

Recently, it has been pointed out, as we receive new information about the status and condition of that ruptured well, the incident command had to weigh the risk and make difficult choices with a lot of incomplete information. Well, he exhibited strong leadership then, and I believe he will give that leadership to an agency which needs that strong leadership now.

The next nominee we will consider is Daniel Elliott to be a member of the Surface Transportation Board. That is an important agency which helps ensure we have a strong and efficient rail network to move goods throughout the United States.

We know how vital the railroad industry is to our economy and getting goods to market. We have to do that, and we can't do it with just trucks. We need the bulk of the materials to be carried on the rails. Decisions made by the Surface Transportation Board have long-lasting impacts on our Nation's economic competitiveness, and that is why last week the Senate passed the Surface Transportation Board Reauthorization Act of 2015—to make the agency more efficient and effective.

We need individuals who are qualified to serve, and Daniel Elliott is such an individual. Earlier this year, he was nominated to be reappointed as a member of the Board. He previously served as Chairman. He also has had a great deal of experience as an attorney, including close to two decades litigating in the transportation sector. I ask the Senate to join in and support Mr. Elliott's nomination.

Mr. President, I yield the floor.

The PRESIDING OFFICER. The Senator from Oklahoma.

Mr. LANKFORD. Mr. President, I ask unanimous consent to address the Senate as in morning business for 10 minutes.

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

KING V. BURWELL DECISION

Mr. LANKFORD. Mr. President, in the next couple of days, the Supreme Court is going to rule on a case that will have a long-lasting impact not only on just what health care is going on in this country but a long-lasting impact on how the law is to be interpreted. This is a law called the Patient Protection and Affordable Care Act. It was hurried through Congress before anyone had time to read it, and it contained multiple mistakes and contradictions.

Already this administration has unilaterally changed this law over 30 times to try to make it work, including completely rewriting a section about who gets the subsidies and who lives underneath the mandates. The law says the States that set up an exchange as a State exchange are under the subsidies and also have those mandates, but the administration claims that, no, it was intended for everyone.

Within days, the Supreme Court will release their opinion on this matter in a case called *King v. Burwell* and basi-

cally answer this one question: Does the law mean what the law says or does the law mean what the administration interprets it to mean?

This is not a political problem; this is a health care problem for millions of people. These days, the discussion seems to circle around on who is to blame. Well, people and families were hurt in the ObamaCare chaos because of the way this law was written. They are not worried about blame; they are worried about the issues facing their family in the days ahead. I have the obligation to do whatever I can to protect the people of my State from the harmful effects of this law, and there are many.

The people in my State distinctly heard people say 5 years ago: If you like your health care, you can keep it, except for the people who were forced off the State-run exchange that already existed in Oklahoma and were pushed out—ObamaCare, that is 5 years old, came after *Insure Oklahoma*, which is 10 years old—except for the people who have higher deductibles in my State, except for the people who now have higher premiums in my State. In Oklahoma this year, the requested rate increase for health care is between 11 and 45 percent, depending on the plan and the county you live in. This year's rate increase is between 11 and 45 percent.

In addition, physician-owned hospitals are trapped in time, not allowed to grow larger than what they were 5 years ago. Many people in my State like the physician-owned hospitals, and they want to see it succeed, instead of being slowly bled to death.

People struggle to find a job in places in my State because of this 40-hour requirement that hangs over them. They now have to find two jobs, each having about 28 hours, so they can keep up the amount of pay. Those individuals were hurt in this process.

Higher premium costs in the plans will soon come to those in unions because they have too good of health care insurance. In the short days ahead, union members who have premium health care policies will now get a penalty for having insurance that is too good for this administration.

By next year, the Independent Payment Advisory Board kicks off its work. Its sole responsibility is to find areas to be able to save money by cutting options for patients.

This is not a mess that can be fixed with one sentence—unless that one sentence says “the bill is repealed.”

So how do we solve this in the days ahead? Let me lay out a couple of ideas before the Senate because very soon we are going to be confronted with this when the Supreme Court actually responds.

First, do the basic things: Do no harm and stop the existing harm. We need to transition out of the subsidies and mandates of ObamaCare for millions of people who will lose their subsidy when the Court rules in favor of

the American people and the law of the United States—the clear text reading of the law.

Those individuals who were forced into ObamaCare are not the problem. We are not angry at those individuals. They are trapped in a mess that was made around them that they were forced into.

I will never forget a conversation I had with a Democrat in my State who was participating in a plan called *Insure Oklahoma*—who liked their insurance plan. It was a subsidized plan from our State. They pulled me aside 5 years ago and said: Is there any way I can keep the State-based plan I have now? And all I could do is look at him and say, no, you can't, actually, and that is not my decision. The Affordable Care Act which was passed and the Center for Medicare and Medicaid Services and HHS forced the people in my State out of a State-based solution for health care and into the larger national solution. Many Oklahomans lost their health care coverage and were forced out of it. It was already a subsidized system, and now they were taken from one plan and pushed into another. Let's do no harm, and let's try to help those individuals to be able to find their way back to a plan they like and help in that transition.

The second thing is pretty straightforward: States should have the freedom to choose any path to help their citizens. States should not have to check in with the Federal Government to ask permission to take care of their neighbors and citizens. How ridiculous is that; that a State leadership would have to go to the Federal Government to say we want to develop a plan to be able to help our own citizens, and the Federal Government says, no, they have to check in with us instead.

This is basically a repeal option for all 50 States. For those States that like it, we would say, if you like your ObamaCare, you can keep it, and for all the States that don't, they have their own way out to be able to take care of their own citizens.

The tax money that is being supplemented for those came from those States. Why shouldn't it be returned to those States and give the States the ability to be able to speak to that issue for their own citizens. We have to stop this mentality that only the people of Washington, DC, love the individuals in each State and want to care for them and be able to manage what is happening in that State. That State leadership deeply cares about their own citizens. Let's let them step up and lead.

Third is probably the clearest of all of them: People should have the freedom to choose any health care plan they want. What a radical idea, to actually hand people freedom, to hand people opportunities. Free of the mandates and the penalties, patients should be able to pick their own doctor and their own plan for their own family.

I have to say, it is ironic. I hear people call this law either ObamaCare or the Affordable Care Act. I am fascinated with that because the law's name is the "Patient Protection and Affordable Care Act." Over the last 5 years, the words "patient protection" seem to have disappeared from every part of everyone's vernacular in this. I would only have to say, I agree.

When did we stop saying to the patient: You have no ability to make your own choices. I will tell you when. When ObamaCare passed and everything became about affordable rather than about patient. We have seen the consequences of this.

In the days ahead, the Supreme Court will rule on this, and I believe strongly they are going to rule for the plain text of the law, not just about ObamaCare but because they have to make the decision as the Supreme Court: Does the law mean what the law says or can any administration on any law in the future reinterpret it based on their preferences?

If there is one area that would be a great path for us to follow, it is in the days ahead that we get back to the government is about the law, and we follow the law because we are a nation of laws, not just a nation of leaders. The law is to be king in our Nation.

So let's interpret it the way it is written and let's give people back the freedom they want and need. Let's put the patient back in health care. That is the next step I think we should take in this U.S. Senate.

Mr. President, I yield the floor.

The PRESIDING OFFICER. The Senator from Kentucky.

Mr. PAUL. Mr. President, I ask unanimous consent that all time be yielded back.

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

All time is yielded back.

VOTE ON NEFFENGER NOMINATION

The question occurs on the Neffenger nomination.

Mr. PAUL. 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 question is, Will the Senate advise and consent to the nomination of Peter V. Neffenger, of Ohio, to be an Assistant Secretary of Homeland Security?

The clerk will call the roll.

The legislative clerk called the roll.

The PRESIDING OFFICER (Mr. LANKFORD). Are there any other Senators in the Chamber desiring to vote?

Mr. CORNYN. The following Senators are necessarily absent: the Senator from Missouri (Mr. BLUNT), the Senator from Indiana (Mr. COATS), the Senator from Tennessee (Mr. CORKER), the Senator from Idaho (Mr. CRAPO), the Senator from Texas (Mr. CRUZ), the Senator from South Carolina (Mr. GRAHAM), the Senator from North Dakota (Mr. HOEVEN), the Senator from Illinois

(Mr. KIRK), the Senator from Utah (Mr. LEE), the Senator from Alaska (Ms. MURKOWSKI), the Senator from South Dakota (Mr. ROUNDS), the Senator from Florida (Mr. RUBIO), the Senator from South Carolina (Mr. SCOTT), the Senator from South Dakota (Mr. THUNE), and the Senator from Pennsylvania (Mr. TOOMEY).

Further, if present and voting, the Senator from North Dakota (Mr. HOEVEN) would have voted "yea."

Mr. DURBIN. I announce that the Senator from Minnesota (Mr. FRANKEN), the Senator from New Jersey (Mr. MENENDEZ), and the Senator from Montana (Mr. TESTER) are necessarily absent.

The result was announced—yeas 81, nays 1, as follows:

[Rollcall Vote No. 217 Ex.]

YEAS—81

Alexander	Feinstein	Murphy
Ayotte	Fischer	Murray
Baldwin	Flake	Nelson
Barrasso	Gardner	Paul
Bennet	Gillibrand	Perdue
Blumenthal	Grassley	Peters
Booker	Hatch	Portman
Boozman	Heinrich	Reed
Boxer	Heitkamp	Reid
Brown	Heller	Risch
Burr	Hirono	Roberts
Cantwell	Inhofe	Sanders
Capito	Isakson	Schatz
Cardin	Johnson	Schumer
Carper	Kaine	Sessions
Casey	King	Shaheen
Cassidy	Klobuchar	Shelby
Cochran	Lankford	Stabenow
Collins	Leahy	Sullivan
Coons	Manchin	Tillis
Cornyn	Markey	Udall
Cotton	McCain	Vitter
Daines	McCaskill	Warner
Donnelly	McConnell	Warren
Durbin	Merkley	Whitehouse
Enzi	Mikulski	Wicker
Ernst	Moran	Wyden

NAYS—1

Sasse

NOT VOTING—18

Blunt	Graham	Rounds
Coats	Hoeben	Rubio
Corker	Kirk	Scott
Crapo	Lee	Tester
Cruz	Menendez	Thune
Franken	Murkowski	Toomey

The nomination was confirmed.

VOTE ON ELLIOTT NOMINATION

The PRESIDING OFFICER. The question is, Will the Senate advise and consent to the nomination of Daniel R. Elliott III, of Ohio, to be a Member of the Surface Transportation Board for a term expiring December 31, 2018?

The nomination was confirmed.

VOTE EXPLANATION

• Mr. MENENDEZ. Mr. President, I was necessarily absent for rollcall vote No. 217 and the voice vote that followed. Had I been present, I would have voted as follows: rollcall vote No. 217, the confirmation of Peter V. Neffenger to be an Assistant Secretary of Homeland Security, I would have voted yea; on the voice vote, the confirmation of Daniel R. Elliott III to be a member of the Surface Transportation Board, I would have voted yea. •

The PRESIDING OFFICER. Under the previous order, the motions to reconsider are considered made and laid

upon the table, and the President will be immediately notified of the Senate's action.

LEGISLATIVE SESSION

The PRESIDING OFFICER. Under the previous order, the Senate will resume legislative session.

The Senator from Arizona.

MORNING BUSINESS

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

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

The Senator from Ohio.

KING V. BURWELL DECISION

Mr. BROWN. Mr. President, nearly 12 million Americans, including 500,000 Iowans—more than that, actually—now have access to affordable health coverage because of the Affordable Care Act, and many for the first time in their lives.

We know what the health care law has meant in Ohio and across the country. Patients can't be dropped from coverage or charged higher rates just because they got sick. Also, 97,000 young Ohioans have been able to stay on their parents' health insurance until their 26th birthday, giving them the chance to focus on careers, education, and future plans. Lifetime insurance caps are no longer bankrupting people with chronic conditions. Those with preexisting conditions, such as children with diabetes and asthma, will no longer be denied coverage or charged higher premiums.

But despite all of these successes, the Supreme Court of the United States is currently considering a case that can take affordable health care away from hundreds of thousands of Ohioans, tens of thousands in the State of Oklahoma, and millions of Americans.

In Ohio alone, 161,000 people are at risk of losing access to affordable health coverage in the King v. Burwell decision that the Court will soon hand down. These Ohioans receive an annual subsidy of about \$240 a month to help them purchase private insurance plans. That is an average of nearly \$3,000 per person per year. Hard-working families stand to lose even more.

Taking away those subsidies—as many of my Republican colleagues have pushed the Court to do—would amount to a massive tax increase on Ohioans already struggling to get by. These same Republican colleagues have not come up with a workable solution if the Court rules their way. They have pushed this case all the way to the Supreme Court only to leave 161,000 Ohioans and nearly 12 million Americans without access to affordable coverage.

We know what this new access to health insurance has meant for families in my State. Let me read from a couple of letters.