

Madam President, I yield back the remainder of my time.

The PRESIDING OFFICER. The Senator from Ohio.

VETERANS' ADMINISTRATION MODERNIZATION AND HEALTH INSURANCE CO-OPS

Mr. BROWN. Madam President, earlier today I attended two hearings. One was held by the Senate Finance Committee on Consumer Operated and Oriented Plans, or CO-OPs, created by the Affordable Care Act. The other was held by the Senate Committee on Veterans' Affairs, where Secretary McDonald, a son of Ohio, detailed his plan to modernize the Veterans' Administration.

Both of these hearings are a strong reminder of the importance of government in supporting public health and access to health care and services. We know the Veterans' Administration, with all its problems today, has provided extraordinary health care for millions of veterans all across our country for decades. It doesn't mean we sit back and don't make very important improvements that are necessary at the VA.

When we learned that shocking wait times at the VA were delaying veterans from getting the care they have earned, we took action and passed a new law to invest in better care and provide more health care choices to veterans, but we can't simply act in times of crisis and then turn our backs on those who served in our Nation's military. It is our responsibility to make sure VA facilities in Ohio, Connecticut, the Presiding Officer's State of Iowa, and all over—it is important that these facilities across the country have what they need to provide state-of-the-art medical care for our veterans.

I have been struck by my time on the Veterans' Affairs Committee—I am the only Ohio Senator to ever sit on that committee for a full term. I am struck by how there are a whole lot of Members of Congress who are always happy to appropriate billions of dollars to send our men and women to war, but then when it comes time to take care of them when they come home, these same Members of Congress are not nearly as generous as let's say they were in sending them off to combat. That needs to change.

The same is true for health insurance CO-OPs or CO-OPs that face challenges. Twelve of these programs have failed. We can't sit back and let the remaining 11 CO-OPs meet the same fate. That is why I will continue to work with my colleagues to make sure CMS understands the importance and that they have the support and solvency they need to succeed.

When it comes to providing quality health care, the Ohio CO-OP is a success story worth telling. InHealth Mutual in Ohio covers approximately 25,000 people, 25,000 lives. It has en-

rolled individuals in each of Ohio's 88 counties. InHealth is doing some wonderful work, and it has taken it upon itself to be a major player in the community and in enhancing public health in Ohio.

One issue InHealth has chosen to highlight is health equity. InHealth is working to eliminate health disparities and is focusing on reducing barriers to care through its InHealth Cares Program.

To that end, InHealth started a faith-based initiative called Project REACH to address health disparities. Three years ago at a Martin Luther King celebration, a Martin Luther King breakfast in Cleveland, a minister told us something we perhaps already knew, but he said it so poignantly. He said: Your life expectancy is connected to your ZIP Code. Think about that. If you are born in Appalachia in Southeast Ohio or if you are born in East Cleveland versus if you are born in the more affluent suburbs of Shaker Heights or Bexley or Upper Arlington, your life expectancy can literally be a difference of 20 years. Imagine there are places in Cuyahoga County—one only 8 or 9 miles apart from the other—where a baby born has a life expectancy of literally 24 years less than a baby born in the more affluent suburb.

But one of the things these CO-OPs can do is—by involving trusted members of the faith community and focusing on issues such as infant mortality, asthma, and diabetes, InHealth is successfully utilizing key community players to strategically improve access to care in minority communities across Ohio, but despite InHealth's current success, they continue to experience significant challenges.

Earlier today, the Acting Administrator of the Centers for Medicare and Medicaid Services testified in front of our committee about the challenges facing CO-OPs. At the hearing, many of my colleagues expressed significant concerns about the closure of the 12 CO-OPs that have pulled out of the market as well as the viability of the others that remain. I share those concerns, and I urge the Acting Administrator of CMS, Andy Slavitt, to work with Congress and the remaining CO-OPs, such as InHealth, to ensure their future viability. I commend him on his performance at this morning's hearing. I hope the committee will take the appropriate steps to confirm him so he is no longer an Acting Administrator but has the real job.

Congress and CMS must work together to find creative ways to ensure these CO-OPs that are negatively affected by the lower than expected risk corridor payments can find alternative ways to ensure financial stability.

We should work together to improve the current risk adjustment calculation, which is currently designed to favor the larger, more established health insurance carriers over new and significantly smaller health insurance plans, such as the CO-OPS, and im-

prove provider cost transparency in the market. They must work together to support the alternative ways for CO-OP small businesses like InHealth to raise capital.

CO-OPs like InHealth in Ohio are putting customer service before profits in making a positive difference in patients' health and their pocketbooks. CO-OPs boost competition, they drive down prices for customers, and because they are locally run and operated by their own members, CO-OPs are invested in providing the best possible care for the communities they serve. CO-OPs like InHealth are working. We need to make sure they have the support they need to continue providing quality, affordable local insurance to thousands of people in my State of Ohio and across the country.

I look forward to working with my colleagues on the Finance Committee, on the floor, and with CMS on these important issues so the existing CO-OPs—like InHealth—can continue to pursue innovative approaches to affordable comprehensive health insurance.

I yield the floor.

The PRESIDING OFFICER. The Senator from Connecticut.

Mr. MURPHY. Madam President, let me thank my friend from Ohio for his very constructive remarks on the success of CO-OPs. We have a CO-OP in Connecticut that has been providing very good quality care at very reasonable rates. It is part of what helps make our marketplace function, and I will look forward to working with him as we try to sustain the success of CO-OPs across the country moving forward as an element of the Affordable Care Act which, as I have said many times on this floor, is working.

AUTHORIZATION FOR MILITARY FORCE

Mr. MURPHY. Madam President, today I have come to the floor to speak very briefly about a resolution that the majority leader introduced, I believe, yesterday. This is an authorization for military force that apparently purports to give the President legal authority to conduct military operations against ISIS. Before we break for the weekend, I thought it was important to come to the floor to explain very briefly to my colleagues what this resolution really is.

This resolution is a total rewrite of the war powers clause of the U.S. Constitution. Let's be clear about that. It is essentially a declaration of international martial law, a sweeping transfer of military power to the President that will allow him or her to send U.S. troops almost anywhere in the world for almost any reason with absolutely no limitations.

Article I, section 8, clause 11 of the Constitution vests in Congress the responsibility to declare war. Many of us on both sides of the aisle have been arguing for over a year that the President—right now—has exceeded his constitutional authority in continuing

military operations against ISIS without specific authorization from Congress. I have been amongst those who have been calling on this body to debate authorization of military force. So in that sense I am pleased the introduction of this resolution may allow us to have a debate on the Senate floor about the right way to authorize war against our sworn enemy, ISIS, a terrorist organization that deserves to be degraded, defeated, and wiped off the map of this Earth.

While the ink is still wet on this resolution—so I will not endeavor to go into any detailed analysis of it—it is safe to say that this resolution is the wrong way to authorize war against ISIS. The language of this resolution is dangerous and it is unprecedented.

The American people want Congress to authorize war against ISIS, but they also want us to make sure we don't send hundreds of thousands of U.S. soldiers back into the Middle East to fight a war that has to be won first and foremost with regional partners, and they certainly don't want Congress to hand over the power to the President to send our troops into any country, anywhere in the world, for almost any reason.

That is what this resolution would do. It doesn't give the power to the President to deploy U.S. troops in Iraq and Syria. It gives the power to the President—without consulting Congress—to deploy U.S. forces in any one of the 60-plus countries where ISIS has a single sympathizer. Even worse, the language doesn't even require ISIS to be present in a country for the President to invade. All that is necessary for the President to be able to argue—with a straight face—is that the threat of ISIS was present.

As we have seen in the United States, the threat of ISIS is present in virtually every corner in the world. Thus, this resolution would give the President total absolute carte blanche to send our young soldiers to any corner of the world without consulting Congress.

Now, we wouldn't have to worry about a President abusing this authority granted to him if an example of this abuse wasn't in our immediate rear-view mirror. This Congress gave President Bush sweeping authority in two resolutions to fight terrorism in the wake of September 11, and he manipulated and abused that authority to send millions of American troops into Iraq to fight a war under concocted, false pretenses. He got an open-ended authorization from Congress, and he ran with it. Now, what did we get for this colossal misrepresentation? Over 4,000 Americans dead, scores more than that crippled, and a region in chaos, in large part because of our disastrous invasion and occupation.

On the campaign trail today, several of the candidates for President talked with such irresponsible bravado about throwing around America's military might. The likely Republican nominee, as we sit here today, shows a blissful

ignorance about U.S. military law and basic foreign policy that is truly frightening.

So given recent history and given the current rhetoric on the Presidential campaign trail today, why would we give the President such open-ended, sweeping authority ever again? And why would we even contemplate a resolution like this one that makes the 9/11 and Iraq war resolutions seem like exercises in thoughtful restraint? Why would we make the mistake of the Iraq war resolution again, especially when there is an alternative?

I know that we will likely have time to debate the question of how to properly authorize war against ISIS later. But in December of 2014, the Foreign Relations Committee did vote out an AUMF that gave the President all the power he needed to fight ISIS, while making sure that he had to come back to Congress if he wanted to dramatically expand the current conflict to other countries or to put hundreds of thousands of American troops into a new war in the Middle East. It is the only AUMF that has received a favorable vote by the Senate, and it is a template for how we can authorize a war that isn't totally and completely open-ended.

Several have argued for us to take up a debate on the AUMF because we believe that over the last 15 years, over the course of the War on Terror, Congress has basically abdicated its responsibility to be the voice of the people on the conduct of foreign policy. Many of us think that a smart AUMF would get Congress back in the game when it comes to our constitutional responsibility to decide when and where our brave troops are sent into battle. But this resolution, as currently written, would do exactly the opposite. It would permanently hand over war-making power to the President, and Congress would never get it back. It would allow this President and the next President to send our troops almost anywhere in the world for virtually any justifiable reason, with no ability for the people's branch of the Federal Government—this Congress—to step in and to have our say.

I do look forward to this debate if it does come to the floor. I think it is an immensely important debate. Frankly, I will be glad to have it. The American public wants us to declare war on ISIS, but they want us to do it in a way that doesn't repeat the deadly, costly mistakes of the past.

I yield the floor.

The PRESIDING OFFICER (Mr. PORTMAN). The majority whip.

MENTAL HEALTH AND SAFE COMMUNITIES ACT

Mr. CORNYN. Mr. President, I come to the floor today to talk about the 800-pound gorilla in the room that people don't want to talk about, and that is our broken mental health treatment system in this country.

Years ago, we made the mistake of institutionalizing people with mental illness, and then we made the mistake of deinstitutionalizing people with mental illness, with nowhere to go and no access to treatment. But I have introduced legislation that I hope will help begin this conversation anew, one that we will have a hearing on next week in the Senate Judiciary Committee.

The legislation is called, simply, the Mental Health and Safe Communities Act. It has two overarching goals. First, it will help those suffering from mental illness and their families to find a way forward and to get the support that they need. Second, it will equip law enforcement, teachers, judges, and people with the knowledge and skill sets to spot the early signs of mental illness and give them the means by which to respond effectively.

Sadly, we know that mental illness is a common thread through many senseless acts of violence that we have witnessed across the country. But this problem is more than about just that. I know some of our colleagues say they don't want to talk about how to improve access to mental health treatment if it is going to involve any discussion of guns, but I don't think we can talk about this topic without talking about these incidents of mass violence. But I want to make sure I am very clear and to say it is much more than just that.

It is time for Congress to respond with proven solutions that actually work. The President, as is his habit, has offered controversial proposals that actually violate the Constitution and threaten our rights without solving the problem. To me that is one of the reasons why people get so frustrated with Washington, when people stand up and say that here is something we ought to do, when it really is symbolic in nature and it doesn't actually solve the problem they claim to be addressing. And that is true of the President's Executive actions on guns.

Indeed, the AP's headline, when the President made this announcement, read: "Obama measures wouldn't have kept guns from mass shooters." In other words, the Associated Press makes the point that none of this would have solved the actual problem. But the legislation I have introduced has a good chance to begin the effort to do that.

So since the President won't act responsibly and work with Congress, Congress must act by itself—first, to build consensus and offer solutions, and not just engage in symbolic gestures and more political talking points. It is time we focus our efforts on, first and foremost, providing support to the mentally ill and their families to make sure, first of all, that they are less likely to be a danger to themselves, and, secondly, that they won't be a danger to the communities in which they live.

Next Tuesday, we will have that hearing I mentioned at the outset in