

RESERVATION OF LEADER TIME

The PRESIDING OFFICER. Under the previous order, the leadership time is reserved.

TRANSPORTATION, HOUSING AND URBAN DEVELOPMENT, AND RELATED AGENCIES APPROPRIATIONS ACT, 2016

The PRESIDING OFFICER. Under the previous order, the Senate will resume consideration of H.R. 2577, which the clerk will report.

The senior assistant legislative clerk read as follows:

A bill (H.R. 2577) making appropriations for the Departments of Transportation, and Housing and Urban Development, and related agencies for the fiscal year ending September 30, 2016, and for other purposes.

Pending:

Collins amendment No. 3896, in the nature of a substitute.

McConnell (for Lee) amendment No. 3897 (to amendment No. 3896), to prohibit the use of funds to carry out a rule and notice of the Department of Housing and Urban Development.

McConnell (for Nelson/Rubio) amendment No. 3898 (to amendment No. 3896), making supplemental appropriations for fiscal year 2016 to respond to Zika virus.

McConnell (for Cornyn) modified amendment No. 3899 (to amendment No. 3896), making emergency supplemental appropriations for the fiscal year ending September 30, 2016.

McConnell (for Blunt) modified amendment No. 3900 (to amendment No. 3896), Zika response and preparedness.

The PRESIDING OFFICER. Under the previous order, the time until 12:30 p.m. will be equally divided between the managers or their designees.

The Senator from Montana.

Mr. TESTER. Mr. President, as we begin consideration of the fiscal year 2017 Military Construction and Veterans Affairs appropriations bill, I want to start by thanking the chairman of the subcommittee and his staff.

The process Chairman KIRK and I put into place was fair, inclusive, and open, and I appreciate that he went out of his way to incorporate input from me, my team, and Senators from this side of the aisle.

This bill does right by our brave service men and women by honoring our Nation's commitment to veterans, Active-Duty military, and their families. We owe these folks our gratitude for their selfless sacrifice to freedom and democracy.

As a result of last year's bipartisan budget agreement, we are on the same page this year in terms of top-line funding numbers. This level of funding has allowed us to make critical investments in military construction, veterans programs, as well as Arlington National Cemetery and the U.S. Court of Appeals for Veterans Claims.

For VA, this bill provides \$102 billion in mandatory funding for veterans' benefits—\$102 billion—and includes an additional \$103.9 billion in fiscal year 2018 advance funding to ensure that there is not a lapse in getting dis-

ability compensation and education benefits to our veterans.

For VA's discretionary accounts, including the Veterans Health Administration, the bill appropriates \$74.9 billion. That is \$3.4 billion more than the Department has this year. Within that amount, we are able to target increased funding for several key priorities for veterans. That includes health care, disability claims and appeals processing, medical and prosthetic research, and family caregiver support. That means the VA will be able to aggressively pursue critical veteran-centered research into a host of medical conditions, including PTSD and traumatic brain injury—the unseen wounds of war that are so difficult to both identify and treat. It also means the VA will have additional resources to meet the growing demand of caregivers who are providing critical, family-centered, long-term care for our veterans, and it will allow VBA to hire 300 new claims processors and 240 additional employees for the Board of Veterans Appeals, all focused on reducing the appeals backlog—something Senator SULLIVAN and I are working on over on the authorizing side. These funds will complement that work.

The bill before us also includes a new medical community care account that consolidates the various sources of funding that connect veterans to care in their own communities. The creation of this new account is extremely important in providing better oversight over a program that is critical for our veterans, particularly those in rural areas where services through the VA are often unavailable. It is also a key component in ongoing efforts to consolidate and streamline the number of different programs the VA has to get veterans care in their local communities. That is something a number of us are working on in a bipartisan manner in the Veterans' Affairs Committee.

On the MILCON side of the ledger, the bill before us also delivers. We have provided increased funding for a number of unfunded MILCON requirements identified by the services. Given the severe constraints on the budget, funding for military construction is squeezed more tightly now than ever. It is not just the cost of trying to maintain a deteriorating building, which in itself is substantial, it is also the impact that effort has on training, readiness, and retention of personnel—the very areas DOD is struggling to reinforce.

Shortchanging military construction is not a cost-effective or sustainable defense strategy over the long haul. That is why I am glad this bill provides nearly \$500 million over the budget requested for unfunded priorities.

I am pleased the majority chose not to put forward controversial amendments on this bill during committee consideration. The bill that funds veterans health care and our military installations should not be a vehicle for politics. Our veterans and our service-

members deserve a clean bill, so we need to avoid the ugly stuff on this bill.

I have a lot more to say about this bill as it is considered over the next, hopefully, several days. For now, I reiterate my thanks to the folks on the majority side, as well as Vice Chairman MIKULSKI, for their efforts in getting us where we are today.

Lastly, I remind all of our colleagues that we are open for business. So if there are amendments you are thinking about, get them filed and get them to our staffs so we can move forward. Amendments at the eleventh hour are never good, so get them in early so we can consider them.

Mr. President, I yield the floor.

The PRESIDING OFFICER. The Senator from Oklahoma.

Mr. INHOFE. Mr. President, I ask unanimous consent to speak as in morning business.

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

PRESIDENT'S POLICY ON TRANSGENDER ACCESS TO SCHOOL BATHROOMS

Mr. INHOFE. Mr. President, since Friday, my State and DC offices have been flooded with calls from concerned constituents regarding President Obama's latest unilateral action directing public schools and colleges to allow transgender kids into the bathrooms and locker rooms of their choice. In Oklahoma, we understand what this is all about. This is all about a liberal agenda being crammed down the neck of Oklahoma and the rest of the country.

On Sunday, I went to a church service near the Grand Lake area in Northeastern Oklahoma, where the nearest community has about 250 people. The pastor, whose name is Mark, said, "If ever there were a Shadrach, Meshach, and Abednego moment in America, it is now."

They understand that there is a real battle going on in Washington for our values. These values should be decided at the local level by the parents and teachers who truly understand what needs to take place to protect all kids.

He went on to say that "we have to embolden our school board members [and other politicians] with our support." I agree. This is why I put forth a bill last year, which passed last year, to empower local school authorities to make these kinds of decisions. What the President is doing is unilaterally redefining title IX of the education law that prohibits discrimination on the basis of sex. With the new guidance he has issued, Obama is aiming to prohibit anything that could be construed as discrimination against "gender identity, including discrimination based on a student's transgender status."

Ultimately, the President is demanding, under threat of losing significant public assistance—in my State of Oklahoma, this amounts to about \$450 million—if States and school districts don't comply. In other words, it is blackmail: You comply or you lose something you are entitled to.

By rewriting the law, President Obama has decided, without any input from Congress, that local schools must accommodate a very small segment of the population in a very specific way by allowing them to use the bathroom of their choice. By blackmailing our schools with funding that goes to low-income and special needs kids—money which schools are already entitled to receive—the Obama administration is writing its own laws to punish those who disagree.

As the pastor said this weekend, “We should not sell out the innocence and the safety of our children” as a condition for receiving Federal money that helps those who need it the most. In fact, he went on to say: We just will not accept it. We don’t need to accept it. It is not worth the price we would pay.

This misguided policy is directed at the comfort of a microminority at the expense of the comfort, privacy, and safety of the majority of students who do not want to expose themselves or be exposed to another student of a different sex.

As Oklahoma’s attorney general, Scott Pruitt, has noted, the administration’s letter “definitely changes the law in that it takes the unprecedented step of redefining ‘sex’ to mean ‘gender identity.’” Furthermore, he states that the President’s actions “are unlawful” and that they represent the “most egregious administrative overreach to date” and that Oklahoma “will vigorously defend the State’s interests.”

I fully support Oklahoma and other States that are vowing to fight this undemocratic edict from a politician who is no longer accountable to the voters. Oklahoma’s parents, schools, and State and local boards are best equipped to deal with the issues they face in the classroom and on school grounds and should not be dictated to from Washington.

Our Nation’s schools should not be ground zero for social experiments from the liberal agenda, and this is exactly what is happening now, but it doesn’t take an Attorney General or a U.S. Senator to come to these conclusions. I thank God that basic morality is ringing out from the pews, not just in Northeastern Oklahoma but throughout America.

You are doing the Lord’s work, Mark. Keep it up.

Mr. President, I ask unanimous consent that the time spent in a quorum call before 12:30 p.m. today be equally divided.

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

Mr. INHOFE. Mr. President, I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

Mrs. MURRAY. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

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

Mrs. MURRAY. Mr. President, as a mother and a grandmother, I know that one of the most frightening questions an expecting parent has to ask their doctor is, “Is my baby safe?”

Too many parents are asking that question right now because of the Zika virus. There are now more than 1,200 reported cases of Zika in the United States and the three territories—more than 100 of these are pregnant women—and on Friday, Puerto Rico announced its first case of Zika-related microcephaly.

Unfortunately, those numbers are only expected to grow in the coming months. So this is an emergency, and public health experts have repeatedly made it clear that as we get closer to the summer and to mosquito season, we cannot afford to delay. We need to better control mosquitoes that carry the Zika virus. We need to raise awareness to make sure families are informed about this disease, and we need to expand access to family planning services and accelerate the development of a vaccine. The President laid out a strong emergency funding proposal to accomplish each of those goals in February.

I support that plan. I was very disappointed that instead of acting on it as quickly as possible, my colleagues on the other side of the aisle simply refused to even consider it. Instead, they found reason after reason to delay. First, they said the administration should take funds from the ongoing Ebola response to combat Zika. Then, they said they needed more information about the President’s proposal, even though Zika has been discussed in 55 congressional hearings, even after briefings by senior administration officials, and even though the administration’s 25-page proposal had been available for months for anyone to see.

House Republicans have released a proposal that would provide a very meager \$622 million, less than one-third of what is needed for this emergency, without any funding for preventive health care or outreach to those who are at risk of Zika, and they are still insisting in the House for the funding for the offset.

In the face of all of that partisanship and inaction and with public experts making it clearer every day how much we need to act before mosquito season is in full effect, I was encouraged that Chairman BLUNT and others on the Appropriations Committee were willing to work with Democrats on a first step to respond to this emergency. The agreement we have reached would put a down payment on the President’s proposal into the hands of our first responders and researchers right away. It would provide much needed relief for Puerto Rico, backfill nearly \$100 million in essential public health funding that the administration had been forced to reprogram, invest in prevention and support services for pregnant

women and families at home and abroad, and put research dollars into developing a vaccine.

I believe the Republicans should do what we have urged them to do for months and join Democrats in supporting the President’s full emergency funding request. But if they continue to refuse, then at the very least, they should be willing to support a bipartisan first step toward protecting families from this virus, and Democrats will continue pushing for every necessary resource going forward.

Families across the country are looking to Congress for action on Zika. They do not have time for lengthy debates about offsets, and they don’t have more time to wait. So I hope we can move very quickly to get this emergency funding package through the Senate and the House and onto the President’s desk. If we act now, we can help protect our families across the country from the truly tragic consequences of this disease, and there is no reason to delay.

I yield the floor.

The PRESIDING OFFICER. The Senator from Massachusetts.

Ms. WARREN. Mr. President, for months Democrats have asked the Republicans who control the Senate to let us act, while the Zika virus has spread across South America, Central America, and several U.S. territories. For months, we have asked the Republicans who control the Senate to let us act, while more and more American travelers are back in the United States after contracting the Zika virus. For months, we have asked the Republicans who control the Senate to let us act, while health experts at the World Health Organization, the National Institutes of Health, and the Centers for Disease Control and Prevention have begged Congress for the resources to fight this disease. For months, we have asked Republicans who control the Senate to let us act, while more people infected by Zika have developed a debilitating and sometimes fatal condition that damages the nervous system. For months we have asked the Republicans who control the Senate to let us act, while more mothers infected by Zika have given birth to babies with severe brain defects. And for months, we have asked the Republicans who control the Senate to let us act, while the President has been forced to divert emergency funds from other critical areas, including the emergency Ebola response.

Today, months after President Obama first requested nearly \$2 billion to fight the Zika virus in the United States, the Republicans who control the Senate will finally let us vote on options for funding the Zika response.

Today the Senate will consider three proposals. The first proposal would completely fund the President’s response plan. It offers our best hope to fully protect Americans, and I will vote for that proposal. I plead with every Senator to do the same because that is

what our Nation's experts have said it will cost to limit the sickness, death, and deformity caused by the Zika virus.

I know that some Republicans understand this point. Senator RUBIO, whose State of Florida is at great risk for local transmission of Zika, recently said this:

I believe in limited government, but I do believe one of the obligations of a limited Federal Government is to protect our people from dangers, whether they be foreign enemies or the risk of disease outbreak. . . . I don't think we want to be halfway through the summer and wake up to the news that hundreds and hundreds of Americans in multiple States have been infected and we did nothing.

Senator RUBIO supports fully funding the President's response plan. I hope it passes the Senate. If it doesn't, it will be because the majority of Senate Republicans vote against it. If that happens, we will be forced to consider another proposal.

The second proposal would give the President half of what is needed to fight the outbreak. I will support this proposal if that is the last resort, as will many Democrats, because this is a health emergency. If your ship is sinking and you need 12 lifeboats but you can only get 6, you take the 6. We will take whatever the Republicans who control the Senate are willing to give to protect the American people.

Cutting the Zika funding request in half might give Republicans a chance to tell people how tough they are on spending, and that may be how Republican politics works, but it is not how science works. It is not possible to delay a response to a health emergency for month after month without consequences. It is not possible to nickel-and-dime a response to a health emergency without consequences. Sure, the Republicans' half measure is better than nothing. But an estimated 4 million people are facing the prospect of Zika infection by the end of this year, and a half response is not good enough.

The final Republican proposal is even dumber. It would not only give the President about half of what is needed but it would cover the cost by gutting the Prevention and Public Health Fund, which provides significant support to local public health departments all across the country. You heard that right. Some Senate Republicans think the best way to fund America's emergency response to the Zika virus is to rob from America's frontline responders who help identify and track infectious diseases such as the Zika virus.

On the other side of Congress, House Republicans are kicking around an even more bizarre idea—funding only about one-third of the President's plan to fight Zika and doing it by cutting hundreds of millions of dollars out of our Ebola response. With the Ebola epidemic just passed and still no FDA-approved vaccine or treatment for Ebola, what could possibly go wrong with that plan?

I simply do not understand the Republicans. The responsible thing to

do—the rational thing to do—is to invest the resources needed to stop the Zika threat in its tracks and to invest in more science and public health infrastructure so that we are ready when the next crisis comes.

As congressional Republicans embrace this irrational anti-spending ideology, this country is put in greater and greater danger. Instead of investing in research so we can develop effective treatments, instead of supporting careful planning so we are ready for the next health challenge, and instead of fully funding emergency response infrastructure so we are prepared to respond to new threats, these Republicans govern by simply lurching from crisis to crisis.

We are in this mess with Zika—a mess that is about to get a lot worse—because of stupid decisions made right here in Congress. Keep in mind that Zika, like Ebola, is a disease we have known about for years. But our ability to do the necessary research to eradicate these threats has been undercut by Republicans' desire to make more and more budget cuts, even when they put the health of Americans in danger.

This country's scientific research capacity has been decimated. Over the last decade, the budget of the National Institute of Allergy and Infectious Diseases has lost about 20 percent of its purchasing power—20 percent. The Prevention and Public Health Fund that helps build the infrastructure needed to prevent people from getting sick and to shut down outbreaks like Zika has been on the Republicans' chopping block year after year.

Here is the bottom line. Our doctors, scientists, and health officials need our complete support in fighting this virus. They have told us how much money they need to do that. The less money Congress gives them, the more people will be hurt by the Zika virus—more babies with heartbreaking deformities, more adults with devastating illnesses.

The Zika virus does not care what politicians in Washington decide is politically expedient. The virus is coming, and if Republicans block Congress from protecting the people of this country, then Republicans must accept responsibility for the devastating consequences.

I yield the floor.

The PRESIDING OFFICER. The Senator from Florida.

Mr. RUBIO. Mr. President, first of all, let me begin by saying how encouraged I am that we are finally seeing some action here in Congress dealing with the Zika virus. Today, we have not one but three separate proposals to deal with this which are going to come up for a vote.

I support fully funding the request made. People say the President's request. Fine, it came from the White House. But it is really the scientists' request, the doctors' request, and the public health sector's request for how to address this issue.

The fundamental point I make is twofold. We can pay for it. We can find

\$1.9 billion. By the way, we can always come back later and find it, too, although I know that is hard to see happening here in Washington. But this is a public health emergency that cannot wait for this extended debate on this issue, especially when you talk about an \$18 trillion debt. Zika funding is not the reason why we have an \$18 trillion debt. It is not the national driver of our debt. That is why dealing with the long-term security of Medicare and Social Security is so critical. But we can pay for \$1.9 billion, and we should. But it is public health experts who have said the amount we need is \$1.9 billion.

I continue to urge my colleagues to take this with the sense of urgency that the public health experts have. The people I have met with, the people I have interacted with, and the people I have been talking to are not political people. I haven't been talking to people in the White House political office. I have been meeting with people who work at the Centers for Disease Control. I have been meeting with people who work at the Florida Department of Health. I have been talking to department of health officials in Puerto Rico. I have been talking with doctors who are in the frontline of dealing with microcephaly and what it means long term for the children who have been impacted by it. That is with whom I have been talking.

They have outlined the kinds of things we need to be doing. But more importantly, what they outlined is that there is so much we still don't know about Zika. For example, we don't know what the long-term consequences are of a mother who is infected with Zika while pregnant and the child was born without microcephaly. We don't know what happens in 6 months, 9 months, 1 year, or 5 years down the road. But I do know that many medical experts believe there will be further manifestations of the disease's impact on the central nervous system in many of these children years after this debate in Congress is finished.

I do know that Puerto Rico is being ravaged by this. Puerto Rico is a territory of the United States. These are American citizens who have been infected with Zika. They don't have a Senator from Puerto Rico, although I am more than honored and grateful for the opportunity to speak on their behalf on these issues. But what people have to understand is—this is not the right way to approach it, but even if your approach is that it is Puerto Rico and it is not the mainland of the United States, then I invite you to go to the airport in Orlando or Miami, and you can see the daily flights and the constant flow of people back and forth.

We also look at the fact that the summer months are coming. This is a mosquito-borne infection. We know that mosquito season is here, and it is coming fast. We know that the Zika virus becomes more potent as temperatures get warmer. Guess what. It is

about to get really warm not just in Florida but throughout the Gulf Coast States and throughout the country.

We know that places such as Brazil have been deeply impacted by the Zika virus. Guess what. Tens of thousands of people are about to travel through the United States to and from Brazil for the summer Olympics.

We know that Major League Baseball canceled a game in Puerto Rico because they believed it was a serious enough risk that they didn't want to put the players at risk, not to mention the crowd.

We see something percolating, and we don't know much about it. We know enough about it to know it is a serious problem. We do not know how far this is going to go. As a result, we see the people of this country facing a public health threat, and our response should be to deal with it the way medical experts say we need to deal with it.

We can put language in the proposal that says: If you don't end up spending the full \$1.9 billion and you don't need all of that money, all of that money automatically goes back to Treasury within it a year or two if it hasn't been spent.

Why take the chance? Why take the chance that at some point this summer we could have a significant and serious outbreak in the United States of America when all the Senators are back in their home States doing campaign stuff or whatever they are doing and have to come back here and deal with it and explain to the people why, when doctors and medical experts were warning us that this was a significant risk, we decided to lowball it and spend less than what was called for by experts.

By no means do I intend for this to sound as if I am criticizing Senators MURRAY and BLUNT. I thank them for their work. They have tried to come up with a bipartisan proposal that can pass.

I said earlier, I am proud of the amendment that my colleague from Florida, Senator NELSON, and I are proposing here today. I hope that the \$1.9 billion amount passes, but if we are left with a vote on the Blunt-Murray amendment, I think that is better than nothing, and I will support it. But why are we taking this chance? It makes absolutely no sense.

While I am happy that the Senate will hopefully take action on this issue, I am concerned about what I hear coming from the House. I am glad that they are finally beginning to move on the legislation and that something is happening, but I am very concerned about the direction of their own funding measure. Their funding measure isn't even \$1.1 billion. It is \$622 million, and quite frankly, that will not cut it. If we don't spend more than that on the front end, I believe we will spend a lot more later on because the problem is not going to go away, and it certainly will not go away with \$622 million to combat it. This is concerning to me because even if we do manage to pass the

\$1.9 billion request, I am afraid even that may not be enough for the long term.

The issue that seems to be holding them back is the desire to offset spending. As I said, I support that 100 percent. I believe we can find \$1.9 billion and transfer it from some other part of our budget to ensure that we are not deficit-spending. We can do that and we should do that. I am in favor of doing that, but that will not keep me from trying to do something about it.

In times of public health emergencies, just like during times of natural disasters, I don't think we should delay action while we try to figure out these budgetary moves and try to agree on what we are going to cut from other parts of the budget. I still believe we should do it, but we cannot hold back for another few weeks while we are trying to get to that point.

The administration has already diverted half a billion dollars that was intended for the fight against Ebola, but the House would raid even more of the Ebola funds for the Zika response.

It is easy to say: Ebola is not in the headlines anymore. We are not reading about it that much, so it must not be a problem.

Ebola still exists. It is not polio. We haven't eradicated it from the United States or the world. It is just not a percolating crisis right now, but there is nothing to say that it couldn't pop up again.

By the way, these sorts of pandemics will become more and more common as people are able to extensively travel all over the world. We are at the crossroads of a lot of that travel.

I don't think I am prepared to walk away. Maybe they don't need the full half a billion dollars, but I think it would be shortsighted to say that Ebola is finished, so we don't have to worry it anymore. There has to be some money available in case that comes up again, because it could.

I believe the House can and should do better than what it has proposed and should provide offsets to the spending—provide the \$1.9 billion offsets. I guarantee they will be able to find that fairly quickly. They could provide stringent accountability measures. They could stipulate in the law that they pass, for example, that if we are wrong and don't end up spending or needing anything close to \$1.9 billion or even \$1.1 billion, that the taxpayers' money will be returned to the Treasury. But let's not play with fire.

As of now, there are 112 people in the State of Florida who have been infected. We have many more American citizens who have been infected in Puerto Rico. There are many unborn children who are at risk, and many more will be impacted once mosquito season sets in. At the end of the day, these are the people we should be fighting for, and quite frankly, we can do much better than what the House is proposing.

This is a devastating disease. It has taken lives throughout our hemi-

sphere, and the way it impacts unborn children alone should call us to action. We have seen the images from Brazil of the children born with microcephaly. This is a devastating condition. The cost of caring for those children throughout their lives is extensive, and we are going to do it. We need to do it, and we will do it, but let's try to prevent it. Let's try to get ahead of it. Let's try not to just be reactive but proactive.

There are reports in the press today that scientists have been able to take a significant step toward potentially creating a vaccine. Once there is a vaccine for Zika, this problem will be under control.

As I said earlier, let's not play with fire. I hope my colleagues will jump on board and fully fund the \$1.9 billion. If they want, we can put language in the legislation that says that if the money isn't fully spent, it will be refunded to the Treasury.

Why take the chance? Why take a chance on an issue that is not yet well defined? Why take the chance on a disease that we still don't know everything about? Why take the chance that we could have an outbreak much worse than anything any of us anticipated and be caught off guard? Why take the chance that you will have to go home in August and September and explain to millions of people across this country why so many Americans are now being infected by this disease and you lowballed our approach to it a few months ago? Why take the chance?

Let's do it once. Let's get it right. Let's ensure that we are protecting our people and deal with it now and deal with it fully. This is our obligation, and I hope we will embrace it here today. There is no reason we should not fully fund this proposal and listen to the doctors and health care experts who are asking us for this and build from there. I hope that is what my colleagues will do in a few hours when we vote on these proposals that stand before us.

With that, I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

Mr. FLAKE. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

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

Mr. FLAKE. Mr. President, I come to the floor to speak with regard to providing funding for the emerging Zika crisis that the Senate will be considering on the floor today.

We in this body and the entire Congress over the past several years have provided a lot of additional health-related supplemental funding. In fact, over the past 13 years, roughly \$19 billion has been directed toward health-related emergency supplemental funding. This, of course, does not include the hundreds of billions of dollars in

other supplemental spending that has circumvented the budgetary oversight process.

With a national debt of \$19 trillion, we have to make sure we budget for these types of emergencies. When we have appropriated on a supplemental basis \$19 billion over the past 13 years—supplemental health funding—then we know we need to budget for this type of crisis and not simply go the supplemental route and go out from under our budgetary caps.

I will support cloture today on the measure that includes an offset. We have to be more fiscally responsible as we deal with these crises. This is a crisis we need to deal with, but we ought to at least attempt to offset that funding. I believe taxpayers deserve nothing less than that.

With that, I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

Ms. MIKULSKI. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER (Mr. FLAKE). Without objection, it is so ordered.

Ms. MIKULSKI. Mr. President, it has been 3 months since the administration sent Congress the emergency funding request for Zika, and Congress hasn't acted on it. But today we have an opportunity to do so, and I hope we do.

We will have pending before the Congress three different options on how to fund this public health emergency, but we must realize it is an emergency, and we need to have a sense of urgency to protect the American people and to help those south of the border to be able to cope with it. What are we waiting for? The mosquitoes are here. The mosquitoes have not only come, they have already come.

I have said in the past that we can't build a wall to keep them out—the mosquitoes will not pay for it—but it is no laughing matter. The President has said we need \$1.9 billion to fight Zika to stop it from doing any more harm. That is what I am fighting for. We know we need to get the job done.

It is not just Senator BARB talking. The World Health Organization has declared Zika a public health emergency. The President declared it as such. The Centers for Disease Control and Prevention, through Dr. Freiden, has said this is a national and international emergency. And Dr. Fauci, head of the Institute of Infectious Diseases and Neurology at NIH, whom we have turned to on so many occasions, has also said it. So every public health entity has validated that this is a serious public health crisis.

We can prevent its dire consequences. Through action, particularly related to mosquito control and working with pregnant women and women of childbearing age, we can deal with this. This is not some unknown disease that

would suddenly be arriving on our shores for which we would have no knowledge and no tools. These are basic public health tools related to mosquito control and helping women of childbearing age.

If we refuse to act, this will be a self-inflicted wound on our own people, and the consequences are dire. For those who care about children—I am sure we have already seen what has happened south of the border with little children being born with microcephalitis. My gosh, it is heartbreaking. It is heartbreaking for the little child with a limited life expectancy and limited life opportunities, the responsibility that will come to the family—usually to the mother—and to the society that will have to care for that child.

Today we are talking about money, but we have to think about the human concerns. Both Dr. Freiden and Dr. Fauci have conveyed to me and other Members of this body, particularly those on the Appropriations Committee and on the Health and Education Committee, that there are other unknown health issues related to those over the age of 65 or those with compromised immune situations now. If you have a chronic condition like diabetes, you could be subject to really negative consequences from being bitten. We have heard about Guillain-Barre. There are other diseases that are a consequence of Zika that give arthritic symptoms that can last for over 10 years.

Why don't we do something about it? We know that mosquitoes carry Zika. We already know they are in several States. We know Puerto Rico is already being hard hit. Sports events and other events have been canceled. We know it is down in Florida. Look at the way Senators NELSON and RUBIO are working together. We need to act, and we need to act now because we do know these horrible and devastating impacts. We have heard eloquent and poignant and even wrenching descriptions of what happens to children.

I know a topic in our Congress and in the Senate has often been the unborn. Well, we really want to protect the unborn, and this is the way to do it. We have to stop the mosquitoes through mosquito control.

This is basic public health. We also have to work with those women who are pregnant or of childbearing age to know about the consequences and what actions they can take to be able to do that. We need to be able to do this at the Federal level. Congress needs to act.

They are already acting at a local level, but they are spending local money to be able to do it. My own Governor, a Republican, Larry Hogan, is acting. He convened a task force. He pulled his public health people together. He ordered his own health department to coordinate education and awareness with local health departments in Maryland. I salute Governor Hogan in taking that action. He has al-

ready authorized the distribution of thousands of prevention kits for pregnant women across the entire State. Those kits cost about \$130,000 to put together and to distribute. Maryland is doing this on its own dime. Well, mosquitoes are a national consequence and even an international one.

The counties in Maryland are doing their job—again, not Democrat or Republican. Again, my Governor is a staunch fiscal conservative, but he knows public health saves money, along with helping people with their lives.

Anne Arundel County, the home of the State capital, headed by a Republican county executive, is acting. This local county is already distributing its own prevention kits. It is not only the State capital, it is the home of the Naval Academy. Everybody is acting on their own.

In Baltimore City, our mayor is acting, working with the Bloomberg School of Public Health. We are spending local money on mosquito control. They need help. They need help from their own government to deal with the issue south of the border as they come up here, and they need help in their own communities to be able to fund the basic public health measures that we know are tried and that we know are true to be able to do that. I really encourage us to be able to do this and not to do it by raiding our programs.

I absolutely oppose taking money from the Prevention and Public Health Fund to pay for Zika. The prevention fund provides resources to States against other public health problems. We can't prepare for and protect against Zika by taking funds from other public health activities. We don't know what the summer and the winter hold. States could lose as much as 40 percent of their surveillance dollars to track other infectious diseases.

We have been asked for a very straightforward set of options. There is the Nelson-Rubio amendment asking for \$1.9 billion. That is what I support. It would fully fund our measures, both nationally and internationally, and particularly help deal with the spread of this disease and helping local communities.

I reject another amendment that will be coming, offered by the Senator from Texas, Mr. CORNYN, who is well intentioned, and I appreciate his sincere interest in this. But he is robbing the prevention fund. We need an urgent supplemental. This was an unexpected event, which means that it is temporary, it is unexpected, and we need to deal with it.

I really want to congratulate—I know Senator BLUNT and Senator MURRAY have been working on another option if the other two fail. Whatever it is, at the end of the day we need to take action. This is a public health emergency. We need to deal with it in the most expeditious way. I know every Senator here is concerned about it.

The mosquitoes have already come to Maryland. What we don't want is to be stung by its consequences. So let's get on with the business of the day. I thank my colleagues for dealing with this issue now.

I yield the floor.

The PRESIDING OFFICER. The Senator from Missouri.

Mr. BLUNT. Mr. President, I want to talk about the amendment I have offered with Senator MURRAY and Senator MIKULSKI and Senator COCHRAN. The chairman and the ranking member of the Appropriations Committee have joined in that amendment, as have Senator GRAHAM and Senator LEAHY. The committees involved are truly looking at this, trying to find a way forward that allows us to take action. We do need to take action, as my good friend from Maryland has just so well explained.

There is no vaccine. There is no simple diagnostic test. There is no way to treat the virus once you get infected. So communities really don't have very many options right now. The limited resources they have to manage the one thing we can do something about immediately besides education—the local mosquito population—are resources that are not nearly adequate to meet the current need.

At this time, there is no way to fully prevent the infection, leaving high-risk populations at risk, especially pregnant women or women trying to get pregnant. That seems to be the population where the impact of this disease—the impact of this Zika infection—has not only the most short-term but the most long-term implications because of microcephaly and other things that are going to be impacting children born.

I am told by the Centers for Disease Control and Prevention that every indication now would be that once you have had Zika, you cannot get it again. It becomes the inoculation, so just because you get Zika and may at a later time become pregnant, you are not likely to have the same thing. That is one of the studies going on, to verify for sure that is the case and also to verify for sure how long after you have had Zika that pregnancy can still be a problem.

This is a growing problem. There are already 650 confirmed Zika cases in the U.S. territories, with the majority of those being in Puerto Rico. There are over 500 travel-associated cases of Zika in the United States. If they got it here, it has been through sexual transmission and not from the mosquitoes themselves because obviously it is not mosquito season yet, but that is very close.

This is a public health threat and clearly an emergency. This is not something we can plan now to deal with 2 years from now because 2 years from now would be too late to deal with this crisis. However, I want to make clear that our deliberations over the supplemental request have never

been an either-or scenario. There has never been a scenario where we are either going to rubberstamp the administration's request or do nothing. That straw man will not work. That is not the situation.

We need to evaluate this request. The request has certain items the administration asks for that I think if you look at them not even very closely—and certainly when you look at them closely—you find out they are unnecessary, they are unwarranted.

This is a bill designed to address an emergency situation, not a bill designed to make the most of an emergency. For example, the administration's proposal has a request for the building and expansion of new Federal buildings; \$85 million of that initial request was to build new buildings. There is no way those buildings would probably even be started during the so-called emergency timeframe or during the real emergency timeframe. Certainly they would not be of use during the timeframe. That is not a real reason to ask for money; it is just an excuse to ask for money. The Congress could, should, and I believe will say: No, we are not going to do that.

The second request I would like to point out today, the request to provide the department of health with \$175 million of that \$1.9 billion, was just a slush fund. It was just a fund with virtually unlimited authority to transfer that \$175 million or any part of it to any purpose of any Federal Government agency.

There may be some purposes in this emergency we don't know about yet, but they are not going to be \$175 million, and they are not the kind of emergency appropriations you couldn't get by other means where the Congress is clearly involved. We did not provide this kind of funding in the Ebola crisis when the Democrats were in charge of the Senate. We should not provide it today.

There is no reason for a \$175 million undesignated fund to be used anywhere in the Federal Government, any more than there is a reason to take \$85 million and build a new Federal building, and say "Well, it is part of the Zika emergency" because it clearly is not. If there is a need for a Federal building at CDC, the Centers for Disease Control and Prevention can come to the Congress and make that case. That is the way that should be done.

If this amendment prevails today, that money will not be available. It is not unreasonable to ask the administration for details on what activities would be funded. What are their priorities, and when would they realistically spend these funds?

The \$1.1 billion emergency fund would take us through the end of not just this fiscal year but the next fiscal year, about the same time we would hope in talking to the National Institutes of Health that a vaccine will be available. Once a vaccine is available, we will need to look at this Zika infec-

tion in a new way, and we will get to look at it in a new way.

If the administration had been a little more transparent at first, maybe we could have reached this point earlier. But to suggest that the Congress has needlessly delayed funding is both unfair and untrue.

I also think that this is the time we can move forward. The role of the Appropriations Committee is to look at this and to see that the money appropriated is going to be spent in the right way.

In the meantime, the administration has made available to the Zika crisis almost \$600 million. Mr. President, \$589 million is a lot of money. It is particularly a lot of money when it is basically one-third of what was being asked for. Whether what was being asked for was necessary or not, \$589 million of unobligated funds that were available in other places have been brought to this cause.

The fact that the administration did that shows in a good way just how serious they are about the crisis. If this were not a real crisis, they would not be taking \$589 million that in some process would be spent somewhere else and say: Listen, we need to spend this on Zika right now. But for the people we work for, it is important to understand that \$589 million is being spent on this, and that is no more than what would possibly have been spent if this appropriation would have happened the day the administration asked for it.

The Appropriations Committee took the necessary time to understand the funding needs and response requirements to ensure that we protect all Americans, including taxpaying Americans. We worked in a bipartisan manner to provide the Department of Health and Human Services and the Department of State with targeted funding to respond to Zika.

Today we have that result, a bipartisan amendment worked out between the leaders of the Appropriations Committee and the Labor HHS and State and Foreign Operations Subcommittees to meet this emergency. Specifically, I worked with my ranking member on Labor HHS, Senator MURRAY, to reach an agreement that will provide \$850 million to the Department of Health and Human Services to respond in a three-pronged strategy.

First, that Department is to provide the funds necessary to develop vaccine candidates, therapeutics, and new diagnostic tools.

Secondly, the Centers for Disease Control and Prevention will be able to focus responsible efforts domestically and internationally on the highest priority activities, such as vector control, emergency preparedness, and public health outreach.

Finally, the supplemental provides targeted funding to Puerto Rico, which public health experts believe will be the most at-risk area in a Zika outbreak.

Additionally, this amendment, with the work of Senator GRAHAM and Senator LEAHY, includes \$248 million for the Department of State and USAID to support other affected countries' ability to implement programs to reduce the transmission of the virus.

This amendment is a targeted response providing the funding needed through 2017. It includes funding for priority initiatives focused on prevention, control, and treatment. It does not include funding for unessential requests.

I hope at the end of the day all Members find a way to meet this emergency. I believe the bipartisan amendment we are offering is the most likely of these amendments to meet the need. Certainly, in my view, it is the amendment that has taken the most focus on exactly what is needed to meet this crisis and meet it now.

I yield the floor.

The PRESIDING OFFICER. The Senator from Florida.

Mr. NELSON. Mr. President, I would say to the Senator from Missouri that while this Senator is most appreciative that he and Senator MURRAY have come forth in a bipartisan fashion with about half of the funding that this Senator—also in a bipartisan proposal, since my colleague from Florida, Senator RUBIO, is the sponsor of this amendment with this Senator, I would point to the Senator's own words commending the administration that they recognized that this was crisis enough to go in and borrow \$580 million from the Ebola fund to get started, since we couldn't get Congress off dead center until now.

I commend Senator BLUNT and Senator MURRAY for their action. I commend the leadership for being willing to put this on the T-HUD bill, appropriations bill, but for the Senator to suggest that he raised that point that it was such an emergency—\$589 million—but the Appropriations Committee proposal only replaces the \$589 million that has been taken from the Ebola fund. It replaces, replenishes it only with \$88 million instead of \$589 million.

By the way, the news just broke. There is another outbreak of Ebola.

This Senator is not here to talk about Ebola. This Senator is on the floor to talk about another health care medical emergency, of which there is well over 100 cases in this Senator's State of Florida. Senator RUBIO and I are desperately trying to help.

Before Senator BLUNT leaves, I wish to say one other thing. He mentioned that we need to control the vector. What does that mean? The vector is the gremlin that spreads the virus; that is, the aegypti strain of mosquito. That mosquito is now all over the southern United States, especially in Puerto Rico, and mosquito control costs money.

Mr. President, I ask unanimous consent to have printed in the RECORD a letter from one of my counties, the

Osceola County Commission, saying that they desperately need the funds as they are out of funds for mosquito control.

There being no objection, the material was ordered to be printed in the RECORD, as follows:

MAY 12, 2016.

Subject: Mosquito Control—Urgent Need for Funding
EMERGENCY FUNDING REQUEST,
Florida Department of Health Emergency
Preparedness and Response, Tallahassee,
FL.

On February 04, 2016 Governor Scott declared a state of public health emergency for four Florida counties. This public health emergency has placed Osceola County under significant financial pressure. Our program is locally funded with an annual budget of less than \$500,000 for arthropod control, so the County does not have the additional resources to address this catastrophic public health emergency.

At the time of the Governor's Declaration, Osceola already had ceased operations and gone into off-season mode. However, on February 05, 2016, local media covered the first case of Zika virus in Osceola County. Since then, the virus has expanded into several other areas and resulted in a substantial service demand increase, and the number of Zika cases is still climbing, even as resources are being depleted. Media continues to report that the positive cases are all travel-related—with Central Florida hosting more than 63 million visitors annually, and with Osceola County's predominant Hispanic demographic, we are the epicenter for this life-threatening virus.

Current staffing levels are not sufficient to meet this emergency. County resources are exhausted, and funds are not readily available to respond to this disaster. Lives are at stake.

To date, we have tried to be as creative as possible, reallocating staff and other departmental resources to respond to the public threat. We have shifted larvacide staff to go door to door, conducting Zika sweeps in response to service calls. This shifting of staff has reduced our ability to larvacide, which creates a catch-22 situation—larva not eliminated today become biting adult mosquitos tomorrow. While it's hard to predict all the potential mosquito control needs for the remainder of this year, the continuing emergency situation and citizen anxiety continues to require a heightened awareness and response.

Below is a list of currently identified funding shortfalls, with potentially more to come as the summer trap numbers rise.

Additional full-time temporary staff to perform day time sweeps and Larvacide	\$200,000
Funding for increased aerial spraying	100,000
Additional Back Pack Sprayers (5 X 1800.00)	9,000
Extra on-hand fuels, chemicals, dry ice and baits	50,000
Private contractor for Tire pile removal	250,000
5 spray trucks with mounted sprayers to increase frequency of adulticide treatments county wide	200,000
Additional funding for spray driver pool (to compensate for additional work for night-time drivers)	80,000
Total initial request	889,000

Respectfully,

DONALD FISHER,

County Manager, Osceola County BOCC.

Mr. NELSON. What Senator RUBIO and I have is an emergency appropriation of \$1.9 billion, although it is not treated that way in this appropriations bill.

The Centers for Disease Control predicts that up to 25 percent of our fellow

American citizens on the island of Puerto Rico are going to be infected by the end of the year; that is, 800,000 people just there.

Already in the United States, we have over 1,000 cases reported in 45 States; 113 of those 1,000 are in Florida. Most of them are in South Florida, Miami-Dade County. Yesterday we just had another case that brought that total to 113. Those 113 cases are spread all over the State of Florida.

The community leaders, as indicated by this letter from Osceola County, are saying they are out of funds. Help. This is an emergency. With four reported cases of the virus so far just in that county, which is near Orlando, they have determined they will need to triple their annual budget for mosquito control.

The county manager writes:

This public health emergency has placed Osceola County under significant financial pressure.

County resources are exhausted, and funds are not readily available to respond to this disaster. Lives are at stake.

Think about what the House has done—a \$600 million Zika bill. That is nowhere what we need. Such a figure is not only absurd, it is an insult to the men and women who are on the frontlines trying to battle this virus. These are local governments, such as the one I mentioned in Osceola County. We have an opportunity to respond.

This Senator understands it is already baked in the cake. Even though this proposal by Senator RUBIO and me is bipartisan, it is already baked in the cake that it is going to be the \$1.1 billion, but beware. The crisis is looming. We haven't gotten an effective method for controlling the mosquito. We do not have a vaccine. All of these things take time, they take money, and it is going to need research. There is \$277 million in this proposal that Senator RUBIO and I think needs to go to the National Institutes of Health to accelerate their research for a vaccine and other basic research.

When you compare the two competing provisions out here today—the committee position and ours—going to Puerto Rico, ours is \$250 million. That island is devastated—\$250 million for Medicaid funds. What is in the committee report is \$126 million—half.

For example, take the \$743 million in our proposal for the CDC, the Centers for Disease Control. In the committee, there is \$449 million. Overall, take the funding to HHS. There is \$105 billion in ours and roughly half, \$850 million, in the committee provision.

I think we should not nickel-and-dime our response to what the World Health Organization has said and already declared a public health emergency of international concern. The urgency is now and we ought to do the right thing.

I conclude by staying we have the Olympics in a few months in Rio. Brazil is covered with Zika infestation and infection. Remember, it cannot

only be transmitted by the mosquito, the aegypti, but it can also be transmitted sexually.

Also, remember the doctors do not know—other than to suspect that it can be transmitted to the pregnant woman any time during the 9 months of pregnancy and it may not show up in the infant until years later in some developmental issue. They do know that in the first trimester of pregnancy, the infected virus is producing the babies with microcephaly. Such a case was just reported with an infected pregnant woman in Puerto Rico.

We have not heard the last of this, and you are going to see it magnified with regard to the Olympics. Sooner or later we are going to have to face the music. It looks like we are going to face the music with about half of the appropriation today. Ultimately, this is a full-blown emergency.

I yield the floor.

The PRESIDING OFFICER. The Senator from Delaware.

Mr. CARPER. Mr. President, while our colleague from Florida is on the floor, I thank him for being a loud and vocal proponent and for taking swift action. I thank the Senator for leading the fight.

Mr. NELSON. I thank the Senator for his support because he recognizes the emergency.

Mr. CARPER. Mr. President, I rise in support of emergency supplemental funding for Federal efforts to combat the impending threat of the Zika virus.

Reports of the spread of this virus are concerning. Actually, they are troubling, not just for public health officials but for many Americans who are reading about it in the paper and seeing coverage of it in the news almost by the hour. Families are reconsidering vacations they had planned, especially to more tropical locations.

As we approach the mosquito season, people are understandably worried about how this outbreak will affect them and their families, not just to go on a vacation and camping but literally to go outside and have a cookout or eat out on the porch.

We need to continue working to fully understand and combat the health risks that are posed by Zika. Just like our response to Ebola, our response to Zika must be an all-hands-on-deck effort.

In February, President Obama submitted a \$1.9 billion emergency supplemental funding request to Congress to bolster programs and activities which would curb the spread of this virus. Given the real threat posed by Zika, I support the funding level requested by the President. I intend to vote for the amendment offered by our colleague from Florida, Senator NELSON, which would fully fund this request.

With that being said, I understand that a bipartisan agreement on funding has been reached between Senator BLUNT and Senator MURRAY, which would provide \$1.1 billion toward the Zika effort. I appreciate their hard

work in negotiating this language. I am going to support their amendment as well so our Nation's public health officials can take all necessary actions to combat the spread of this virus.

As we have heard, the Zika virus has spread explosively throughout Central America and South America. In fact, it has already reached Puerto Rico, other U.S. territories, and is expected to spread further north as the weather continues to warm.

Researchers have learned much about this virus in just the last couple of months. Their findings are indeed troubling.

Last month the Centers for Disease Control and Prevention announced there is now enough scientific evidence to confirm what many have long speculated—the Zika virus is the direct cause of severe birth defects.

Further complicating matters, it now appears that the mosquito primarily responsible for transmitting the virus has a wider presence in the United States than we had originally thought.

I have two maps. We will look at the first one.

The blue color is not good. Orange is less dangerous, less threatening in terms of the mosquitoes. The combination of the blue and the orange is troubling. If you look at the combination of blue and orange, it means that the two most worrisome mosquitoes are going to be covering the southern half of our country this summer.

The areas to the northeast and the Midwest, to the northern part, are somewhat less troubling, but my State of Delaware is right here.

Arizona, the State of the Presiding Officer, is right over here. Senator NELSON's State is right here. The only person on the floor whose State looks like they are going to escape is Maine. Senator COLLINS is here. Maybe she is in the clear, but she is here to help lead the fight to make sure we are all in this together and we are looking out for each other.

I wish to show another map. Major cities across the East Coast, including in the District of Columbia, could be hit hard by the Zika virus.

With mosquito season upon us and with more than 500 travel-related cases already diagnosed within the continental United States, we must be prepared for the possibility of outbreaks in some parts of this country. That is why I was glad to see President Obama and his administration take an early and proactive role in addressing Zika. Some of the actions already undertaken by Federal agencies include assisting State and local governments in mosquito-control efforts and ensuring that local health officials have the equipment they need to test people for this disease.

We also know that promising advances are being made in medical countermeasures and vaccine development. To date, these efforts have required the transfer of resources from other priorities, as we know, including Ebola.

Last month the Obama administration announced it would redirect, on an interim basis, almost \$600 million from other public health accounts to pay for Zika-related activities. I believe the President made the right call in light of the circumstances and the dire threat that is posed by the Zika virus.

Now, however, it is time for this Congress to do our job. It is my hope that we can come together in passing an amendment offered by our colleague from Florida, Senator NELSON. However, if we are unable to fully fund the President's request, I believe the funding provided by the Blunt-Murray amendment will go a long way toward supporting the many efforts currently being undertaken by the administration to combat Zika. I urge my colleagues to join me in providing the funding needed to stop the spread of the Zika virus.

Mr. President, I will close with this: When the President gave his State of the Union speech—I think right after the 2014 election—he had up in the Gallery sitting next to Mrs. Obama some of the folks who helped lead the fight against Ebola in Africa. There were doctors, nurses, and other people who developed vaccines and that type of thing. It was a proud moment for our country about 3 months after the election, the early part of 2015.

We were not directly threatened here by Ebola. They lost 40,000 people in Africa, in the western part of Africa. For the most part, there were a lot of scare tactics about Ebola used in the runup to the election here in this country, but the actual threat, in hindsight, was not that great.

What we did was we reached across the world and we invested a lot of taxpayer resources to help people who were in a terrible situation. We helped save literally hundreds of thousands of lives—their lives; not so much our lives but their lives. This is different. This is different. What we have at stake here is our lives and the quality of our lives and the ability of women to bring healthy babies into this world. It is not just us, it is our friends to the south of us in Mexico, Central America, South America, the islands of Puerto Rico and Cuba. We are all in this together.

This is an all-hands-on-deck moment, and we need a good team effort. The Senate is going to vote today on whether we are going to be a full partner in that effort, and we need to be that full partner. We need to do our job. And this is one of those days that I am confident and hopeful that we will.

Mr. President, I yield the floor. I note the presence of the Senator from Hawaii, which hopefully will not be affected by this virus. I am happy to yield to her.

I thank the Chair.

The PRESIDING OFFICER. The Senator from Hawaii.

Ms. HIRONO. Mr. President, our Nation is facing a serious threat to public health. The Zika virus has the potential to be a major public health crisis.

According to the Centers for Disease Control, there are over 500 cases in the United States, including 9 in Hawaii. Currently, all of these cases are travel-related. There are 700 cases in U.S. territories, almost all of which were locally acquired. Summer, which is the peak travel season and peak mosquito season, is almost upon us. Every year, 40 million Americans travel to Zika-affected countries. It is just a matter of time before the threat of locally transmitted Zika becomes a reality in the United States.

Although the President sent his emergency funding request to fight Zika to Congress more than 3 months ago, I am glad to see Democrats and Republicans coming together now to prevent a major U.S. Zika outbreak. Public health experts at the Centers for Disease Control, Department of Health and Human Services, and elsewhere in the administration have said that \$1.9 billion is needed to fight the Zika virus.

During the Senate's last State work period, I met with Hawaii researchers and health care providers, who agreed that we need this Federal funding to get ahead of Zika. This funding would go toward our vector-control programs, education, and vaccine development.

I visited a Hawaii company—Hawaii Biotech—that is working on a Zika vaccine. This company has a proven track record in developing vaccines. Hawaii Biotech has spent months working to develop a Zika vaccine using private funding. At this critical point of vaccine development, Dr. Elliott Parks and his team at Hawaii Biotech agree that a public infusion of funds will help them get over the finish line.

I also had the opportunity to visit with Governor David Ige, the Hawaii director of health, and health care providers. They all shared one message: that Federal funding is critical to getting ahead of a widespread Zika outbreak.

The funding we are voting on today could help companies like Hawaii Biotech develop a much needed Zika vaccine. It would help States like mine increase mosquito control and awareness on Zika.

Zika is not the benign virus we once thought it was, and funding only becomes more urgent as we learn about its harmful effects. Zika poses an imminent threat to pregnant women and, in reality, to all women of childbearing age. By now, we have all seen the harmful impacts Zika has on babies. The images and reports of babies born with microcephaly are heartbreaking. Zika can threaten our Nation's supply of donated blood. While blood banks across the country are working on methods to clean and test blood, they need funding to accelerate their research.

Congress can take steps to ensure the safety and well-being of all citizens. We can be proactive, not reactive, to impending threats such as Zika.

The Federal Government should play a leading role in coordinating and assisting local and State governments with mosquito control and supporting the latest research, much as we stepped up with Federal support when confronted with Ebola and avian flu.

While there are three Zika funding measures before us today, I strongly urge my colleagues to join me in voting yes on Senator NELSON's amendment to fully fund the President's request at \$1.9 billion.

Mr. President, I yield the floor.

The PRESIDING OFFICER. The Senator from Hawaii.

Mr. SCHATZ. Mr. President, what we do next on Zika is not an ideological test; it is a test of our basic competence. It has nothing to do with one's views on the size and scope of the Federal Government because, after all, if you believe the government should do even just a few things, preventing a catastrophic epidemic has to be one of them.

Zika is a public health emergency, and we have to act now to fund \$1.9 billion in supplemental funding to address it, as requested by the public health experts.

I congratulate Senators NELSON, RUBIO, BLUNT, and MURRAY for working across the aisle to reach these agreements, and I would especially like to offer my support for the Nelson-Rubio \$1.9 billion compromise. The Nelson-Rubio amendment provides the full \$1.9 billion in Zika funding through the following: approximately \$743 million for the CDC, \$277 million for NIH, \$335 million for USAID, and \$417 million for the State Department. And here is an important aspect of it: It also pays back the borrowed Ebola money that we need to ensure that countries stay prepared to prevent another Ebola crisis.

There are a few proposals to pay for this, but I want to make the following point: This is an emergency. It fits the definition precisely, and so it shouldn't require a so-called pay-for.

I would like to say something to the Members who have rediscovered their fiscal conservatism. Remember that we just passed a \$622 billion tax subsidy package last December, and none of it was paid for—more than half a trillion dollars not paid for—and 5 months later we are nickeling-and-diming the Centers for Disease Control.

I recently visited CDC headquarters in Atlanta to learn more about their efforts to combat Zika, dengue, and other vector-borne diseases. I have total confidence in the CDC's ability to respond to challenges like Zika, but we have to give them the strongest funding possible to make sure they can do their good work. And taking money away from the Prevention and Public Health Fund will strip CDC and other important agencies of the funds they need to protect our country from within and from without.

It is fair to say that this is a Congress that has struggled to do its job. And even when it stumbles through a

solution such as this, it sometimes creates a new set of problems. So far in addressing Zika, we have forced the administration to pull money from the CDC for Ebola or from States to address public health risks. If you want to find savings, there are plenty to be had in the Tax Code, including the more than half a trillion dollar package that was passed in December, and not a penny was paid for. There was \$622 billion in tax subsidies—some great things in there, some questionable things in there—and not a penny of it was accounted for and paid for properly.

Regardless of your side of the aisle, we can all agree that this is the one thing the government ought to do: keep us safe.

Thank you to Senator RUBIO and others for their calls to make Zika funding nonpartisan. Investing in the CDC and other agencies will protect our citizens from horrific diseases and shouldn't depend on your philosophy regarding the size and scope of the Federal Government.

Let's do our job. Let's keep the people of the United States safe. Let's fund this emergency for Zika and keep us safe from Ebola and other dangerous diseases.

Mr. President, I yield the floor.

Mrs. FEINSTEIN. Mr. President, today I wish to speak about the urgent need for Congress to approve emergency funds to fight the Zika virus.

The Zika virus is a rapidly growing public health threat, and the stakes for women are particularly high. I strongly believe Congress should approve the full \$1.9 billion requested by the administration to fight the virus. Investing the required resources now will mean fewer cases of Zika down the road.

The virus is carried by two species of mosquito. They are found in 40 States in this country. These mosquitos have been found in 12 counties in California, including the five most populous: Los Angeles, San Diego, Orange, Riverside, and San Bernardino. More than 20 million people live in these counties.

There have been 503 travel-related cases in the United States so far, meaning an individual was infected during a trip to Latin America, South America, or the Caribbean, where the virus is widespread.

There have not yet been any reported cases of local transmission in the continental United States, although more than 700 cases have been reported in U.S. territories, including one fatality on April 29. It is only a matter of when, not if, we see the first case of local transmission, particularly as we approach the summer, when mosquitos are most active. By July, 7 States are expected to see high mosquito activity.

While scientists are still working to understand the effects of the Zika virus, they are more serious than we initially thought. Zika causes severe, brain-related birth defects in babies when women are infected during pregnancy.

Microcephaly, one of the most serious effects of Zika, causes babies' heads to be much smaller than normal. In severe cases, you will also see seizures, developmental delays, intellectual disabilities, feeding problems, and hearing and vision loss.

The Centers for Disease Control and Prevention continues to research the virus, and it could be several years before the full range of health effects is known.

The most common way people contract Zika virus is through mosquito bites, but there have been documented cases of the virus being spread from men to women through sexual contact. Scientists now believe sexual transmission is more common than initially thought.

Zika symptoms are mild—fever, rash, and joint pain—meaning that many people may become infected and spread with disease without knowing they have it. Unless we act now, we could end up with a significant number of Zika carriers who don't know they are infected.

As I mentioned previously, the administration has asked Congress for \$1.9 billion in emergency funding to stop the spread of the Zika virus. Senator NELSON introduced a bill, which I have cosponsored, to provide the full \$1.9 billion. Senator NELSON and Senator RUBIO have also introduced an amendment to the bill currently under consideration to provide the full \$1.9 billion. Last week, an agreement was reached between Senators MURRAY and BLUNT on an amendment that would provide \$1.1 billion in funding.

I applaud their efforts and know they worked hard to come to agreement on a package that could get broad bipartisan support. The Federal Government will use these funds for a number of prevention and mitigation activities, including controlling mosquito populations, researching and testing for the virus, educating the public, and developing a vaccine.

However, I think it is important to highlight what we are losing by funding the Zika response at \$1.1 billion and not \$1.9 billion. Reduced funding now will hinder our response in a number of ways.

It will be harder to address Zika in the future, with a potentially higher cost. Notably, the Centers for Disease Control and Prevention will receive nearly \$300 million less. The National Institutes of Health will receive \$77 million less. The Health and Human Services Emergency Fund will receive \$83 million less. This means that testing may not be as widely available as it should be, and developing a vaccine may take longer.

There is also \$114 million less to fight Zika abroad. We live in a global society. To prevent the spread of Zika virus, we must fight the disease where it is, not wait for it to come here.

It's also important to note that we can't launch prevention and mitigation activities overnight. It takes time to

address mosquito populations and distribute testing kits. If we don't approve the necessary funds now and Zika spreads, funds approved later may not be as effective.

Past is prologue, and we have seen the effects of similar health crises. I remember when rubella was widespread in the United States before a vaccine was available. This is also a disease with mild symptoms. It spread easily and was particularly dangerous for pregnant women and their babies.

The rubella vaccination campaign in 1969 was critical to stopping this disease, which infected 12.5 million people from 1964–1965. In 2004, the United States was declared rubella-free. We're down to an average of 11 travel-related cases per year.

The point is we know enough about the Zika virus to understand that it is a serious threat. We also know from history how important it is to address public health threats as early as possible. This is especially important when the virus is carried by an insect as common as mosquitoes and the initial symptoms of the disease are mild or even undetectable.

In closing, Congress cannot afford to delay. I strongly urge the Senate to approve the administration's sensible request to fight this growing public health threat. Thank you.

Mrs. BOXER. Mr. President, today I wish to speak in opposition to Senator CORNYN's amendment. This amendment eliminates protections under the Clean Water Act related to spraying pesticides into the Nation's rivers, streams, and lakes to control mosquitoes.

Pesticide pollution is a significant problem and a major contributor to poor water quality in our Nation's water bodies. According to the Environmental Protection Agency, more than 1,800 waterways in the U.S. are known to be polluted by pesticides, and many more may be polluted but are not monitored. We know that pesticides harm fish and wildlife and are linked to a wide range of damaging human health impacts, including cancer and harm to pregnant women, infants, and children.

Exempting pesticide spraying from the Clean Water Act is completely unnecessary to control the spread of mosquitoes to address the Zika virus. In 2011, EPA issued a streamlined Clean Water Act general permit, which allows operators to get one permit for up to 5 years. The permit requires simple management techniques and reporting to protect water quality, fish and wildlife habitat, swimming, and recreational uses.

Most mosquito control districts around the country already have authorization to spray pesticides to control mosquitoes under this existing pesticide permit. In addition, EPA's permit includes provisions to allow immediate spraying to address public health emergencies. If a local government is not currently authorized to

spray under EPA's permit and a pest emergency is declared at the local, State, or Federal level, pesticides can be immediately sprayed to address the health concerns without approval by EPA or a State.

In the case of Zika, States or local governments can declare a pest emergency under the general permit in areas where they believe Zika-carrying mosquitos may be a problem, and they can immediately begin spraying pesticides to control the spread of the virus.

These requirements are a common-sense approach to ensure gallons of excess pesticides are not dumped into our waters, and they provide sufficient flexibility to address public health threats, such as Zika.

The Cornyn amendment is not about improving the response to Zika. It is a backdoor attempt to gut the Clean Water Act, one of our Nation's bedrock environmental laws.

I urge my colleagues to oppose the Cornyn amendment and help keep our waterways clean.

The PRESIDING OFFICER. The Senator from Maine.

AMENDMENT NO. 3922, AS MODIFIED

Ms. COLLINS. Mr. President, I ask unanimous consent that notwithstanding the adoption of the Feinstein-Portman amendment No. 3922 that it be modified with the changes at the desk.

The PRESIDING OFFICER. Is there objection?

Without objection, it is so ordered.

The amendment, as modified, is as follows:

At the appropriate place in title II of division A, insert the following:

SEC. _____. Section 218(g) of the Cranston-Gonzalez National Affordable Housing Act (42 U.S.C. 12748(g)) shall not apply with respect to the right of a jurisdiction to draw funds from its HOME Investment Trust Fund that otherwise expired or would expire in 2016, 2017, 2018, or 2019 under that section.

Ms. COLLINS. I thank the Chair.

The PRESIDING OFFICER (Mr. PERDUE. The majority whip.

Mr. CORNYN. Mr. President, shortly the Senate will vote on three different versions of appropriations bills that will provide the needed money to help combat the anticipated challenges we are going to have with the Zika virus, which we have talked a lot about. Obviously, Zika is a threat, particularly to women of childbearing age because of the horrific birth defects associated with it, most prominently microcephaly, or basically a skull that is smaller than normal, leading to premature death and, obviously, horrific injuries.

There is bipartisan support for this legislation.

First of all, we will have a chance to vote on the President's request of \$1.9 billion. The biggest objection I have to that \$1.9 billion is that it really doesn't come with a plan that says how the President will spend that money. It also is not paid for. As the Presiding

Officer well knows, we have a huge national debt, and there is no reason to just gratuitously rack up more debt in order to deal with this public health concern.

There is a second vote we will have on a \$1.1 billion appropriations bill. This is the product of the good work done by Senator ROY BLUNT of Missouri and Senator PATTY MURRAY of Washington. They have cut down the President's request from \$1.9 billion to \$1.1 billion, and they believe this will fund the needed work not only of this fiscal year but into the next fiscal year as well. That is also not offset or paid for, and I think that is a problem.

First of all, the House has proposed a roughly \$600 million bill that is fully offset, so we are going to have some differences between the House and the Senate over how we address the Zika virus challenge.

The third is a piece of legislation I have offered that I would certainly ask my colleagues to support. This is fully offset out of something called the Prevention and Public Health Fund that was created by the Affordable Care Act. So there is money in the Treasury now that could help pay for the \$1.1 billion. I should say that about \$900 million of it could be paid for now, and by next year there will be more money put into this Prevention and Public Health Fund.

As we can see, the Affordable Care Act provides that. This Prevention and Public Health Fund is "to provide for expanded and sustained national investment in prevention and public health programs." I can't imagine any more urgent public health program or one that we should be looking to prevent more than this particular threat, the Zika virus.

I would point out that the Prevention and Public Health Fund has been used to fund some things—many good things, some which I think are questionable, like promoting free pet neutering, encouraging urban gardening, and boosting bicycle clubs. Certainly, prevention of these horrific birth defects and the threat of the Zika virus spreading through the continental United States and its impact on our population is more important than these.

So I ask my colleagues, please, let's deal with this threat in the responsible way that we all agree we should, but let's do so in a fiscally responsible way as well. There is no reason to gratuitously add to the deficit and the debt. We can do this in a responsible way from a public health standpoint and fiscally as well.

Mr. President, I know the Senator from New York, Mr. SCHUMER, is coming to the floor at noon, and we are going to present a matter for the Senate's consideration. I don't see him here yet, but I am told he is on his way. So let me turn to that topic, and I know Senator SCHUMER will be here momentarily.

JUSTICE AGAINST SPONSORS OF TERRORISM ACT

Mr. CORNYN. Mr. President, all of us remember the horrible events of September 11 and the grief and pain so many people went through in New York. Roughly 3,000 people lost their lives. Obviously, the family members have not forgotten that, and the Nation hasn't forgotten their loss either.

The Senator from New York, Mr. SCHUMER, and I have introduced legislation called the Justice Against Sponsors of Terrorism Act. This is bipartisan legislation which would enable Americans and their family members who lost loved ones on that horrible day to pursue their claims for justice against those who sponsored those acts of terrorism on U.S. homeland.

This bill was reported out of the Senate Judiciary Committee without objection, and similar legislation passed the Senate unanimously last Congress. I believe that kind of unanimous support sends a clear message: that we will combat terrorism with every tool we have available and that the victims of terrorist attacks in our country should have every means at their disposal to seek justice.

I am grateful for the work of the Senator from New York, Mr. SCHUMER, in introducing this bill along with me and Chairman GRASSLEY for shepherding it through the Senate Judiciary Committee. I also appreciate the support of a large bipartisan group of like-minded Senators in this Chamber. We worked with a number of Senators, including the Senator from Alabama and the Senator from South Carolina, who expressed concerns about earlier versions of the legislation. I appreciate their willingness to work with us to deal with their concerns in a way that now has gained their support.

This legislation amends the Foreign Sovereign Immunities Act passed in 1976. So we already have a piece of legislation on the books that waives sovereign immunity under some circumstances, but the problem is that it does not extend to terrorist attacks on our homeland by countries and organizations that have not already been designated as state sponsors of terrorism. This makes some small changes in that legislation that first passed in 1976 to expand the scope of that to allow the families of the 9/11 tragedy to seek justice in our courts of law.

Mr. President, there are some aspects of the bill that I would like to discuss in particular, and to that effect I would like to enter into a colloquy with my friend on a number of points.

Senators SESSIONS and GRAHAM had expressed concern that earlier versions of this legislation might be interpreted to derogate too far from traditional principles of foreign sovereign immunity and put the United States at risk of being sued for our operations abroad. We worked extensively with them on this issue.

To alleviate the concerns they raised, the substitute amendment to S. 2040

narrowly tailors the immunity exception in several ways.

First, it is limited—like the Foreign Sovereign Immunity Act's "tort exception"—to physical injury "occurring in the United States." The act of international terrorism that causes the injury must also take place "in the United States."

This focus on U.S. territory avoids the issues raised by the State Department regarding section 1605A, the "State Sponsor of Terrorism" exception to the FSIA passed decades ago by Congress. Section 1605A permits jurisdiction over acts that occur anywhere, but is limited to certain states.

Second, jurisdiction can only be predicated on acts of terrorism and not on acts of war, as both terms are defined under the Anti-Terrorism Act.

Third, the injury must be "caused by" the tortious act or acts of the foreign state. This language, which requires a showing of jurisdictional causation, is drawn from decisions of Federal courts interpreting section 1605A. Courts interpreting new section 1605B should look to cases like *Kilburn*, *Rux*, and *Owens*, the analysis of which we intend to incorporate here.

Finally, this new version adopts the language of 1605A regarding the conduct of officials, employees, and agents of foreign states. This language incorporates traditional principles of vicarious liability and attribution, including doctrines such as respondeat superior, agency, and secondary liability.

Mr. SCHUMER. I thank the Senator from Texas.

My friend the senior Senator from Texas is exactly right: we have made several changes to the bill since the last time it was introduced—and passed—to make it as narrow and targeted as possible.

I join him in thanking Senators SESSIONS and GRAHAM for working with us to strike the right balance.

I have two points on this.

Congress addressed terrorism under the FSIA decades ago, in what became section 1605A, the exception for "state sponsors of terrorism." I want to make clear that JASTA is responding to a very specific issue about terrorism on U.S. soil. It is not our intent to imply anything about other areas of law. Other provisions of this statute allowing victims of terror to sue foreign governments for acts of international terrorism have a longstanding jurisprudence that JASTA is not meant to alter.

The new version of the legislation also includes an important new tool for the executive branch to address litigation against a foreign sovereign under section 1605B.

Section 5 allows the Department of Justice to seek a stay of the litigation—including related cases, not against the foreign state itself—if the government certifies that it is involved in good-faith discussions to resolve the matter. This stay can be extended.

Of course, if the administration seeks to use this new authority, it should be