

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

LEGISLATIVE SESSION

Mr. REID. I now move to proceed to legislative session.

The PRESIDING OFFICER. The question is on agreeing to the motion. The motion was agreed to.

EXECUTIVE SESSION

NOMINATION OF LAURIE J. MICHELSON TO BE UNITED STATES DISTRICT JUDGE FOR THE EASTERN DISTRICT OF MICHIGAN

Mr. REID. I now move to proceed to executive session to consider Calendar No. 579.

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 bill clerk read the nomination of Laurie J. Michelson, of Michigan, to be United States District Judge for the Eastern District of Michigan.

CLOTURE MOTION

Mr. REID. There is a cloture motion at the desk I wish to have reported.

The PRESIDING OFFICER. The cloture motion having been presented under rule XXII, the Chair directs the clerk to report the motion.

The bill clerk read as follows:

CLOTURE MOTION

We, the undersigned Senators, in accordance with the provisions of rule XXII of the Standing Rules of the Senate, hereby move to bring to a close debate on the nomination of Laurie J. Michelson, of Michigan, to be United States District Judge for the Eastern District of Michigan.

Harry Reid, Patrick J. Leahy, Carl Levin, Richard J. Durbin, Barbara Boxer, Debbie Stabenow, Charles E. Schumer, Patty Murray, Jeanne Shaheen, Amy Klobuchar, Tom Udall, Sheldon Whitehouse, Mazie Hirono, Joe Donnelly, Jack Reed, Brian Schatz, Tom Harkin.

Mr. REID. I ask unanimous consent that the mandatory quorum under rule XXII be waived.

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

LEGISLATIVE SESSION

Mr. REID. I now move to proceed to legislative session.

The PRESIDING OFFICER. The question is on agreeing to the motion. The motion was agreed to.

EXECUTIVE SESSION

LINDA VIVIANNE PARKER TO BE UNITED STATES DISTRICT JUDGE FOR THE EASTERN DISTRICT OF MICHIGAN

Mr. REID. I move to proceed to executive session to consider Calendar No. 580.

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 bill clerk read the nomination of Linda Vivienne Parker, of Michigan, to be United States District Judge for the Eastern District of Michigan.

CLOTURE MOTION

Mr. REID. 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 report the motion.

The bill clerk read as follows:

CLOTURE MOTION

We, the undersigned Senators, in accordance with the provisions of rule XXII of the Standing Rules of the Senate, hereby move to bring to a close debate on the nomination of Linda Vivienne Parker, of Michigan, to be United States District Judge for the Eastern District of Michigan.

Harry Reid, Patrick J. Leahy, Carl Levin, Richard J. Durbin, Barbara Boxer, Debbie Stabenow, Charles E. Schumer, Patty Murray, Jeanne Shaheen, Amy Klobuchar, Tom Udall, Sheldon Whitehouse, Mazie K. Hirono, Joe Donnelly, Jack Reed, Brian Schatz, Tom Harkin.

Mr. REID. I ask unanimous consent that the mandatory quorum under rule XXII be waived.

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

LEGISLATIVE SESSION

Mr. REID. I now move to proceed to legislative session.

The PRESIDING OFFICER. The question is on agreeing to the motion. The motion was agreed to.

INTERNATIONAL WOMEN'S DAY

Mr. CARDIN. Mr. President, March 8 is International Women's Day—a day when we can celebrate the enormous advances women have made while pledging to continue to work for greater opportunity for all women.

Rooted in the long-term struggle for equality, International Women's Day has been observed since a time when American women were fighting for basic rights, such as voting or fair employment. Today, we see women breaking ground and becoming leaders in business, government, and the military—both here in the United States and overseas. While this is encouraging, many women around the world continue to face significant social and economic obstacles.

The official United Nations theme for this International Women's Day is "Equality for women is progress for all." I couldn't agree more; empowering women is one of the most critical tools in our toolbox to fight poverty and injustice.

According to some reports, women represent nearly 70 percent of the world's poor. In many regions of the

world, a woman's ability to earn a sustained income is severely limited by cultural norms and a lack of opportunity.

Economically empowering women is one of the most important tools we have to alleviate poverty. Women around the world participate in the political, social, and economic life of their communities and play a predominate role in providing and caring for their families. Research has shown that men only reinvest 30–40 percent of their income into their households, while women reinvest 90 percent—choosing to spend their money on food, clean water, education and health care. Greater economic opportunity and earning capacity also increases equality and mutual respect within households, reducing women's vulnerability to domestic abuse.

Until women around the world have improved access to economic, political, and social opportunities, many of the great challenges we face today, from pervasive global poverty to violent extremism, will go unresolved.

We must continue to promote women's leadership and integrate gender perspectives in our development and foreign assistance programs. Advancing gender equality and women's empowerment in this realm will not only lead to increased productivity and income for women but can have a positive impact for generations to come.

I urge all my colleagues to work together to call attention to the injustices women face around the world and to work to implement laws and policies that advance the cause of women both at home and abroad.

DEAMONTE DRIVER'S PASSING

Mr. CARDIN. Mr. President, today I rise to mark the seventh anniversary of Deamonte Driver's death.

Deamonte Driver was a 12-year-old child who lived in Prince George's County, MD, whose border sits only a few miles from the U.S. Capitol Building. He died 7 years ago at the Children's National Medical Center in Washington, DC, from a brain infection caused by an untreated tooth abscess.

The Driver family, like many other families across the country, lacked dental insurance. At one time, the Drivers were covered by the Medicaid Program, but they lost that coverage when they moved into a shelter and their paperwork fell through the cracks. When advocates for the family tried to help the Drivers locate a dentist to treat Deamonte's cavities and tooth pain, it took more than 20 calls to find a dentist who would see him.

Around mid-January in 2007, Deamonte began to complain of severe headaches. A subsequent evaluation at Children's Hospital led beyond the basic dental care that the family had anticipated to emergency brain surgery. Deamonte later experienced seizures, and a second operation was required. After additional treatment and

therapy, Deamonte appeared to be recovering, but medical intervention had come too late. By the end of his treatment, the total cost to our health care system exceeded one-quarter of a million dollars—more than 3,000 times the \$80 cost of a tooth extraction.

Deamonte Driver passed away on Sunday, February 25, 2007. This child's death was a national tragedy because it could have been prevented had he received timely and proper basic dental care. It was a tragedy because it happened right here in the United States, in a State that is one of the most affluent in the Nation. It happened in the State that is home to the first and one of the best dental schools in the Nation, the University of Maryland's dental school. It happened in Prince George's County, whose border is less than 6 miles from where we are standing in the U.S. Capitol.

I have spoken on the Senate floor about Deamonte Driver several times since his death, and in the intervening years, both in Maryland and nationally, we have made tremendous progress. When Deamonte's story was brought to light, I believe it was a wakeup call for our Nation. It brought home the statement of former Surgeon General C. Everett Koop: "There is no health without oral health."

Medical research reinforces Dr. Koop's words. Scientists have discovered the nexus between tooth plaque and heart disease, that chewing stimulates brain cell growth, and that gum disease can signal diabetes, liver ailments, and hormone imbalances. They have identified the vital connection between oral health research and advanced treatments like gene therapy, which can help patients with chronic renal failure. They have found that investing in basic dental care for children and adults can reduce health care expenditures down the road for costly medical interventions related to other diseases.

But for all their research findings, we also know that without insurance coverage and adequate access to providers, the needs of millions of children and adults will remain unmet, and the complications resulting from poor oral health will persist.

That is why the progress we have made over the past 7 years is so important to America's health. I have come to the floor today to talk about what has been achieved and how we can move forward as a nation to ensure even greater access to oral health care.

Since Deamonte's passing, the State of Maryland has emerged as a national leader in oral health—launching a \$1.2 million oral health literacy campaign, raising Medicaid reimbursement rates for dentists in the program, and providing allied health professionals and hygienists the opportunity to practice outside clinics. The Deamonte Driver Dental Project Van, which was dedicated in front of the U.S. Capitol in May 2010, provides care in underserved neighborhoods in Prince George's

County, thanks to efforts conceived and launched by members of the Robert T. Freeman Dental Society. An arm of the National Dental Association, the society is named for Dr. Robert Tanner Freeman, who in 1869 became the first Black graduate of the Harvard School of Dental Medicine.

It was 2 years after Deamonte's death, in 2009, that Congress reauthorized the Children's Health Insurance Program. Some of my colleagues recalled the difficulty that Deamonte's mother had finding him care. Hers was not an isolated instance. For varied reasons, it is difficult for Medicaid and CHIP enrollees to find dental providers, and working parents whose children qualify for those programs are likely to be employed at jobs where they can't afford to spend 2 hours a day on the phone searching for a provider. So part of the CHIP Reauthorization Act requires HHS to include on its Insure Kids Now Web site a list of participating dentists and benefit information for all 50 States and the District of Columbia.

Also in 2009, Congress passed the Edward M. Kennedy Serve America Act, which created the Healthy Futures Corps—a program that provides grants to States and nonprofit organizations so they can fund national service in low-income communities. The law's goal was to put into action key tools that can help close the gaps in health status—prevention and health promotion. With the help of Senator MIKULSKI, we added language to that law specifying oral health as an area of focus. Now, the Healthy Futures Corps is recruiting young people to work in the dental profession, where severe shortages of providers exist in many urban and rural communities. The law is funding the work of individuals who can help parents find oral health care for themselves and their children. It is making a difference in the lives of the Healthy Futures Corps members who work in underserved communities and in the lives and health of those who can now get care.

Then in 2010, Congress passed the Affordable Care Act, which guarantees pediatric dental coverage as part of each State's Essential Benefits health care package. The ACA also established an oral health care prevention education campaign at the Centers for Disease Control and Prevention, which is targeted toward key populations, including children and pregnant women, and it created demonstration programs to encourage innovation in oral health delivery. The law also significantly expanded workforce training programs for oral health professionals.

Moving forward, the States have a critical role to play in ensuring that the ACA benefit is designed to incentivize prevention, recognize that some children have greater risk of dental disease than others, and deliver care based on their level of risk.

Among the most cost-effective ways to improve children's dental health are

investments in prevention. Dental sealants, clear plastic coatings applied to the chewing surface of molars, have been proven to prevent 60 percent of tooth decay at one-third the cost of filling a cavity. So it is essential that prevention be part of every State's benefit package.

Further, in 2010, the U.S. Department of Health and Human Services launched its Oral Health Initiative, based on a bill I introduced with Senator SUSAN COLLINS. The initiative establishes a coordinated multiagency effort to improve access to care across the Nation.

One of the most effective organizations in tracking access to care is the Pew Children's Dental Campaign, which produces report cards that grade the States on eight policies that are evidence-based solutions to the problem of tooth decay. In 2011, Maryland received an "A" grade in both reports for meeting or exceeding these benchmarks, which include dental sealant programs, community water fluoridation, Medicaid reimbursement and enrollment, and collection of data on children's dental health. Maryland's grade is significant because in the late 1990s, my State had one of the worst records in the Nation with respect to oral health care for its underserved population. Now it is one of the top-ranked States for oral health care.

Our State has just received even more good news. The number of children in Maryland with untreated tooth decay dropped 41 percent from 2001 to 2011, and the overall oral health status of Maryland children has dramatically improved, according to a 2014 report conducted by the University of Maryland's School of Dentistry. The State assessment looked at 1,723 students in 52 schools from the five regions of the State. About 33 percent of the children had at least one dental sealant on their permanent first molars, and this milestone exceeded Federal goals by 5 percent. About 14 percent of students had untreated dental caries, a drop from 23 percent in 2000, and the State's achievement exceeded Federal goals by 12 percent. According to the assessment, 75 percent of the children surveyed had a regular dentist.

Another key player in our State's effort is the Baltimore Oral Health Impact Project, which provides care to children in Baltimore's public schools. Since February 2010, its providers have seen more than 3,500 children and treated more than 1,500 for dental disease. The program places a high value on delivering comprehensive and compassionate oral health care.

This organization has also launched the Baltimore Oral Health Academy, offering scholarships to students who choose to pursue careers as a clinical dental professional including dental assistants and hygienists, and who agree to serve in a public health setting.

Nationally, HRSA's National Health Service Corps addresses the nationwide shortage of primary care oral health

providers in dental health professional shortage areas—HPSA—by offering incentives in the form of scholarships and loan repayments to primary care dentists and registered dental hygienists to practice in underserved communities. The Corps has awarded more than 1,100 new loan repayment awards to dentists and nearly 300 new loan repayment awards to registered dental hygienists. But this is not nearly enough to erase the shortages. The NHSC has also implemented a part-time service program for providers who did not wish to make a full-time commitment, and I am hopeful that this new option will increase participation in the coming years.

Our Nation has made significant progress in improving children's dental health in the 7 years since Deamonte died, but there is still much work to be done. The access problem in some communities has become so severe that many people are forced to seek treatment for tooth pain in the Nation's emergency rooms, increasing the overall cost of care and receiving uncoordinated care in the least cost-efficient setting. In fact, more people seek treatment in emergency rooms for tooth pain than they do for asthma.

I will continue to work to increase funding for grants to States and expand training opportunities for dentists. We do not have enough professionals who are trained and available to treat children and adults with dental problems, and it is our responsibility to fix that. We must improve public reimbursement to dental providers in offices and clinics so that no one who needs treatment will be turned away.

Soon, Congress will turn again to the Reauthorization of the CHIP program, and I will be once again fighting for the strongest possible language we can get to promote children's oral health. For my colleagues who may not be familiar with CHIP's track record on oral health, I would like to leave you with three facts:

First, tooth decay is the single most common chronic disease of childhood, and it is five times more common than asthma. The complications of dental disease, which we now know can be fatal, are completely and easily preventable if we give children the care they need. Second, because of Congress's passage of the 2009 Children's Health Insurance Program Reauthorization Act, in 2013, more than 8 million American children had comprehensive dental coverage through CHIP. Third, CHIP has kept comprehensive coverage affordable. Under CHIP, families cannot pay more than 5 percent of their annual income in out-of-pocket costs for their children's medical and dental care.

What we have been able to achieve for children is due to support in Congress and also to the efforts of the many nonprofit organizations, universities, and providers who are also working across the Nation to make sure

that we will never forget Deamonte and never forget our responsibility to improving oral health care for America's children.

On this sad anniversary, in Maryland and throughout the Nation there are signs of hope for the future of oral health care. I thank my colleagues for the role they have played in this process and look forward to working with them in the months to come to strengthen oral health care access for our Nation's children.

TRIBUTE TO ANTONIA FERRIER

Mr. HATCH. Mr. President, I wish to pay tribute to Antonia Ferrier on my staff. After 4 years of trying to keep this tough old bird in line, she'll be leaving my office in the coming days. She will most certainly be missed.

Antonia first came to Capitol Hill to work for the former distinguished majority leader and my good friend, Bill Frist from Tennessee. After that, she went on to serve on the staff of another one of our former colleagues, Olympia Snowe. Now, Maine is pretty different from Tennessee, but I'm sure it felt like a bit of a homecoming for Antonia, who is from Massachusetts. After more than 3 years with Senator Snowe, Antonia made her way across the Capitol Rotunda to work for Senator ROY BLUNT during his time as the House Republican Whip.

For a Senate purist like Antonia, one House Member probably felt like enough, but she then went on to serve JOHN BOEHNER during his time as the House Republican leader. Finally, we were able to woo her back on this side of the Capitol to come be a member of our team.

As I said, Antonia is a Senate purist. She understands the Senate's role in our system of government, she appreciates the personalities and complexities of those that are honored to serve here, and she knows how much the work we do here impacts the lives of Americans from Tennessee to Maine, and Ohio to Utah. And, given her experience, she understands the House very much as well.

I'll deeply miss having Antonia around, not only for her sage advice and counsel, but also for her wit and sense of humor, and her willingness for straight-talk. I think she would say that the hardest part of her job is protecting me from myself. That's a tough job for anyone. And, I have to say that she's been up to the task, even during those times when I've made it particularly difficult.

I want to thank Antonia for her service to me, to Utah, and to the Senate over these last several years. She has been an amazing asset, and I wish her all the best in her future endeavors.

REMEMBERING JOHN S. WILLIAMS

Mr. HATCH. Mr. President. I am grateful for the opportunity to pay tribute to a truly extraordinary public

servant, father, grandfather, and neighbor—Mr. John S. Williams. Sadly, John passed away this week leaving behind a legacy of dedication and service.

John worked for an unprecedented 27½ years as the executive director of the Five County Association of Governments, AOG; only the third person to serve in that position since the association's inception. This association was formed to address the needs and challenges facing the southwest region of Utah—Beaver, Garfield, Iron, Kane, and Washington Counties. As the director, John set a tone of hard work, commitment, and a belief in the greatness of southwest Utah. He was comfortable not only in the director's chair—but rolling up his sleeves and getting the hard work done.

He was a key figure in promoting economic development in southwest Utah, as well as the whole State. He helped formulate policy and address issues facing an increasingly expanding region including: infrastructure, public lands issues, population growth, and quality of life. The Five County AOG has a reputation throughout Utah as an association that makes a difference and helps forge the way, largely in part because of the strength of John's leadership for almost three decades.

While working with John on many occasions throughout my Senate service I have always found him as someone who deeply cared about those he served, and had ideas and solutions to address the challenges facing a very important region of Utah. The example he set will be felt for generations to come; and the five counties he served are better prepared for the future challenges and triumphs they will face in the coming years.

Elaine and I convey our deepest sympathies to John's wife Jamie, his five children, and many grandchildren. May our Heavenly Father bless them with peace and comfort at this time. The contributions and impact John made on his family, his community, and our State will be felt and appreciated for generations to come. Utah is a better State because of the service John rendered throughout his life and his strong advocacy of southwest Utah.

FREEDOM FOR BOB LEVINSON

Mr. NELSON. Mr. President, I rise today on the anniversary of Bob Levinson's disappearance from Kish Island off the coast of Iran.

March 9 will mark 7 excruciating years of waiting and wondering for Bob's family who have desperately sought assistance from the Governments of Iran and the United States in finding him and bringing him home.

Bob, a retired FBI agent, is now one of the longest held Americans in our Nation's history. Bob's safe return is his family's highest priority—as it must remain for the U.S. Government as well.

At the beginning of this year, this body unanimously passed a resolution