSIONAL WOMAN OF THE YEAR

HON. SALUD O. CARBAJAL

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, March 22, 2017

Mr. CARBAJAL. Mr. Speaker, I rise today in honor of Women's History Month. Every year, we dedicate the month of March to give special recognition to the accomplishments and sacrifices made by America's women. I consider it an honor to highlight the extraordinary women who are making a difference in my District. I would like to recognize one outstanding woman: Suzanne Curtis, of San Luis Obispo, California.

Suzanne is one of the quiet heroes of her community by selflessly contributing her time and resources over several years to the local American Red Cross and victims of fires. She is a Volunteer Coordinator of the San Luis

Obispo chapter of the American Red Cross, and is tirelessly working to aid victims of natural disasters. Last year, San Luis Obispo County faced a devastating fire that consumed nearly 4,000 acres and forced residents to evacuate their homes. During the Chimney Fire, Suzanne was instrumental to securing people shelter and ensuring and assisting in their recovery from the disaster.

She continues to help natural disaster victims by serving as the local Red Cross Disaster Action Team dispatcher. In this capacity, she aids community members affected by house fires, earthquakes, and flooding. Her dedication to San Luis Obispo County's disaster victims is volunteered, and Suzanne gives most of her free time to working on behalf of others and protecting her fellow community members' safety.

As a retired U.S. Army Chief Warrant Officer, Suzanne continues to be a passionate supporter of our troops and local veterans. She is always willing to extend a helping hand to those who need it. She set up a scholarship specifically for women veterans at Cuesta College, which is the sole funding available for them.

Suzanne has been a champion for natural disaster victims and selflessly works for those who need it most. I ask all Members to join me today in honoring an exceptional woman of California's 24th Congressional District, Suzanne Curtis, for her incredible service to her community.

IN RECOGNITION OF HENRI LANDWIRTH, FOUNDER OF DIGNITY U WEAR

HON. JOHN H. RUTHERFORD

OF FLORIDA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, March 22, 2017

Mr. RUTHERFORD. Mr. Speaker, I rise today to ask the United States House of Representatives to join me in recognizing an extraordinary leader, Mr. Henri Landwirth, for the incredible impact he has had on countless individuals not only in Jacksonville but also across the country.

Born March 7, 1927, in Belgium, Henri Landwirth, along with his family, was arrested for being Jewish. He spent five years in a concentration camp and survived the Holocaust. At 18, Henri immigrated to the United States with only a Torah and a little money. Soon after his arrival, he joined the United States Army and served during the Korean War.

Following his military service, Landwirth used his G.I. benefits to take a course in hotel management and began work in a New York City hotel. He used every opportunity to work hard and advance through every job in the business and eventually moved to Florida to own his own hotel.

He enjoyed a successful career in the hotel industry and became a philanthropist starting the Fanny Landwirth Foundation in 1985 in memory of his mother. The mission of the Fanny Landwirth Foundation is "to enrich, educate and empower underserved children and families" by supporting basic needs such as food, shelter, clothing and education.

A trip to Jacksonville's Sulzbacher Center for the homeless and his memory of having no clothes when he was incarcerated at Auschwitz led him to found Dignity U Wear, which to date has provided over 9 million pieces of clothing valued at over $160 million to those in need.

Henri once said, "From the darkness of concentration camps grew many compassionate courageous and generous souls." Henri Landwirth's vision to become a courageous and generous soul has been proven true in the thousands of people he's helped over the years. His unwavering commitment and dedication to his community is immeasurable.

Mr. Speaker, I applaud Henri Landwirth for his strong leadership and unyielding commitment to philanthropy and our community.

VETERANS 2ND AMENDMENT PROTECTION ACT

SPEECH OF

HON. DAVID P. ROE

OF TENNESSEE

IN THE HOUSE OF REPRESENTATIVES

Thursday, March 16, 2017

Mr. ROE of Tennessee. Mr. Speaker, I include in the RECORD two letters from the National Disabilities Rights Network and the National Rifle Association in support of H.R. 1181:

NATIONAL RIFLE ASSOCIATION OF AMERICA,
Washington, DC, March 7, 2017.

DEAR CHAIRMAN ROE: I am pleased to write on behalf of the National Rifle Association in support of H.R. 1181, the "Veterans 2nd Amendment Protection Act."

This bill would address an ongoing problem over the past 12 years in which veterans and veterans' family members for whom fiduciaries have been appointed by the Department of Veterans Affairs are deemed to have been "adjudicated as . . . mental defective[s]" and prohibited from possessing or receiving firearms. Such an appointment is not necessarily based on any finding that the veteran is a danger to himself or herself or to others.

Fortunately, the NICS Improvement Amendment Act of 2007 provided these individuals with the opportunity to seek relief from that legal disability. However, your bill goes one step further in protecting the rights of veterans and family members, by ensuring that no VA proceeding going forward will prevent a person from exercising his or her Second Amendment rights unless a judicial authority has found that the person's mental incapacity or disorder actually makes him or her dangerous.

We wish you success in moving forward with this important protection for the rights of those who have served our country. Please don't hesitate to call me.

Sincerely,

JASON M. QUIMET,
Director of Federal Affairs.

NATIONAL DISABILITY RIGHTS NETWORK,
Washington, DC, March 17, 2017.

Re National Disability Rights Network letter of support for H.R. 1181, the Veterans 2nd Amendment Protection Act

Hon. PHIL ROE,
Chairman, House Veterans' Committee, Washington, DC.

DEAR CHAIRMAN ROE: The National Disability Rights Network (NDRN) writes in support of H.R. 1181, the "Veterans 2nd Amendment Protection Act". We appreciate your strong advocacy on this important topic.

The National Disability Rights Network (NDRN) is the non-profit membership organization for the federally mandated Protection and Advocacy (P&A) and Client Assistance Program (CAP) systems for individuals with disabilities. The P&As and CAPs were established by the United States Congress to protect the rights of people with disabilities and their families through legal support, advocacy, referral, and education. P&As and CAPs are in all 50 states, the District of Columbia, Puerto Rico, and the U.S. Territories (American Samoa, Guam, Northern Mariana Islands, and the US Virgin Islands), and there is a P&A and CAP affiliated with the Native American Consortium which includes the Hopi, Navaho and San Juan Southern Paiute Nations in the Four Corners region of the Southwest. Collectively, the P&A and CAP Network is the largest provider of legally based advocacy services to people with disabilities in the United States.

H.R. 1181 prohibits the Department of Veterans Affairs, from considering a veteran to be adjudicated as "mentally defective" for purposes of the right to receive or transport firearms without the order or finding of a judicial authority that such person is a danger to himself or herself or others. We oppose the reporting of names without full adjudication for a number of reasons, including:

The damaging message of a policy that focuses on reporting individuals who, for example, receive assistance in managing their benefits to the NICS gun database. The current public dialogue is replete with inaccurate stereotyping of people with mental disabilities as violent and dangerous, and there is a real concern that the VA policy will reinforce those unfounded assumptions.

The absence of any data suggesting that there is any connection between a beneficiary who is assisted by a fiduciary and a propensity toward gun violence.

The absence of any meaningful due process protections by not requiring an adjudication by a court of competent jurisdiction. Although the NICS Improvements Act of 2007 allows agencies to transmit the names of individuals who have been "adjudicated" to lack the capacity to manage their own affairs, VA's process does not, without a decision of a judicial authority, constitute an adjudication. Veterans should not lose the Constitutional rights they have fought to protect and defend without proper due process.

We urge Congress to act, through passing H.R. 1181, to prevent the damage the current VA practice to report names of veterans with disabilities to the NICS background check system without proper adjudication is causing on veterans with disabilities.

Please contact Amanda Lowe, Senior Public Policy Analyst with any questions.

Sincerley,

CURT DECKER,
Executive Director.

PERSONAL EXPLANATION

HON. EARL BLUMENAUER

OF OREGON

IN THE HOUSE OF REPRESENTATIVES

Wednesday, March 22, 2017

Mr. BLUMENAUER. Mr. Speaker, had I voted, I would have voted "no" on passage of H.R. 1259, the VA Accountability First Act of 2017 (Roll Call No. 168). This bill contains provisions that infringe on the collective bargaining and due process rights of Veterans Affairs' employees. Should this legislation become public law, it would have a damaging effect on patient care and VA recruitment, limiting the agency's efficiency.

IN SUPPORT FOR RECOGNITION OF WORLD WATER DAY

HON. HENRY C. "HANK" JOHNSON, JR.

OF GEORGIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, March 22, 2017

Mr. JOHNSON of Georgia. Mr. Speaker, every year on March 22nd we recognize World Water Day. It highlights drinking water is a basic right denied to many.

According to the United Nations fact sheet for World Water Day of 2017, a source of drinking water contaminated with feces, which puts them at risk of contracting cholera, dysentery, typhoid and polio. Unsafe water, poor sanitation and 842,000 deaths each year." This is a reality for people around the world including here in the United States.

Flint, Michigan has been without clean drinking water for almost two years. There were high levels of lead in the water supply which is contributing to a growing number of chronic illnesses in the region. It was not until this month that the EPA awarded funds to repair the pipe system in the city of Flint to hopefully decrease the amounts of lead. Unfortunately, Flint is not the only city struggling in this capacity. Last year, Reuters published an article that announced thousands of other cities had dangerous levels of lead in their water systems. This is an unacceptable reality that cannot remain ignored. The health of Americans, especially children and the elderly will remain at risk daily if this problem remains unchecked.

Under Trump's new executive order, "Restoring the Rule of Law, Federalism, and Economic Growth by reviewing the 'Waters of the United States' Rule," rolls back the landmark environmental rule that allows the government to limit the amount of pollution that enters into our streams, rivers, and wetlands. Originally the rule protected 60 percent of water sources in the U.S.; however, under this administration, whose primary concern seems to be protecting big business and corporations, these water sources are at risk.

As Members of Congress, we must take steps to protect our water supply as a matter of public health. We need to address the situations in cities where lives are in danger due to contaminated water, both in the U.S. and around the world.

REGARDING THE LIFE OF JESSE O. ADCOCK

HON. STEVEN M. PALAZZO

OF MISSISSIPPI

IN THE HOUSE OF REPRESENTATIVES

Wednesday, March 22, 2017

Mr. PALAZZO. Mr. Speaker, I rise today to honor the life and memory of Jesse O. Adcock who passed away this past Thursday, March 16, 2017. Mr. Adcock was born on March 8, 1924 in Neshoba County, MS, in the Arlington Community.

During World War II Mr. Adcock joined the U.S. Army Air Corps, and was assigned to the Eighth Air Force. While there he flew 35 missions in the B–17 and was awarded the Purple Heart and other distinguished decorations for his heroic service. He also served in the Berlin Airlift prior to retiring from the Air Force in 1967.

Mr. Adcock returned home to Mississippi and entered the real estate business in Biloxi. He became invloved in several business and civic associations including the Mississippi Realtors Association, Biloxi Businessman's Club and the Gulf Coast Apartment Association. He built and owned several apartment complexes, and the successful business he started over 50 years ago continues to operate today.

Mr. Adcock was very involved with politics and government at all levels and was appointed to serve on the Mississippi Medicaid Commission by Governor William Waller. He later served as the commission's chairman.

Mr. Adcock was not only interested in serving his state, but his faith community as well. He was a member of First Baptist Church of Biloxi and served in various leadership positions until moving to Hattiesburg in 1994, where he became an active member of Venture Church.

Mr. Adcock's service to his nation, state and community will always be remembered and I am proud to recognize his life of service before the United States Congress.

RECOGNITION OF INTERNATIONAL DAY FOR THE ELIMINATION OF RACIAL DISCRIMINATION

HON. HENRY C. "HANK" JOHNSON, JR.

OF GEORGIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, March 22, 2017

Mr. JOHNSON of Georgia. Mr. Speaker, yesterday was International Day for the Elimination of Racial Discrimination. It is no secret that hate and racism are very much still alive today. Society is often racist and prejudiced against minority individuals, because of the color of their skin or where they come from. Men and women are denied jobs, migrant status, or even killed because of racial discrimination. The Southern Poverty Law Center's Hate Group Map indicates that the number of hate groups has grown for two years in a row. The SPLC map also demonstrates that currently there are more than 900 organizations in existence whose primary purpose is to drive a narrative of hate, discrimination, and intimidation. Additionally, a Pew research study showed racial tensions are perceived to have worsened by 38 percent of people since President Obama's first term. The same study indicated that African-Americans are about twice as likely as whites to feel that it is in fact discrimination that is preventing the success of Black Americans. The FBI's 2016 hate crime report reveals that hate crimes against Muslims grew by 67 percent in just one year.

This administration's rhetoric has encouraged behavior that is aggressive and intolerant. This is not reflective of America and our values. We must be diligent in our efforts to minimize and eliminate racial discrimination from all facets of society and our political narrative.

SENATE COMMITTEE MEETINGS

Title IV of Senate Resolution 4, agreed to by the Senate of February 4, 1977, calls for establishment of a system for a computerized schedule of all meetings and hearings of Senate committees, subcommittees, joint committees, and committees of conference. This title requires all such committees to notify the Office of the Senate Daily Digest—designated by the Rules Committee—of the time, place and purpose of the meetings, when scheduled and any cancellations or changes in the meetings as they occur.

As an additional procedure along with the computerization of this information, the Office of the Senate Daily Digest will prepare this information for printing in the Extensions of Remarks section of the CONGRESSIONAL RECORD on Monday and Wednesday of each week.

Meetings scheduled for Thursday, March 23, 2017 may be found in the Daily Digest of today's RECORD.

MEETINGS SCHEDULED

MARCH 27

12 noon

Committee on the Judiciary

Business meeting to consider the nominations of Neil M. Gorsuch, of Colorado, to be an Associate Justice of the Supreme Court of the United States, and Rod J. Rosenstein, of Maryland, to be Deputy Attorney General, and Rachel L. Brand, of Iowa, to be Associate Attorney General, both of the Department of Justice.

SD–226

MARCH 28

9:30 a.m.

Committee on Banking, Housing, and Urban Affairs

To hold hearings to examine fostering economic growth, focusing on the role of financial companies.

SD–538

10 a.m.

Committee on Energy and Natural Resources

To hold hearings to examine the United States' increasing dependence on foreign sources of minerals and opportunities to rebuild and improve the supply chain in the United States.

SD–366

Committee on the Judiciary

To hold hearings to examine protecting young athletes from sexual abuse.

SD–226

10:30 a.m.

Committee on Foreign Relations

To hold hearings to examine the view from Congress, focusing on United States policy on Iran.

SD–419

2:15 p.m.

Committee on Energy and Natural Resources

Subcommittee on Energy

To hold hearings to examine the cybersecurity threats to the United States electric grid and technology advancements to minimize such threats, including S. 79, to provide for the establishment of a pilot program to identify security vulnerabilities of certain entities in the energy sector.

SD–366

2:30 p.m.

Committee on Armed Services
To receive a closed briefing on Department of Defense worldwide policy and strategy and the Fiscal Year 2017 Defense Supplemental Budget Request.
SVC–217

Committee on Environment and Public Works
Subcommittee on Fisheries, Water, and Wildlife
To hold hearings to examine S. 518, to amend the Federal Water Pollution Control Act to provide for technical assistance for small treatment works, S. 675, to amend and reauthorize certain provisions relating to Long Island Sound restoration and stewardship, and an original bill entitled, ''Water Infrastructure Flexibility Act of 2017''.
SD–406

MARCH 29

10 a.m.

Committee on Commerce, Science, and Transportation
To hold hearings to examine closing the skills gap and boosting United States competitiveness.
SD–G50

Committee on Environment and Public Works
To hold hearings to examine cleaning up our nation's Cold War legacy sites.
SD–406

10:15 a.m.

Committee on Foreign Relations
Subcommittee on Western Hemisphere, Transnational Crime, Civilian Security, Democracy, Human Rights, and Global Women's Issues
To hold hearings to examine United State-Mexico relationship, focusing on advancing security and prosperity on both sides of the border.
SD–419

10:30 a.m.

Committee on Appropriations
Subcommittee on Department of Defense
To hold hearings to examine a review of the defense health program and military medicine funding.
SD–192

2:15 p.m.

Committee on Armed Services
Subcommittee on Readiness and Management Support
To hold hearings to examine the health of the Department of Defense industrial base, and its role in providing readiness to the warfighter.
SR–232A

Committee on Foreign Relations
Subcommittee on East Asia, the Pacific, and International Cybersecurity Policy
To hold hearings to examine American leadership in the Asia-Pacific, focusing on security issues.
SD–419

2:30 p.m.

Committee on Appropriations
Subcommittee on State, Foreign Operations, and Related Programs
To hold hearings to examine civil society perspectives on Russia.
SD–192

Committee on Commerce, Science, and Transportation
To hold hearings to examine the nomination of Jeffrey A. Rosen, of Virginia, to be Deputy Secretary of Transportation.
SD–G50

Committee on Homeland Security and Governmental Affairs
Subcommittee on Federal Spending Oversight and Emergency Management
To hold hearings to examine the effect of borrowing on Federal spending.
SD–342

Committee on Indian Affairs
To hold an oversight hearing to examine native youth, focusing on promoting diabetes prevention through healthy living.
SD–628

Special Committee on Aging
To hold hearings to examine the arc of Alzheimer's, focusing on preventing cognitive decline in Americans to assuring quality care for those living with the disease.
SD–106

3 p.m.

Committee on Small Business and Entrepreneurship
To hold hearings to examine how small businesses confront and shape regulations.
SR–428A

3:30 p.m.

Committee on Armed Services
Subcommittee on Airland
To hold hearings to examine Air Force modernization.
SR–222

MARCH 30

2:30 p.m.

Committee on Energy and Natural Resources
To hold hearings to examine the potential for infrastructure improvements to create jobs and reduce the cost of living through all-of-the-above energy and mineral production in Alaska.
SD–366

APRIL 6

9:30 a.m.

Committee on Armed Services
To hold hearings to examine United States Southern Command and United States Northern Command.
SD–G50

Daily Digest

Senate

Chamber Action

Routine Proceedings, pages S1899–S1940

Measures Introduced: Eleven bills and one resolution were introduced, as follows: S. 693–703, and S. Con. Res. 11. **Pages S1932–33**

Measures Reported:

S. 249, to provide that the pueblo of Santa Clara may lease for 99 years certain restricted land. (S. Rept. No. 115–8) **Page S1932**

Measures Passed:

Clarification of Employer's Continuing Obligation to Make and Maintain an Accurate Record of Each Recordable Injury and Illness Rule: By 50 yeas to 48 nays (Vote No. 93), Senate passed H.J. Res. 83, disapproving the rule submitted by the Department of Labor relating to ''Clarification of Employer's Continuing Obligation to Make and Maintain an Accurate Record of Each Recordable Injury and Illness'', after agreeing to the motion to proceed. **Pages S1900–24**

Measures Considered:

Protecting the Privacy of Customers of Broadband and Other Telecommunications Services Rule—Agreement: Senate began consideration of S.J. Res. 34, providing for congressional disapproval under chapter 8 of title 5, United States Code, of the rule submitted by the Federal Communications Commission relating to ''Protecting the Privacy of Customers of Broadband and Other Telecommunications Services'', after agreeing to the motion to proceed. **Pages S1925–29, S1935–40**

A unanimous-consent agreement was reached providing for further consideration of the joint resolution at approximately 9:30 a.m., on Thursday, March 23, 2017. **Page S1928**

Appointments:

Board of Visitors of the U.S. Military Academy: The Chair, on behalf of the Vice President, pursuant to 10 U.S.C. 4355(a), appointed the following Senators to the Board of Visitors of the U.S. Military Academy: Senator Gillibrand (Committee on Armed Services), Senator Murphy (Committee on Appropriations.) **Page S1935**

Board of Visitors of the U.S. Merchant Marine Academy: The Chair, on behalf of the Vice President, pursuant to Section 1295b(h) of title 46 App., United States Code, appointed the following Senators to the Board of Visitors of the U.S. Merchant Marine Academy: Senator Peters (At Large), Senator Schatz (Committee on Commerce, Science and Transportation.) **Page S1935**

Board of Visitors of the U.S. Coast Guard Academy: The Chair, on behalf of the Vice President, pursuant to 14 U.S.C. 194(a), as amended by Public Law 101–595, and further amended by Public Law 113–281, appointed the following Senators to the Board of Visitors of the U.S. Coast Guard Academy: Senator Cantwell (Committee on Commerce, Science and Transportation), Senator Blumenthal (At Large). **Page S1935**

Board of Visitors of the U.S. Naval Academy: The Chair, on behalf of the Vice President, pursuant to 10 U.S.C. 6968(a), appointed the following Senators to the Board of Visitors of the U.S. Naval Academy: Senator Shaheen (Committee on Appropriations), Senator Cardin (At Large). **Page S1935**

Board of Visitors of the U.S. Air Force Academy: The Chair, on behalf of the Vice President, pursuant to 10 U.S.C. 9355(a), appointed the following Senators to the Board of Visitors of the U.S. Air Force Academy: Senator Udall (Committee on Appropriations), Senator Hirono (Committee on Armed Services). **Page S1935**

Message from the President: Senate received the following message from the President of the United States:

Transmitting, pursuant to law, a notice of the continuation of the national emergency with respect to South Sudan that was declared in Executive Order 13664 of April 3, 2014; which was referred to the Committee on Banking, Housing, and Urban Affairs. (PM–3) **Page S1932**

Friedman Nomination—Cloture: Senate began consideration of the nomination of David Friedman, of New York, to be Ambassador to Israel. **Page S1924**

A motion was entered to close further debate on the nomination, and, in accordance with the provisions of Rule XXII of the Standing Rules of the Senate, a vote on cloture will occur on Friday, March 24, 2017. **Page S1924**

Prior to the consideration of this nomination, Senate took the following action:

Senate agreed to the motion to proceed to Executive Session to consider the nomination. **Page S1924**

Messages from the House: **Page S1932**

Measures Referred: **Page S1932**

Measures Placed on the Calendar: **Pages S1900, S1932**

Executive Communications: **Page S1932**

Additional Cosponsors: **Page S1933**

Statements on Introduced Bills/Resolutions: **Pages S1933–34**

Additional Statements: **Page S1931**

Authorities for Committees to Meet: **Pages S1934–35**

Privileges of the Floor: **Page S1935**

Record Votes: One record vote was taken today. (Total—93) **Page S1924**

Adjournment: Senate convened at 10:30 a.m. and adjourned at 7:07 p.m., until 9:30 a.m. on Thursday, March 23, 2017. (For Senate's program, see the remarks of the Acting Majority Leader in today's Record on page S1928.)

Committee Meetings

(Committees not listed did not meet)

DEFENSE READINESS

Committee on Appropriations: Subcommittee on Department of Defense concluded a hearing to examine defense readiness and budget update, after receiving testimony from James N. Mattis, Secretary, and General Joseph F. Dunford, Jr., USMC, Chairman, Joint Chiefs of Staff, both of the Department of Defense.

ARMY MODERNIZATION

Committee on Armed Services: Subcommittee on Airland concluded a hearing to examine Army modernization, after receiving testimony from Lieutenant General Joseph Anderson, USA, Deputy Chief of Staff, G–3/5/7, Lieutenant General John M. Murray, USA, Deputy Chief of Staff, G–8, Major General Robert M. Dyess Jr., USA, Acting Director, Army Capabilities Integration Center, and Brigadier General Promotable Robert L. Marion, USA, Deputy of Acquisition and Systems Management, Office of the Assistant Secretary for Acquisition, Logistics and Technology, all of the United States Army, Department of Defense.

CYBERSECURITY

Committee on Commerce, Science, and Transportation: Committee concluded a hearing to examine the promises and perils of emerging technologies for cybersecurity, after receiving testimony from Eric Rosenbach, former Chief of Staff, and former Assistant Secretary for Homeland Defense and Global Security, Department of Defense, Washington, D.C.; Caleb Barlow, IBM Security, Cambridge, Massachusetts; Venky Ganesan, Menlo Ventures, Menlo Park, California; Steve Grobman, Intel Security Group, Sacramento, California; and Malcolm Harkins, Cylance Inc., Irvine, California.

COAST GUARD

Committee on Commerce, Science, and Transportation: Subcommittee on Oceans, Atmosphere, Fisheries, and Coast Guard concluded a hearing to examine the state of the Coast Guard, focusing on ensuring military, national security, and enforcement capability and readiness, after receiving testimony from Admiral Paul F. Zukunft, Commandant, Coast Guard, Department of Homeland Security.

BUSINESS MEETING

Committee on Environment and Public Works: Committee ordered favorably reported S. 512, to modernize the regulation of nuclear energy, with an amendment in the nature of a substitute.

GLOBAL HUMANITARIAN AFFAIRS

Committee on Foreign Relations: Committee concluded a hearing to examine the state of global humanitarian affairs, after receiving testimony from Gregory C. Gottlieb, Acting Assistant Administrator, Bureau for Democracy, Conflict, and Humanitarian Assistance, U.S. Agency for International Development; Nancy Lindborg, United States Institute for Peace, Washington, D.C.; and Yves Daccord, International Committee of the Red Cross, Geneva, Switzerland.

DEPARTMENT OF HOMELAND SECURITY FRONTLINE

Committee on Homeland Security and Governmental Affairs: Committee concluded a hearing to examine perspectives from the DHS frontline, focusing on evaluating staffing resources and requirements, after receiving testimony from Brandon Judd, National Border Patrol Council, Tucson, Arizona, on behalf of Border Patrol Agents, U.S. Customs and Border Protection; Anthony M. Reardon, National Treasury Employees Union, Washington, D.C., on behalf of Office of Field Operations Officers, U.S. Customs

and Border Protection; and Chris Crane, National Immigration and Customs Enforcement Council, Oakdale, Louisiana, on behalf of Enforcement Removal Operations Officers, U.S. Immigration and Customs Enforcement.

NOMINATION

Committee on Health, Education, Labor, and Pensions: Committee concluded a hearing to examine the nomination of R. Alexander Acosta, of Florida, to be Secretary of Labor, after the nominee, who was introduced by Senators Cruz and Rubio, testified and answered questions in his own behalf.

NOMINATION

Committee on the Judiciary: Committee continued hearings to examine the nomination of Neil M. Gorsuch, of Colorado, to be an Associate Justice of the Supreme Court of the United States, the nominee testified and answered questions in his own behalf.

Hearings recessed subject to the call and will meet again on Thursday, March 23, 2017.

House of Representatives

Chamber Action

Public Bills and Resolutions Introduced: 29 public bills, H.R. 1664–1692; and 3 resolutions, H.J. Res. 37–38; and H. Res. 220 were introduced. **Pages H2347–49**

Additional Cosponsors: **Page H2350**

Reports Filed: Reports were filed today as follows:

H.R. 1215, to improve patient access to health care services and provide improved medical care by reducing the excessive burden the liability system places on the health care delivery system, with an amendment (H. Rept. 115–55, Part 1); and

H. Res. 221, waiving a requirement of clause 6(a) of rule XIII with respect to consideration of certain resolutions reported from the Committee on Rules, and providing for consideration of motions to suspend the rules (H. Rept. 115–56). **Page H2347**

Speaker: Read a letter from the Speaker wherein he appointed Representative Hultgren to act as Speaker pro tempore for today. **Page H2291**

Recess: The House recessed at 11:12 a.m. and reconvened at 12 noon. **Page H2299**

Guest Chaplain: The prayer was offered by the Guest Chaplain, Dr. Tom Smiley, Lakewood Baptist Church, Gainesville, Georgia. **Page H2299**

Question of Privilege: Representative Polis rose to a question of the privileges of the House and submitted a resolution. The Chair ruled that the resolution did not present a question of the privileges of the House. Subsequently, Representative Polis appealed the ruling of the chair and Representative Cheney moved to table the appeal. Agreed to the motion to table the appeal of the ruling of the Chair by a yea-and-nay vote of 230 yeas to 189 nays with 1 answering ''present'', Roll No. 182. **Pages H2308–11**

Competitive Health Insurance Reform Act of 2017: The House passed H.R. 372, to restore the application of the Federal antitrust laws to the business of health insurance to protect competition and consumers, by a recorded vote of 416 ayes to 7 noes, Roll No. 184. Consideration began yesterday, March 21st. **Pages H2311–12**

Rejected the Rosen motion to recommit the bill to the Committee on the Judiciary with instructions to report the same back to the House forthwith with an amendment, by a yea-and-nay vote of 189 yeas to 233 nays, Roll No. 183. **Page H2311**

H. Res. 209, the rule providing for consideration of the bill (H.R. 372) was agreed to yesterday, March 21st.

Small Business Health Fairness Act of 2017: The House passed H.R. 1101, to amend title I of the Employee Retirement Income Security Act of 1974 to improve access and choice for entrepreneurs with small businesses with respect to medical care for their employees, by a recorded vote of 236 ayes to 175 noes, Roll No. 186. **Pages H2312–30**

Rejected the Shea Porter motion to recommit the bill to the Committee on Education and the Workforce with instructions to report the same back to the House forthwith with an amendment, by a yea-and-nay vote of 179 yeas to 233 nays, Roll No. 185. **Pages H2328–30**

Pursuant to the Rule, an amendment in the nature of a substitute consisting of the text of Rules Committee Print 115–9 shall be considered as adopted, in lieu of the amendment in the nature of a substitute recommended by the Committee on Education and the Workforce now printed in the bill. **Page H2312**

Agreed to:

Herrera Beutler amendment (No. 1 printed in H. Rept. 115–51) that clarifies that existing association

health plans may continue to operate under existing state and federal law. **Pages H2327–28**

H. Res. 210, the rule providing for consideration of the bill (H.R. 1101) was agreed to yesterday, March 21st.

Suspension: The House agreed to suspend the rules and pass the following measure:

Securing our Agriculture and Food Act: H.R. 1238, to amend the Homeland Security Act of 2002 to make the Assistant Secretary of Homeland Security for Health Affairs responsible for coordinating the efforts of the Department of Homeland Security related to food, agriculture, and veterinary defense against terrorism, by a ⅔ yea-and-nay vote of 406 yeas to 6 nays, Roll No. 187.

Pages H2304–07, H2330–31

Meeting Hour: Agreed by unanimous consent that when the House adjourns today, it adjourn to meet at 9 a.m. tomorrow, March 23. **Page H2331**

Congressional Award Board—Reappointment: Read a letter from Representative Pelosi, Minority Leader, in which she reappointed the following Member to the Congressional Award Board: Representative Dingell. **Page H2331**

Suspensions—Proceedings Postponed: The House debated the following measures under suspension of the rules. Further proceedings were postponed.

Terrorist and Foreign Fighter Travel Exercise Act of 2017: H.R. 1302, to require an exercise related to terrorist and foreign fighter travel; and

Pages H2303–04

Department of Homeland Security Acquisition Innovation Act: H.R. 1365, amended, to amend the Homeland Security Act of 2002 to require certain acquisition innovation. **Pages H2307–08**

Recess: The House recessed at 6:11 p.m. and reconvened at 11:52 p.m. **Page H2346**

Presidential Message: Read a message from the President wherein he notified Congress that the national emergency declared with respect to South Sudan is to continue in effect beyond April 3, 2017—referred to the Committee on Foreign Affairs and ordered to be printed (H. Doc. 115–25).

Page H2331

Senate Messages: Messages received from the Senate by the Clerk and subsequently presented to the House today appear on pages H2302–03.

Quorum Calls—Votes: Four yea-and-nay votes and two recorded votes developed during the proceedings of today and appear on pages H2310–11, H2311, H2311–12, H2329, H2330, and H2330–31. There were no quorum calls.

Adjournment: The House met at 10 a.m. and adjourned at 11:53 p.m.

Committee Meetings

THE NEXT FARM BILL: DAIRY POLICY

Committee on Agriculture: Full Committee held a hearing entitled "The Next Farm Bill: Dairy Policy". Testimony was heard from public witnesses.

VETERANS AFFAIRS OFFICE OF INSPECTOR GENERAL

Committee on Appropriations: Subcommittee on Military Construction, Veterans Affairs, and Related Agencies held an oversight hearing on the Veterans Affairs Office of Inspector General. Testimony was heard from Michael J. Missal, Inspector General, Department of Veterans Affairs.

THE EVOLUTION OF HYBRID WARFARE AND KEY CHALLENGES

Committee on Armed Services: Full Committee held a hearing entitled "The Evolution of Hybrid Warfare and Key Challenges". Testimony was heard from public witnesses.

THE CURRENT STATE OF THE U.S. AIR FORCE

Committee on Armed Services: Subcommittee on Readiness held a hearing entitled "The Current State of the U.S. Air Force". Testimony was heard from Major General Scott D. West, Director of Current Operations and Deputy Chief of Staff for Operations, U.S. Air Force Headquarters; Lieutenant General Maryanne Miller, Chief, U.S. Air Force Reserve; and Lieutenant General L. Scott Rice, Director, U.S. Air National Guard.

LEGISLATIVE MEASURE

Committee on Energy and Commerce: Subcommittee on Environment held a hearing on H.R. 806, the "Ozone Standards Implementation Act of 2017". Testimony was heard from Sean Alteri, Director, Division of Air Quality, Kentucky Department of Environmental Protection; Marc A. R. Cone, Director, Bureau of Air Quality, Maine Department of Environmental Protection; Nancy Vehr, Air Quality Administrator, Wyoming Department of Environmental Quality; Kurt Karperos, Deputy Executive Officer, California Air Resources Board; Seyed Sadredin, Executive Director/Air Pollution Control Officer, San Joaquin Valley Air Pollution Control District; and a public witness.

EXAMINING FDA'S PRESCRIPTION DRUG USER FEE PROGRAM

Committee on Energy and Commerce: Subcommittee on Health held a hearing entitled ''Examining FDA's Prescription Drug User Fee Program''. Testimony was heard from Janet Woodcock, Director, Center for Drug Evaluation and Research, Food and Drug Administration; and public witnesses.

ORGANIZATIONAL MEETING

Committee on Ethics: Full Committee held an organizational meeting for the 115th Congress. The committee adopted its rules for the 115th Congress.

EXAMINING RESULTS AND ACCOUNTABILITY AT THE WORLD BANK

Committee on Financial Services: Subcommittee on Monetary Policy and Trade held a hearing entitled ''Examining Results and Accountability at the World Bank''. Testimony was heard from public witnesses.

THE JOBS ACT AT FIVE: EXAMINING ITS IMPACT AND ENSURING THE COMPETITIVENESS OF THE U.S. CAPITAL MARKETS

Committee on Financial Services: Subcommittee on Capital Markets, Securities, and Investment held a hearing entitled ''The JOBS Act at Five: Examining Its Impact and Ensuring the Competitiveness of the U.S. Capital Markets''. Testimony was heard from public witnesses.

ANTI-SEMITISM ACROSS BORDERS

Committee on Foreign Affairs: Subcommittee on Africa, Global Health, Global Human Rights, and International Organizations held a hearing entitled ''Anti-Semitism Across Borders''. Testimony was heard from public witnesses.

U.S. POLICY TOWARD THE BALTIC STATES

Committee on Foreign Affairs: Subcommittee on Europe, Eurasia, and Emerging Threats held a hearing entitled ''U.S. Policy Toward the Baltic States''. Testimony was heard from public witnesses.

A BORDERLESS BATTLE: DEFENDING AGAINST CYBER THREATS

Committee on Homeland Security: Full Committee held a hearing entitled ''A Borderless Battle: Defending Against Cyber Threats''. Testimony was heard from public witnesses.

MISCELLANEOUS MEASURES

Committee on the Judiciary: Full Committee held a markup on H.R. 1393, the ''Mobile Workforce State Income Tax Simplification Act of 2017''; H.R. 695, the ''Child Protection Improvements Act of 2017''; H.R. 883, the ''Targeting Child Predators Act of 2017''; and H.R. 1188, the ''Adam Walsh Reauthorization Act of 2017''. H.R. 1393 and H.R. 883 were ordered reported, without amendment. H.R. 695 and H.R. 1188 were ordered reported, as amended.

THE STATUS OF THE PUERTO RICO ELECTRIC POWER AUTHORITY RESTRUCTURING SUPPORT AGREEMENT

Committee on Natural Resources: Subcommittee on Indian, Insular, and Alaska Native Affairs held a hearing entitled ''The Status of the Puerto Rico Electric Power Authority Restructuring Support Agreement''. Testimony was heard from Ricardo Rosselló, Governor, Puerto Rico; José B. Carrión III, Chairman, Financial Oversight and Management Board for Puerto Rico; Luis Benítez Hernández, Chairman, Puerto Rico Electric Power Authority Governing Board; Ana J. Matosantos, Member, Financial Oversight and Management Board for Puerto Rico; and public witnesses.

LAW ENFORCEMENT'S USE OF FACIAL RECOGNITION TECHNOLOGY

Committee on Oversight and Government Reform: Full Committee held a hearing entitled ''Law Enforcement's Use of Facial Recognition Technology''. Testimony was heard from Kimberly Del Greco, Deputy Assistant Director, Criminal Justice Information Services Division, Federal Bureau of Investigation; Diana Maurer, Director, Homeland Security and Justice Issues, Government Accountability Office; Charles Romine, Director, Information Technology Lab, National Institute of Standards and Technology; and public witnesses.

EXAMINING THE IMPACT OF VOLUNTARY RESTRICTED DISTRIBUTION SYSTEMS IN THE PHARMACEUTICAL SUPPLY CHAIN

Committee on Oversight and Government Reform: Subcommittee on Healthcare, Benefits, and Administrative Rules held a hearing entitled ''Examining the Impact of Voluntary Restricted Distribution Systems in the Pharmaceutical Supply Chain''. Testimony was heard from Janet Woodcock, Director, Center for Drug Evaluation and Research, Food and Drug Administration; and public witnesses.

AMERICAN HEALTH CARE ACT OF 2017; HOUSE RESOLUTION WAIVING A REQUIREMENT OF CLAUSE 6(A) OF RULE XIII WITH RESPECT TO CONSIDERATION OF CERTAIN RESOLUTIONS REPORTED FROM THE COMMITTEE ON RULES, AND PROVIDING FOR CONSIDERATION OF MOTIONS TO SUSPEND THE RULES

Committee on Rules: Full Committee began a hearing on the ''American Health Care Act of 2017''; and held a hearing on a house resolution waiving a requirement of clause 6(a) of rule XIII with respect to consideration of certain resolutions reported from the Committee on Rules, and providing for consideration of motions to suspend the rules. The Committee granted, by record vote of 9–3, a rule that waives clause 6(a) of rule XIII (requiring a two-thirds vote to consider a rule on the same day it is reported from the Rules Committee) against any resolution reported through the legislative day of March 27, 2017. In section 2, the rule provides that it shall be in order at any time through the calendar day of March 26, 2017, for the Speaker to entertain motions that the House suspend the rules and that the Speaker or his designee shall consult with the Minority Leader or her designee on the designation of any matter for consideration pursuant to this section.

THE ISS AFTER 2024: OPTIONS AND IMPACTS

Committee on Science, Space, and Technology: Subcommittee on Space held a hearing entitled ''The ISS after 2024: Options and Impacts''. Testimony was heard from William Gerstenmaier, Associate Administrator for Human Exploration and Operations, National Aeronautics and Space Administration; and public witnesses.

MAKING WASHINGTON WORK FOR AMERICA'S SMALL BUSINESSES

Committee on Small Business: Full Committee held a hearing entitled ''Making Washington Work For America's Small Businesses''. Testimony was heard from public witnesses.

HEALTHY HIRING: ENABLING VA TO RECRUIT AND RETAIN QUALITY PROVIDERS

Committee on Veterans' Affairs: Subcommittee on Health held a hearing entitled ''Healthy Hiring: Enabling VA to Recruit and Retain Quality Providers''. Testimony was heard from Robert Goldenkoff, Director, Strategic Issues, Government Accountability Office; Steve Young, Deputy Under Secretary for Health for Operations and Management, Veterans Health Administration, Department of Veterans Affairs; and public witnesses.

EXAMINING THE SOCIAL SECURITY ADMINISTRATION'S REPRESENTATIVE PAYEE PROGRAM: WHO PROVIDES HELP

Committee on Ways and Means: Subcommittee on Oversight and Subcommittee on Social Security held a joint hearing entitled ''Examining the Social Security Administration's Representative Payee Program: Who Provides Help''. Testimony was heard from Marianna LaCanfora, Acting Deputy Commissioner, Office of Retirement and Disability Policy, Social Security Administration; Gale Stallworth Stone, Acting Inspector General, Social Security Administration; David Slayton, Administrative Director, Office of Court Administration, Texas Judicial Branch; and public witnesses.

Joint Meetings

VETERANS SERVICE ORGANIZATIONS LEGISLATIVE PRESENTATIONS

Joint Hearing: Senate Committee on Veterans' Affairs concluded a joint hearing with the House Committee on Veterans' Affairs to examine the legislative presentation of multiple veterans service organizations, after receiving testimony from Colonel Carl A. Singer, USA (Ret.), Jewish War Veterans of the United States of America, Passaic, New Jersey; Donald Larson, Fleet Reserve Association, Ingleside, Texas; Chief Master Sergeant Mark Stevenson, (Ret.), Air Force Sergeants Association, Bowie, Maryland; Hershel W. Gober, Military Order of the Purple Heart of the U.S.A., Palm Coast, Florida; Charles Susino, Jr., American Ex-Prisoners of War, Metuchen, New Jersey; Robert D. Stamper, Blinded Veterans Association, Hayden, Idaho; Master Sergeant John Adams, USAF (Ret.), The Retired Enlisted Association, Colorado Springs, Colorado; and Lieutenant Colonel Aniela Szymanski, USMCR, Military Officers Association of America, and Allison Jaslow, Iraq and Afghanistan Veterans of America, both of Washington, D.C.

NEW PUBLIC LAWS

(For last listing of Public Laws, see DAILY DIGEST, *p. D297)*

S. 442, to authorize the programs of the National Aeronautics and Space Administration. Signed on March 21, 2017. (Public Law 115–10)

COMMITTEE MEETINGS FOR THURSDAY, MARCH 23, 2017

(Committee meetings are open unless otherwise indicated)

Senate

Committee on Agriculture, Nutrition, and Forestry: to hold hearings to examine the nomination of Sonny Perdue, of Georgia, to be Secretary of Agriculture, 10 a.m., SR–325.

Committee on Armed Services: to hold hearings to examine United States European Command, 9:30 a.m., SD–G50.

Subcommittee on Personnel, to hold hearings to examine Department of Defense civilian personnel reform, 2:30 p.m., SR–232A.

Committee on Banking, Housing, and Urban Affairs: to hold hearings to examine the nomination of Jay Clayton, of New York, to be a Member of the Securities and Exchange Commission, 9:30 a.m., SD–538.

Committee on Commerce, Science, and Transportation: Subcommittee on Aviation Operations, Safety, and Security, to hold hearings to examine FAA reauthorization, focusing on perspectives on improving airport infrastructure and aviation manufacturing, 10 a.m., SR–253.

Committee on the Judiciary: to continue hearings to examine the nomination of Neil M. Gorsuch, of Colorado, to be an Associate Justice of the Supreme Court of the United States, 9:30 a.m., SH–216.

Select Committee on Intelligence: to hold closed hearings to examine certain intelligence matters, 2 p.m., SH–219.

House

Committee on Armed Services, Subcommittee on Emerging Threats and Capabilities, hearing entitled ''High Consequences and Uncertain Threats: Reviewing Department of Defense Strategy, Policy, and Programs for Countering Weapons of Mass Destruction for Fiscal Year 2018'', 10:30 a.m., 2118 Rayburn.

Committee on the Judiciary, Subcommittee on Regulatory Reform, Commercial and Antitrust Law, hearing on the ''Financial Institution Bankruptcy Act of 2017'', 9 a.m., 2141 Rayburn.

Committee on Oversight and Government Reform, Full Committee, hearing entitled ''Legislative Proposals for Fostering Transparency'', 9 a.m., 2154 Rayburn.

Committee on Small Business, Subcommittee on Agriculture, Energy, and Trade, hearing entitled ''The Future of America's Small Family Farms'', 10 a.m., 2360 Rayburn.

Next Meeting of the SENATE

9:30 a.m., Thursday, March 23

Senate Chamber

Program for Thursday: Senate will continue consideration of S.J. Res. 34, Protecting the Privacy of Customers of Broadband and Other Telecommunications Services Rule.

Next Meeting of the HOUSE OF REPRESENTATIVES

9 a.m., Thursday, March 23

House Chamber

Program for Thursday: Consideration of H.R. 1628—American Health Care Act of 2017 (Subject to a Rule).

Extensions of Remarks, as inserted in this issue

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