

make anthrax vaccines and antimicrobials available to emergency response providers, and for other purposes.

S. 1974

At the request of Ms. HEITKAMP, the name of the Senator from Ohio (Mr. PORTMAN) was added as a cosponsor of S. 1974, a bill to require the Bureau of Consumer Financial Protection to amend its regulations relating to qualified mortgages, and for other purposes.

S. 1996

At the request of Mr. WARNER, the name of the Senator from Virginia (Mr. KAINE) was added as a cosponsor of S. 1996, a bill to streamline the employer reporting process and strengthen the eligibility verification process for the premium assistance tax credit and cost-sharing subsidy.

S. 2015

At the request of Mr. ALEXANDER, the name of the Senator from Tennessee (Mr. CORKER) was added as a cosponsor of S. 2015, a bill to clarify the treatment of two or more employers as joint employers under the National Labor Relations Act.

S. 2034

At the request of Mr. TOOMEY, the name of the Senator from Oklahoma (Mr. LANKFORD) was added as a cosponsor of S. 2034, a bill to amend title 18, United States Code, to provide additional aggravating factors for the imposition of the death penalty based on the status of the victim.

S. 2067

At the request of Mr. WICKER, the names of the Senator from Mississippi (Mr. COCHRAN), the Senator from Pennsylvania (Mr. TOOMEY), the Senator from Louisiana (Mr. CASSIDY), the Senator from North Dakota (Mr. HOEVEN), the Senator from Minnesota (Ms. KLOBUCHAR) and the Senator from Idaho (Mr. RISCH) were added as cosponsors of S. 2067, a bill to establish EUREKA Prize Competitions to accelerate discovery and development of disease-modifying, preventive, or curative treatments for Alzheimer's disease and related dementia, to encourage efforts to enhance detection and diagnosis of such diseases, or to enhance the quality and efficiency of care of individuals with such diseases.

S. 2071

At the request of Mr. CRAPO, the name of the Senator from Washington (Ms. CANTWELL) was added as a cosponsor of S. 2071, a bill to amend title XVIII of the Social Security Act to modernize payments for ambulatory surgical centers under the Medicare program, and for other purposes.

S. 2075

At the request of Mr. BROWN, the name of the Senator from California (Mrs. BOXER) was added as a cosponsor of S. 2075, a bill to amend the Internal Revenue Code of 1986 to repeal the excise tax on high cost employer-sponsored health coverage and to express the sense of the Senate that the resulting revenue loss should be offset.

S. 2101

At the request of Mr. TESTER, his name was added as a cosponsor of S. 2101, a bill to amend title 54, United States Code, to extend the Land and Water Conservation Fund.

S.J. RES. 15

At the request of Mr. CARDIN, the name of the Senator from Hawaii (Mr. SCHATZ) was added as a cosponsor of S.J. Res. 15, a joint resolution removing the deadline for the ratification of the equal rights amendment.

S.J. RES. 16

At the request of Mr. MENENDEZ, the name of the Senator from Hawaii (Mr. SCHATZ) was added as a cosponsor of S.J. Res. 16, a joint resolution proposing an amendment to the Constitution of the United States relative to equal rights for men and women.

S. RES. 267

At the request of Ms. BALDWIN, the name of the Senator from South Dakota (Mr. ROUNDS) was added as a cosponsor of S. Res. 267, a resolution expressing support for the continuation of the Federal Perkins Loan program.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. REED (for himself and Mr. BLUNT):

S. 2107. A bill to amend the Public Health Service Act to help build a stronger health care workforce; to the Committee on Health, Education, Labor, and Pensions.

Mr. REED. Mr. President, I am pleased to be joined by Senator BLUNT in the reintroduction of the Building a Health Care Workforce for the Future Act.

According to the Association of American Medical Colleges, by 2025, there will be a shortage of up to 90,000 physicians. Approximately 1/3 of the shortage, up to 31,100 will be in primary care. Individuals and families living in underserved areas, urban and rural, will continue to be those most disadvantaged by this shortage.

Last year, we expanded our health care system to provide health insurance to millions more Americans. In fact, recent studies have shown that the uninsured rate has decreased to the lowest level since 1997 over the last 2 years. In Rhode Island, the uninsured rate decreased by half, down to 5 percent. As a result, millions of Americans are going to the doctor for preventive health care for the first time. In order for these efforts to be successful, we must expand our health care workforce to ensure that we have enough health care professionals to treat the newly insured.

The Building a Health Care Workforce for the Future Act would authorize programs that would grow the overall number of health care providers, as well as encourage providers to pursue careers in geographic and practice areas of highest need.

Building on the success of the National Health Service Corp, NHSC,

Scholarship and Loan Repayment Programs, and the State Loan Repayment Program, this legislation would establish a state scholarship program. Like the NHSC State Loan Repayment Program, States would be able to receive a dollar-for-dollar match to support individuals that commit to practicing in the State in which the scholarship was issued after completing their education and training. At least 50 percent of the funding would be required to support individuals committed to pursuing careers in primary care. The States would have the flexibility to use the remaining 50 percent to support scholarships to educate students in other documented health care professional shortages in the state that are approved by the Secretary of Health and Human Services.

The Building a Health Care Workforce for the Future Act would also authorize grants to medical schools to develop primary care mentors on faculty and in the community. According to the Association of American Medical Colleges, graduating medical students consistently state that role models are one of the most important factors affecting the career path they choose. Building a network of primary care mentors in the classroom and in a variety of practice settings will help guide more medical students into careers in primary care.

The legislation would couple these mentorship grants with an initiative to improve the education and training offered by medical schools in competencies most critical to primary care, including patient-centered medical homes, primary and behavioral health integration, and team-based care.

It would also direct the Institute of Medicine, IOM, to study and make recommendations about ways to limit the administrative burden on providers in documenting cognitive services delivered to patients. Primary care providers treat patients in need of these services almost exclusively, and as such, spend a significant percentage of their day documenting care. That is not the case for providers who perform procedures, like surgeries. This IOM study would help uncover ways to simplify documentation requirements, particularly for delivering cognitive services, in order to eliminate one of the potential factors that may discourage medical students from pursuing careers in primary care.

Providers across the spectrum of care recognize that this bipartisan legislation is part of the solution to addressing the looming health care workforce shortage and have lent their support, including: the Alliance for Specialty Medicine, the American Association of Child and Adolescent Psychiatry, the American Association of Colleges of Osteopathic Medicine, the Association of Academic Health Centers, and the Association of American Medical Colleges.

I look forward to working with these and other stakeholders as well as Senator BLUNT and our colleagues to pass the Building a Health Care Workforce for the Future Act in order to help ensure patients have access to the health care they need.

By Mrs. MURRAY (for herself, Mrs. GILLIBRAND, Mrs. MCCASKILL, Mrs. SHAHEEN, Ms. MIKULSKI, Ms. CANTWELL, Ms. BALDWIN, Ms. STABENOW, Ms. KLOBUCHAR, Mrs. FEINSTEIN, Ms. HIRONO, and Ms. WARREN):

S. 2110. A bill to amend the Employee Retirement Income Security Act of 1974 to provide for greater spousal protection under defined contribution plans, and for other purposes; to the Committee on Health, Education, Labor, and Pensions.

Mrs. MURRAY. Mr. President, I rise today to introduce the Women's Pension Protection Act of 2015.

Out in Washington State, I recently heard from a woman named Cathy. A few years ago, Cathy said she got a taste of what it is like to have serious doubts about her future in retirement. Her husband was unemployed. On one income, they were trying to pay the bills, pay for health insurance, and pay for college tuition for their younger son. Every month, Cathy said they had to dip further and further into their retirement savings. She said she would stay awake at night, worrying how they were going to make it all work.

When I hear stories like Cathy's, it reaffirms for me what we should be working on in Congress. We need to grow our economy from the middle out, not the top down. Our country should work for all families, not just the wealthiest few. That is especially true for seniors—who, after a lifetime of hard work, deserve to live healthy, full, and financially secure lives.

I believe a secure retirement is one of the surest hallmarks of a strong middle class. But seniors today are facing some daunting challenges, just like Cathy.

Many Americans simply don't have enough savings. They are relying on thin Social Security checks that barely last until the end of the month. Sometimes, they are forced to choose between paying for groceries or paying for a prescription.

Too often, it is women who struggle the most with financial hardship in retirement, more so than men. Why is this? Well, for one, women live longer than men. So, they are more likely to outlive their retirement savings.

But there are also some systemic challenges we need to address to make sure women are better able to have a secure retirement. During their working years, women earn less than men. Today, women make just 78 cents for every dollar a man makes. That is just patently unfair. Women are more likely than men to work low-wage jobs. In fact, women comprise two-thirds of all minimum-wage workers. It is plain and

simple math: Lower wages make it hard to support a family, let alone save enough for retirement. Women are also much more likely to work part-time, sometimes so they can take on caregiving responsibilities.

This earnings gap leads to a retirement gap later in life. Don't forget, workers in low wage and part-time jobs, often don't have access to a retirement savings plan at work. A new GAO report shows that workers in low-wage and part-time jobs are among the least likely to participate in a workplace retirement plan. It is mainly because these plans are not offered or because they are not eligible. Keep in mind this is particularly problematic for women, because they make up the majority of low-wage and part-time workers.

It is not that these workers don't want to save for their future. This same GAO report found that when given the opportunity, a majority of part-time workers and workers in low-wage jobs do participate in retirement plans. For a long time, people assumed that these workers would not take advantage of a workplace retirement account or that they couldn't afford to save. This report busts that myth. Instead, it is the lack of access to retirement plans that prevent many workers from saving.

But, as if all that wasn't enough, 401k plans today lack basic consumer protections. I have heard from advocates who work with women whose husbands cashed out their 401k during a separation or right before a divorce. Right now, there is nothing in the law that prevents that from happening. That is just not right.

Without consumer protections, both husbands and wives are at risk of having the rug pulled out from under them because their spouse made a financial decision without their knowledge.

These challenges—from inequality in the workplace to gaps in consumer protections—won't just go away. In fact, they will only get worse until we resolve to do something about it for seniors today, for those who want to retire in the next few years, and for future generations.

Thankfully, we can do something about it. We need to address the inequalities that women face during their working years. It is time to finally ensure women get equal pay for equal work. The Paycheck Fairness Act would tackle pay discrimination head-on. I hope we can all agree that in the 21st century, workers should be paid fairly for the work they do, regardless of their gender.

We should raise the minimum wage to \$12 by 2020. It will put more money in workers' pockets so they can spend it in their local communities and put more away for retirement. My bill will provide a strong floor—a Federal bare minimum—that workers and cities can build off of and go even higher where it makes sense—like in Seattle in my home State of Washington.

It is time to make more progress on paid sick leave, so women aren't penalized for taking care of their families. I have introduced a bill called the Healthy Families Act to allow workers to earn paid sick days. Those solutions to empower women in today's workplace will pay off for their golden years to come.

Today, I am proud to introduce a bill with a number of my Democratic women colleagues. It is called the Women's Pension Protection Act, and it would take three major steps to protect women's retirement security.

First, my bill would expand spousal protections to cover defined contribution plans, like 401(k)s. These protections already exist for defined benefit plans, and it is just common sense to extend these protections to defined contribution plans as well. It would help improve access to retirement savings plans for part-time workers. This bill would improve women's financial literacy. With fewer traditional pensions, people will need to make some difficult financial decisions in retirement. So, increasing financial literacy will be very important in the years ahead.

Ensuring women are able to access a secure retirement is part of my ongoing work to help our economy grow in the way we know is strongest: from the middle out, not the top down.

Eighty years ago, Franklin D. Roosevelt signed the Social Security Act into law. At the time, he called it "a cornerstone in a structure, which is being built, but it is, by no means, complete." We added on to that original cornerstone with Medicare, Medicaid, and the Older Americans Act. Those programs laid the foundation for seniors to have solid footing in America's middle class.

Now, it is time to build on that foundation. Because like FDR foresaw 80 years ago, the structure of retirement security is still incomplete. We need to start the next phase to address the pressing challenges that seniors face today. I am going to be fighting to make sure more workers, more seniors and more families have access to a healthy, independent, and financially secure retirement. I am going to keep fighting to build an ever-stronger foundation for families in my home State of Washington State, and across the Nation, for generations to come.

SUBMITTED RESOLUTIONS

SENATE RESOLUTION 272—CONGRATULATING THE UNIVERSITY OF KANSAS FOR 150 YEARS OF OUTSTANDING SERVICE TO THE STATE OF KANSAS, THE UNITED STATES, AND THE WORLD

Mr. MORAN (for himself and Mr. ROBERTS) submitted the following resolution; which was referred to the Committee on the Judiciary: