

we are footing part of this bill. And then, ultimately, it will bring down drug prices, like they have in other countries.

But firing the men and women who carry out these price negotiations put those savings totally at risk. You cannot take on some of the world's biggest companies—the pharmaceutical companies—with bandaids and a skeleton crew. That is not going to work. I think we all know that. We all know this is really hard work.

On top of this, the firings threaten healthcare for the 170 million Americans who get coverage through Medicare, Medicaid—which is so many of our seniors when they are in assisted living with their long-term care, and people's parents and grandparents—as well as coverage under the Affordable Care Act, including over 2 million Minnesotans. In fact, Medicaid actually provides healthcare for 20 percent of my rural residents in my State. You will see similar numbers all across the country. And more than half of all nursing home residents in our State are on Medicaid.

I remember when my dad was in assisted living. He got late-onset Alzheimer's. I found a place for him and found the next place when he needed a little more help, and I knew, as his savings were running out, what that day was. I knew the exact month that he was going to run out of his savings, and then he would go onto Medicaid. And that was a safety net. I actually knew I couldn't keep him at the same place, but I knew a place I could have him go to.

He ended up dying a year before that date happened. But there are so many people in our country that know the exact date when their parent or their grandparent is going to be able to have that safety net of Medicaid because they have actually run through all their savings.

Nationwide, Medicaid provides coverage for two-thirds of all nursing home care. And these cuts—what we are seeing out of the House budget, where they have put targets on the exact program that includes Medicaid—these cuts will be particularly disastrous for people with chronic conditions, including millions of veterans who become sick or disabled as a result of their service.

What is this all about? It is about funding giant tax breaks for billionaires. Yes, over 2 trillion of that money goes to people who are wealthy, people making over \$400,000 a year.

I am all for keeping in these tax cuts for people making under \$400,000 a year, but I do not know why, when you are facing the debt that our country has and when you are dealing with people's needs with Medicaid and the like, you would decide to add tax cuts and make permanent tax cuts for people who are making over \$400,000 a year.

We actually had a vote on this, late at night about a week ago, where we asked our Republican colleagues: OK.

Well, how about for people making over \$10 million a year? That was Senator WARREN's amendment. She said: OK. How about if they are making over 10 million? Could we at least agree we shouldn't cut their taxes?

And, unfortunately, our Republican colleagues, for that amendment, yelled out: No.

Then we said—Senator KELLY got up there and said: OK. How about if they are making over \$100 million? Then we should add more tax cuts?

Our colleagues voted against that amendment, which said we should not add more tax cuts for people making over \$100 million when our country is facing the debt it has, when you have got the needs for people in nursing homes and the needs for people with childcare and the like.

So then they tried one more time. Senator ANGUS KING, Independent of Maine, said: OK. How about for people making over \$500 million? Then, at least, you can agree with us—right?—that we shouldn't add more tax cuts for those people making over \$500 million a year. And, sadly, our colleagues voted no.

Instead of cutting costs for regular people and their prices and groceries, they are cutting Medicaid, which provides healthcare for 7.2 million seniors, almost 40 million children, nearly two-thirds of nursing home residents, and millions of people with rare diseases.

But this isn't just the numbers. There are moms and dads, brothers and sisters, friends and neighbors. I heard from one Minnesotan who, at 4 years old, was diagnosed with Duchenne muscular dystrophy, which causes rapid muscle weakness, making it harder to complete most physical tasks. But this Minnesotan, who is now 26, has been able to thrive because he has Medicaid coverage. He got an education. He got a job. He graduated with a master's degree in public policy. He is paying taxes. In his words, Medicaid gave him the affordable health coverage he needed to manage his rare condition.

For him and millions more, the cuts at the Department of Health and Human Services put their lives and livelihood at risk.

This week is rare disease week. I have met with many rare disease patients. I am the cochair of that caucus. And they are in town right now to convene and collaborate with Federal medical researchers, Ph.D. students, other families affected, drug and device reviewers and advocates.

Many of these rare disease patients were looking forward to attending the rare disease event that was supposed to be today. And this year it was going to be a collaboration between NIH and the FDA because of all that integral work that goes on with drugs being approved for people with rare diseases, but that annual event was canceled because the people carrying that out—these people here with very difficult, rare diseases—that was canceled because the people doing the event were fired.

The mission of the Department of Health and Human Services, which the thousands of Americans who were fired work every day to uphold, is enhancing the health and well-being of all Americans. These mass firings are a direct affront to that mission.

The building that houses the Department of Health and Human Services is named for Minnesota's "Happy Warrior," Vice President Hubert Humphrey. It has been that way through Democrat and Republican Presidents. He was a champion for expanding access to healthcare. Inscribed in the entrance hall of that building are words from Humphrey's final speech in 1977. By the way, he was someone who was loved right here in this Chamber by Democrats and Republicans. Some of the most conservative Republicans mourned his loss, and they loved the guy. And this is what he said in his final speech here:

The moral test of government is how that government treats those who are in the dawn of life, the children; those who are in the twilight of life, the elderly; and those who are in shadows of life, the sick.

And he added, given he had a child in his own family with Down syndrome, and those with disabilities.

The firing of those who care for kids and seniors and those who work on rare diseases and those who are bringing together our people who work on drugs that are supposed to solve and are solving the problems for these rare disease families and those that are doing the approvals and those that are doing the research and the families that want to talk to them about it—they were all here, and they canceled it because, just like that, Elon Musk came in with his chain saw.

Those families are not going to tolerate this much longer.

I yield the floor.

The PRESIDING OFFICER. The Senator from Vermont.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Mr. WELCH. Mr. President, I want to speak about the extreme cuts that have affected the Department of Health and Human Services, the Federal Drug Administration, the National Institutes of Health, and the Centers for Disease Control.

First of all, the DOGE operation starts out with a premise that it is attacking waste, fraud, and abuse. And I am for that. Anyplace that we can save taxpayers money by responsible assessment of what programs are working or aren't, anytime we can uncover waste or certainly fraud and abuse, I want to do that, and I want that to be done across the board. Whether you are talking about health programs where they could be better organized or they could be more efficiently run to achieve the goal of better services for the people you represent and I represent for all Americans, I want to do that.

But how is DOGE going about it?

And we are here to talk about how they are doing it in the Department of Health and Human Services, under Mr. KENNEDY. Basically, they are doing it by sending out firing notices to people. Over 5,000 people have been fired, and that includes 700 in the Food and Drug Administration, 1,200 in the National Institutes of Health, and 600 in the Centers for Disease Control.

Here is the question, and the answer is obvious: If you want to make a program more efficient, do you fire the people first and essentially erode any capacity of that program to deliver the services that the American people need? Or do you study the organization? Do you kick the tires? Do you investigate and analyze where the issues are that can be addressed by a comprehensive plan that would include getting rid of any waste? It would include getting rid, obviously, of any fraud and abuse.

But what DOGE is doing is not that. It doesn't have a plan. What it has is a decision to fire people. So, essentially, DOGE is saying that the higher the body count of people who are fired, then the more the savings will be. Well, there is truth in that. If you just fire people and they are not on the payroll, you are going to save taxpayer money. But does that mean that you are getting waste, fraud, and abuse out of the system, or are you just wrecking the program? It clearly is going to be the latter.

You are just wrecking the program because you didn't even take the time to examine what is going on and how best to do it. Think about it. In the National Institutes of Health, there are investigators, there are scientists. These are people who are working on research that is important to your State and mine about diseases, about cures, about vaccines, about pandemics, things that—you know, American people are entitled to have some confidence and security that we have the best minds addressing health issues and focusing on cures to diseases that all of us can be subject to or the people we love, that they will be doing that job.

But these people are now just fired. They are gone. That means—just think about it. An NIH scientist, that is somebody who probably has a Ph.D., went to one of our State institutions. It might have been a land-grant college in North Carolina or a land-grant college in Vermont. And there is probably an enormous amount of talent in that person who was able to achieve a Ph.D. in scientific research. And there is probably a good deal of public investment in the career of that person with the return being that person is going to be doing research on trying to cure diseases. And that person may well have gotten some Federal grants, including college assistance or Ph.D. investigatory assistance.

That could be hundreds of thousands of dollars the taxpayers really invested

in supporting a person who has become a scientist, helping us on very important research that is really good for the American people.

Boom. They go to work, or they are at home. They get an email, and they say: Don't show up for work; you are fired.

There is a certain cruelty in a lot of these notices because it also has an assertion that your performance has been subpar. Of course, we find out there has been no performance review; and, in many cases, these people who were fired supposedly because of subpar performance, in fact, did just have a performance review that said you are doing a fantastic job.

Or think about Food and Drug Administration. Their job is to review, among other things, medications that can provide life-enhancing, lifesaving, life-extending, pain-relieving medications that Americans are going to need and can benefit by. The sooner that work of investigation gets done, the sooner that the approval decisions can be made, the sooner cures get to market and to the folks in this country.

Boom. They are fired.

Again, these people, some of whom do have Ph.D.s, as I mentioned, but others of whom have been at the FDA for 15 or 20 years and have that institutional knowledge of how it works—these people are getting fired independent of any performance review, independent of any assessment of where do we need more people or where do we need fewer people or what are some of the functions that no longer need to be done versus some functions where we actually may need to enhance the staff to get a better job for the American people.

What is so bogus about DOGE is that it is not about waste, fraud, and abuse. It really is not because there would have to be an investigation, a plan, people looking at how the functions are being performed. It is simply a mechanism to justify firing people and lowering the head count.

And as I mentioned, you know what? That will "save money," but it will destroy the capacity of these organizations that all of us agree are doing incredibly important work. It is going to destroy their ability to do it. It is just mangling the services in the area of Health and Human Services that are so essential to the well-being of the people in this country.

By the way, this has a real economic impact; and it is the economic impact, first and foremost, among those individuals who lost their jobs. But it is a real economic impact because we are eroding the infrastructure of science, of inquiry, and of investigation for better health cures. You don't destroy that and put it back together again overnight. That is what is so wrong-headed about the DOGE approach to things—body count versus better service, better performance, more sustainability.

Mr. President, you couldn't have a worse approach if your goal is more ef-

ficiency, better service, and better outcomes.

The other question that is going to be recurring for the American people is the likelihood—the inevitability, actually—of massive reductions in aid for Medicaid. Under the version of the House budget reconciliation act, they have to come up with trillions of dollars in savings. The only place you are going to get that is by cutting Medicaid.

We have a contradiction here because the President says he loves Medicaid, but he also says he loves the House bill. And the House bill does not love Medicaid. What the House bill does is it attacks Medicaid.

In Vermont, we have 20 percent or so, a little more, of our folks who depend on Medicaid for healthcare. It is kids from low-income families; it is seniors. Two out of three of our nursing home beds are paid for by Medicaid. You are going to have families where the kids are really trying to help their parents. Their parents need a nursing home, and they are going to get kicked out, literally. That is what happens.

Finally, what we know is, why is this happening? Why are these firings on a mass level being made when there has been no study and no plan in place to indicate that action will improve services or, in the long run, save money for the American people? It is being done because there is a goal to have a tax cut. That is a fair-and-square debate. What should our tax rate be; should we have a tax cut; if we have a tax cut, how do you allocate; how much goes to corporations; how much goes to billionaires; how much goes to everyday people?

But to have that debate without acknowledging that the way you are going to pay for it is by taking away healthcare for everyday Americans, that is not on the level. That is what is happening here, is that there is an agenda: Get that tax cut.

I happen to profoundly disagree with the tax cut for major multinational corporations, and I profoundly disagree with lowering taxes for billionaires—totally disagree with that. But when it is the situation that we are going to pay for it by taking away nursing home beds from Vermonters, from folks in the Carolinas, that is really appalling. We should not do it.

I am here with my colleagues to defend our commitment to good scientific research, to good cancer research, to good healthcare access for poor kids and seniors, and to sound the alert that that is what is at stake despite what the President may say about his "love" for Medicare. What he clearly has as his major agenda item is that tax cut.

I will acknowledge we can have a debate fair and square about that tax cut. But I think it is incumbent on all of us to acknowledge that the path to the President getting his tax cut marches right through access to healthcare in an attack on Medicaid.

I yield the floor.

The PRESIDING OFFICER. The Senator from Maryland.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Ms. ALSOBROOKS. Mr. President, I would like to use my time to highlight the attacks currently being thrown at our Federal workers and the unconscionable firings that are taking place.

We have heard baseless and callous criticisms of our Federal workers from this administration for weeks now. They are wrong, and much of what they are built on is a lie. And they are dehumanizing.

This is, in fact, a witch hunt. Our civil servants are among the best of what our Nation has to offer. They serve with no political motivation. Many have served for years under Democratic administrations and Republican administrations. They have one dedication: to their fellow Americans. It is a patriotic calling that they have all answered. They are not faceless villains. They are real people with real stories.

People like a woman I spoke with who has served at the Department of Health and Human Services for over 35 years, she has been put on leave as a part of the President's Executive orders. For her and people like her, to be caught up in these partisan attacks is infuriating.

The administration claims to be doing this in the name of efficiency. There is nothing efficient about gaining unauthorized access to private data and then blindly firing 5,200 employees across multiple Agencies. There is nothing competent about cutting the workforce without any thought about how it would impact operations.

This is not efficient. This is senseless, and this is heartless.

NIH is based in my State of Maryland, and many of the workers there are among the 150,000 civil servants who call Maryland home. Each one of them has made a commitment to public service. Each one of them is a civil servant that I am proud to represent. These abrupt and improper firings have shaken up the lives of thousands of dedicated workers who do not deserve this treatment. And what makes this even worse is that attacking our Federal workers doesn't just hurt them; it hurts all Americans, the people who rely on government programs to keep them healthy and safe.

These aren't hypothetical concerns. These firings will have real-world consequences. Eliminating staff at NIH will delay the development and approval of lifesaving treatments. Cancer patients will have to wait longer for promising new treatments as clinical trials still stall due to staffing shortages. This will slowly eliminate research and medical intervention and weaken our standing in global biomedical science.

Cuts to an already understaffed CMS workforce will hurt patient care. We

will see disruptions in medically necessary care and delays in payments to hospitals and other healthcare providers. Firing staff at HHS will cripple our ability to quickly identify and respond to public health threats. And right now, we are experiencing the worst flu season in over 15 years, resulting in school closures in at least 10 States. We are monitoring an outbreak of Ebola in Uganda. We are keeping track of the growing threat of avian influenza.

Without a strong workforce, we will not be able to react effectively. It is impossible to forget the significant role that NIH plays in developing and deploying vaccines and treatments. We are just beyond the clutches of the last major public health crisis. And without a strong workforce, we will not be prepared to face the next pandemic.

In the clearest terms possible, these cuts aren't about efficiency. To the American people, it quite literally could be the difference between life and death. They are as direct a contradiction as you can have of the priorities this administration claimed to set when they took control—to ease burdens on families. Instead, these firings could add enormous strain to a nation that is already in need of relief. They are irresponsible, they are inefficient, and they are undeserved.

What our civil servants deserve is a recognition of the work they do every day to make us stronger. What the American people deserve is for us to keep our obligation to ensure their health and their safety. I will continue to defend them and apply pressure to this administration until it happens.

I yield the floor.

The PRESIDING OFFICER. The Senator from Wisconsin.

NATIONAL INSTITUTES OF HEALTH

Ms. BALDWIN. Mr. President, I rise today to sound the alarm about what is happening to our Nation's ability to advance lifesaving medical research in the first month of the Trump administration.

As many of you know, I am a proud graduate of the University of Wisconsin-Madison Law School. In many ways, I grew up at the university, where both of my grandparents, who raised me, worked. My grandmother ran the costume lab at the theater department, and my grandfather was a scientist. He was a biochemist who spent four decades unlocking the key to how our metabolism works—in large part thanks to funding from the National Institutes of Health. My grandfather and his colleagues pioneered breakthroughs that impacted biochemistry around the world, leading to all kinds of developments to keep our bodies healthy, from nutrition and diet to advanced drugs, to, really, so much more.

I share my grandfather's story because it demonstrates why the NIH is

so essential. As the world's premier biomedical research institution, the NIH invests in our health, our national security, our economy, and our future. These investments influence our Nation's competitive edge, patients' treatment options, and, simply put, American lives for generations to come.

Research supported by the NIH has helped us find breakthroughs for treating diabetes, Alzheimer's disease, and substance use disorders. It is supporting clinical trials right now for patients battling terminal diagnoses for cancer. In fiscal year 2023, the NIH generated almost \$93 billion in economic activity—nearly twice the Agency's budget.

The engine behind all of it is, of course, researchers and scientists. They are dedicated scientists like my grandfather who right now are worried that their life's work—the work of keeping our loved ones healthy and saving lives—is in danger, all because Elon Musk and President Trump are firing nearly 1,200 critical staff across NIH Institutes and Centers, halting lifesaving research in its tracks, and indiscriminately and illegally freezing funding from going out the door to academic and research institutions across the country.

Across the Department of Health and Human Services, Trump and Elon Musk have fired more than 5,000 public servants. We are talking about scientists, doctors, researchers, and so many others who are doing this critical work to keep us healthy.

Musk and Trump are going so much deeper than firing the HHS workforce, which is damaging enough to research programs and puts Americans' lives at risk; they are throwing sand in the gears of the NIH—their basic grant-making operations—to prevent scientists from getting the resources they need to conduct lifesaving biomedical research in the first place.

For instance, the President has unilaterally fired more than 130 employees at the National Cancer Institute—many of them scientists. Across the NIH, Trump and Musk have fired 160 program officers, grant management specialists, and other key administrators whose job it is to get grant funding out the door to universities and other research institutions across the country.

Since President Trump took office, his administration has canceled more than 70 NIH study sections and advisory council meetings that are the final step in grant approval. This means that more than \$1.5 billion in funding has been withheld so far—illegally and in blatant defiance of court orders—by this administration. The impact is already having ripple effects across the research community.