

Now, people go to the marketplace and they have lots of choices. That is why we have 20 million more people who have health insurance now who didn't have it before. There are many examples, but my friend the Republican leader just ignores them. Preexisting conditions—think about that. Prior to ObamaCare, if you had a child who was born with a birth defect of some kind, if you had a child that developed diabetes, or if you were an adult who might have had a car accident, or you were a woman—a woman—who had a pre-existing condition, you had to pay more for your health insurance, if you could get some.

Everyone seems to ignore the good that has come from ObamaCare. Eighty-five percent of the people in the marketplaces get financial assistance in buying their coverage. After assistance, people are paying an average of \$175 a month for their health insurance.

So ObamaCare is a signature issue of the Obama administration. As he announced yesterday, he is very happy with what ObamaCare has done for the American people, and it should be made better. It could be made better so easily if we could have a little bit of cooperation from the Republicans—a little bit. But we are going to continue focusing on making sure that people understand how well it has worked.

CONTINUING RESOLUTION

Mr. REID. Mr. President, last evening at 4 o'clock or thereabouts, I had the opportunity to go to the White House and visit with the President, along with Leader McCONNELL, Speaker RYAN, and Leader PELOSI. We met for about 1 hour and 15 minutes. It was a very good meeting. We had to discuss a number of issues. We discussed a lot, but I will not talk about them all today.

There was a discussion about a path forward to fund the government to prevent a government shutdown—in spite of what the Wall Street Journal said today. The Wall Street Journal said in an editorial that the Republicans should just close the government again. I don't think there are many Republicans who agree with the Wall Street Journal editorial.

There is reason for some very, very cautious optimism about our meeting last night. We are going to proceed carefully. I know the Republicans will do the same. We have been down this road with the Republicans before. Happy talk is just that a lot of times. We have been optimistic in the past only to see the Republicans fail to live up to their end of the agreement.

If we are going to pass a CR that keeps our government open and funded, there are a number of problems that must be addressed. We have to stop ignoring the problems with Zika. This has been a problem, according to the President of the United States, since last February. We have done nothing to

give these people some relief, and they need it. We thought that it was just a problem that affected women and pregnant women, but it has gotten so much more serious than that. That is plenty serious. But now they are looking at the virus going into people's eyes and causing vision impairment, blindness. That is men and women. So we have to get something done with Zika. We thought we had it all done here with the work done by Senators MURRAY and BLUNT. We had a bill. It wasn't everything we wanted, and it certainly wasn't what the President wanted. It was \$1.1 billion. We sent it to the House. We don't need to go through what gymnastics they went through to throw a big monkey wrench into the good work we had done over here by passing it with 89 bipartisan votes.

Last week there were 17,000 Americans infected with Zika. We are told by the Centers for Disease Control that there are now 19,000. That is a 13-percent increase in 7 days, and each day it is only going to get worse. We need to treat the Zika virus like the genuine health crisis it is, not a bargaining chip for Republicans to use to attack Planned Parenthood, fly the Confederate flag, cut veterans spending by half a billion dollars, and other such things they stuck in the bill that came back from the House.

We want to work with the Republicans to secure Zika funding, but we will flatly reject any attempt to undermine women's health.

Once we have taken care of Zika, we must, then, as a Senate address Republicans' issues dealing with the continuing resolution, including riders dealing with the Environmental Protection Agency. They want to weaken the Clean Water Act by exempting pesticide spraying from the EPA's over-seeing what goes on there.

We need to find a way forward on both of these important issues, while trying to navigate Senator CRUZ's attempts to slow down the CR. Unfortunately, this is what we have come to expect from my friend, the junior Senator from Texas. This is his shtick. Whenever the Senate has a deadline, he tries to obstruct government funding bills.

So we have our work cut out for us. I am cautiously optimistic the Senate will complete its work on the funding of Zika and the CR. We can do it, but it can only happen if we work together and resolve these important topics.

Mr. President, I ask the Chair to announce the business of the day.

RESERVATION OF LEADER TIME

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

WATER RESOURCES DEVELOPMENT ACT OF 2016

The PRESIDING OFFICER. Under the previous order, the Senate will re-

sume consideration of S. 2848, which the clerk will report.

The senior assistant legislative clerk read as follows:

A bill (S. 2848) to provide for the conservation and development of water and related resources, to authorize the Secretary of the Army to construct various projects for improvements to rivers and harbors of the United States, and for other purposes.

Pending:

McConnell (for Inhofe) amendment No. 4979, in the nature of a substitute.

Inhofe amendment No. 4980 (to amendment No. 4979), to make a technical correction.

The PRESIDING OFFICER. The assistant Republican leader.

CIVILITY

Mr. CORNYN. Mr. President, while the Democratic leader is still on the floor, let me express my gratitude to him for his remarks earlier. It is true that for better or for worse, we both have to bear the burden of legal training and experience in courtrooms where we learned that adversaries don't necessarily have to be enemies and to disassociate the arguments we are making from any personal animus or animosity, which, I think, is a very healthy and constructive thing to do. I always remember the excerpt from "The Taming of the Shrew" where one of the speakers said: "Do as adversaries in law; strive mightily, but eat and drink as friends."

So I think that kind of civility is an important admonition for all of us. It is one that maybe we don't always live up to but one that I think we should continue to strive to emulate.

So let me just say to the Democratic leader that I appreciate his comments and perhaps we can all do a little bit better in that category.

OBAMACARE

As the minority leader also pointed out, we have some very big disagreements. It seems as though each day is likely to bring more news about the awful side effects of President Obama's signature health care legislation, ObamaCare, as it has come to be called. The truth is that the implementation and the reality of ObamaCare has been nothing short of a disaster for many of the people who I represent in Texas, but it is not limited to the 27 million people or so who live in Texas. The problem has been visited on many people, as the majority leader commented about earlier with some of the statements he made with regard to its implementation in various other States.

Unfortunately, when Congress and Washington make a mistake, it is the American people who have to pay the price, and it seems as though the consequences of ObamaCare are only getting worse.

I think it is worth remembering—I certainly remember—that it was on Christmas Eve in 2009, at 7 o'clock in the morning, when the Senate passed the ObamaCare legislation with 60 Democrats voting in favor of it and all Republicans voting against it. I think that was the beginning of the failure of

ObamaCare. What our Democratic friends, including the President, failed to learn is that any time signature legislation that affects one-sixth of the economy and every American in this country—any time we pass a law like that, in the absence of some political consensus where each side gets something and gives up something and that builds consensus, then that law is simply not going to be sustainable, beyond the policy problems the law has obviously manifested.

I still remember as if it were yesterday, when the President said: If you like your doctor, you can keep your doctor. He said: If you like your policy, you can keep your policy. He said that the average family of four would save \$2,500 on their health care costs. None of that has proven to be true. In fact, just the opposite is true. That is, unfortunately, part of the legacy of the broken promises of ObamaCare. It was essentially sold under false pretenses.

Back in my old job, before I came to the Senate, I was attorney general of Texas, and we had a consumer protection division that sued people who committed consumer fraud, who represented one thing to consumers and delivered another. We sued them for consumer fraud. Unfortunately, the American people can't sue the Federal Government for consumer fraud. They would have a pretty good case because of the trail of broken promises known as ObamaCare.

I just want to point out a few instances of how ObamaCare has proven to be such a disaster for the folks I represent in Texas.

Under the so-called Affordable Care Act—which really should be called the un-Affordable Care Act—many of my constituents in Texas are paying more for their insurance. Of course many remember the PR campaign the President and his administration rolled out to the American people. He promised better coverage, more choices, and lower prices. The one component we would think health care reform would deliver and that ObamaCare has been a complete failure on is lower costs for consumers. In fact, because of the mandates in ObamaCare, such as guaranteed issue—which is an arcane topic, but because of the way it was structured, it was bound to cost more money, not less—how in the world are we going to get more people covered by charging them more than they currently pay for their health care? We are not, unless we are going to come in the back door and use taxpayer subsidies to sort of cushion the blow, but even then, many people are finding ObamaCare simply unaffordable or maybe they can get coverage, but they find out they have a \$5,000 deductible. So when they go to the hospital or when they go to the doctor, while they may think they have coverage, they basically are self-insured.

Unfortunately, my constituents have learned that ObamaCare has simply failed to deliver. Many people in my

State are suffering. Over the past 2 months, it seems as though every week I read another headline in the Texas newspaper about the way it is hurting my constituents. I brought a few of those with me today.

First of all, here is the headline in the San Antonio Express-News: "Obamacare hitting Texas hard as insurers propose steep rate increases." One might say: Why are you upset with ObamaCare when it is the insurance companies that are raising rates? The reason the insurance companies are raising rates is because people aren't signing up for ObamaCare if they can avoid it, unless they happen to be older and subject to more illnesses, which means the cost goes up for those who are buying those policies.

The article talks about how insurance companies are losing hundreds of millions of dollars under ObamaCare. Again, why would we care about insurance companies losing hundreds of millions of dollars? As we found out, many of them simply can't sustain themselves in the States so they are leaving. The majority leader talked about that a moment ago. Just to make ObamaCare viable, many of them are raising premiums by as much as 60 percent next year, just to stay in business.

Unfortunately, Texas is not unique. Other States such as New York and Illinois are looking at double-digit premium increases in 2017 as well. That is because, under the President's signature health care law, insurers are forced to pass along higher costs to customers. If they can't do it, their only other choice is to leave, leaving consumers with fewer choices and maybe only one choice in a State. That happens when the government—when the masters of the universe in Washington, DC,—think they know better than the market. It is basic economics.

The bad headlines don't stop there. Here is one from the Austin American-Statesman: "Thousands affected in Texas as Aetna rolls back Obamacare plans." Aetna alone has more than 80,000 customers in Texas. It is one of the biggest health care providers in the country. Their leaving means that thousands of people will have to find a new health care plan. So much for "if you like what you have, you can keep it," assuming they have a plan they liked, which now is more expensive than what many were paying before ObamaCare was passed. Again, it is not just my constituents in Texas who are hurting. Starting next year, Aetna will offer plans in only 4 States—4 States—down from the current 15. So consumers will have even fewer choices starting next year.

Aetna wasn't the only company to leave the State. This poster shows the headline from the Waco Tribune-Herald. Scott & White is one of our premier hospitals and health care systems in central Texas. The headline says: "Scott & White Health Plan leaving Obamacare." According to the article, more than 44,000 Texans will have to

find another insurance plan in 2017. Again, because of the extra costs burdening these companies, they simply can't afford to offer coverage, and they have no alternative but to pack up and leave.

Finally, here is a headline from the Texas Tribune: "Health Insurers' Exit Spells Trouble for Obamacare in Texas." In this story, the Tribune reports that in addition to Scott & White and Aetna, an insurance startup called Oscar Insurance also announced it would withdraw from Texas exchanges in the Dallas-Fort Worth area. The Dallas-Fort Worth area is one of the most populous parts of the State. This is absolutely unacceptable. With so many insurance companies pulling out of Texas, Texans will have less health care options, plain and simple.

I am beginning to wonder whether the conspiracy theories we heard early on about ObamaCare, that it was built to fail because what the advocates wanted is a single-payer, government-run system, and this was just a predicate or prelude to that because it could not work as structured. We can draw our own conclusions, but, the fact is, consumers will have less choice and their health care coverage comes at a higher price.

According to one estimate, 60 counties out of 254 counties in Texas will have just one option in 2017 unless other insurance companies decide to enter the market, which is highly unlikely given the way ObamaCare is structured. That means prices will continue to go up. And you wonder why people are frustrated in America, why our politics seem too polarized, and why people seem so angry at what is happening in Washington? At a time when their wages have remained flat because of this administration's economic policies—and overregulation being a large part of it—the costs for consumers continue to go up. That means people's real disposable income is going down, and they are not happy about it—and they shouldn't be.

Texas is a big State. We have very highly populated areas like the Metroplex in Dallas-Fort Worth and Houston and Austin, but we are a big rural State as well. People who live outside of the major cities are the very demographic that ObamaCare was supposed to help, but they will be disproportionately hurt as fewer companies are able to offer insurance away from major population centers. Company after company is packing up and leaving the exchanges in Texas because ObamaCare simply will not work as structured. It can't deliver on its promises. At the end of the day, hard-working Texas families have to pay for the partisan policies of this administration and our Democratic colleagues who jammed this through Congress rather than trying to build some consensus, on a bipartisan basis, that would make this sustainable.

I remember being at a program where James Baker III, who obviously served

in the Reagan administration, and Joe Califano, former Secretary of Health and Human Services—a Democrat who served in the Carter administration, a Democratic administration—made the commonsense observation that any time you pass legislation as big as ObamaCare, it is bound to fail because you can't expect people who opposed the legislation from the very beginning to say: Let me try to rescue you from a bad decision in the first place, when they were essentially frozen out of the process.

For example, when Social Security became the law, consensus was reached, and that is the way it should be done. Unfortunately, my constituents in Texas and the American people are paying the price for a bad decision made in 2009 and 2010 to make ObamaCare a purely partisan piece of legislation.

I get letters from my constituents all the time who liked their insurance before it was cancelled because of ObamaCare, they liked their doctor whom they could see under their existing health care policy, and they even liked the price they were paying for it—it was affordable before the mandates of ObamaCare, but one by one they lost their coverage when ObamaCare became the law of the land.

I have had some of my constituents tell me they feel terrorized by ObamaCare. Strong words. Others have told me bluntly, they need relief from it: Please, help us. We are drowning in higher costs and fewer choices and we don't like what we have under ObamaCare. The bottom line is, for all of the purported benefits the Democratic leader talked about—more people on Medicaid, more people with some form of coverage—we know a huge majority of people feel as though they got a raw deal, and we knew it would be that way from the beginning. That is the reason many people, including myself, opposed it.

That is also the reason why just this year Senate Republicans passed a bill under the budget reconciliation process to repeal ObamaCare, because we feel the American people deserve better. Not surprisingly, President Obama vetoed it. What we demonstrated is, the political support in the Senate, working with the House, to, hopefully under the next President, build a health care system the American people can afford, giving them the choices they want because unfortunately ObamaCare did not deliver on its promises.

We have our work cut out for us in 2017. We demonstrated there are enough votes there to repeal ObamaCare. All we need now is a President who will sign it, as we work together to repeal it and give a more affordable alternative to ObamaCare that gives people the choices they want and deserve.

Mr. President, I yield the floor.

The PRESIDING OFFICER. The assistant Democratic leader.

Mr. DURBIN. Mr. President, both the Republican majority leader and the Re-

publican assistant majority leader have come to the floor to address one issue that is pretty important to them, and it clearly is the focus of their attention. The issue today is the Affordable Care Act, ObamaCare, which was passed by the Senate and the House 6 years ago. What I have missed in most of the debate—no, in fact, what I missed from all of the debate from the Republican side, is their proposal or their alternative. They don't have one. No, what they want to argue is: We need to go back to the good old days—the good old days of health insurance before the Affordable Care Act.

You heard the Senator from Kentucky and the Senator from Texas talk about getting back to those good old days and getting rid of the mandates in the Affordable Care Act. What were those mandates in the Affordable Care Act? Here is one. It says if you or any member of your family had a preexisting condition, you could not be denied health insurance. Does any family across America have a family member with a preexisting condition? It turns out there are quite a few—my family and many others. There are 129 million Americans out of 350 million who have a preexisting condition in their family. What did that mean in the good old days before the Affordable Care Act, which the Republicans want to return to? It meant health insurance companies would just flat out say no, we are not going to cover you. You have a child who survived cancer, you have a wife who is a diabetic—no health insurance for you. Those are the good old days that Republicans would like to return to, but for 129 million Americans, it means no insurance or unaffordable insurance to go back to the Republican good old days under health insurance.

There was also a provision—another mandate in the Affordable Care Act—which said you cannot discriminate against women when it comes to health insurance. Why would health insurance companies charge more money for women than men? Well, women are made differently, have different health needs. But why should they be discriminated against when it comes to the cost of health insurance?

One of the mandates said that you treat men and women equally when it comes to the payment of premiums. In the good old days, you could discriminate against women. It meant that 157 million American women could pay a higher premium for the same health insurance as a man. So the good old days, which the Senate Republicans would like to return to in health insurance, would go back to discrimination against women.

There was another mandate. The mandate said that if you were a family who had a son or a daughter and you wanted to keep them on your family health insurance until they reached the age of 26, the health insurance companies had to give you that option. It was mandated. In the good old days, which the Senate Republicans would

like to return to, there was no requirement that you be allowed to continue coverage for your son or daughter to age 26.

What difference does that make? I remember when my daughter was going to college and then graduated. I called her and said: Jennifer, do you have health insurance?

Oh, Dad, I don't need that. I feel fine.

Well, no parent wants to hear that. You never know what tomorrow's diagnosis or tomorrow's accident is going to bring. So one of the mandates, which the Republicans would like to get rid of, is the mandate that family health insurance cover your children up to age 26 while they are graduating from school, looking for a job, maybe working part time. They want to go back to the good old days when you could tell a family: No, your son or daughter cannot stay under your health insurance plan.

There was another provision too. There used to be a Senator who sat right back there; I can picture him right now—Paul Wellstone of Minnesota. Paul Wellstone was an extraordinary Senator who died in a plane crash. You probably remember. Over on that side of the aisle, right at that seat, was Pete Domenici of New Mexico. Pete Domenici was a Republican Senator from New Mexico.

Paul Wellstone and Pete Domenici were two polar opposites in politics, but they had one thing in common. Both of them had members of their family with mental illness. The two of them, Paul Wellstone and Pete Domenici, came together and said: Every health insurance plan in America should cover mental health counseling and care—mandated mental health counseling and care.

Those two Senators from the opposite poles in politics knew, together, that mental illness is, in fact, an illness that can be treated. Health insurance plans did not cover it, did not want to cover it. But the mandate that they came up with, included in the Affordable Care Act, said: Yes, you will cover mental health illness and mental health counseling.

Well, you have just listened to the Senator from Texas talk about doing away with mandates, mandates that require the coverage of mental health illness. There is something else they included, too, and most of us didn't notice. It doesn't just say mental health illness; it says mental health illness and substance abuse treatment.

What I am finding in Illinois, and we are finding across the country because of the opioid and heroin epidemic, is that many families get down on their knees and thank goodness that their health insurance now gives their son or daughter facing the addiction of opioids or heroin health insurance coverage for treatment. This is another mandate in the Affordable Care Act that the Senators from Texas and Kentucky believe should be gone.

That is not all. There is also a mandate in the Affordable Care Act that we

do something to help senior citizens pay for their prescriptions drugs. Under the plan devised by the Republicans, there was something called a doughnut hole where seniors could find themselves, after a few months each year, going into their savings accounts for thousands of dollars to pay for their pharmaceuticals and drugs.

We put in a mandate in the Affordable Care Act to start closing that doughnut hole and protecting seniors. The Republicans would have us go back to the good old days when the Medicare prescription program—where seniors were depleting their savings because of the cost of lifesaving drugs.

So when you go through the long list of things that are mandated in the Affordable Care Act, you have to ask my Republican critics: Which one of those mandates would you get rid of? They suggest that—at least the Senator from Texas suggested—we should get rid of all of these mandates and go back to the good old days of health insurance.

It is true that the cost of health insurance is going open up. My family knows it. We are under an insurance exchange from the Affordable Care Act. We know it. Others know it as well. But to suggest this is brand new since the Affordable Care Act is to ignore reality and to ignore the obvious. If you take a look back in time—and not that far back in time—before the passage of the Affordable Care Act, you find some interesting headlines.

The Senator from Texas brings headlines from Texas of the last few months. In 2005, 5 years before the Affordable Care Act was law, there was a Los Angeles Times headline that read, “Rising Premiums Threaten Job-Based Health Coverage.” It should not come as any surprise to those of us who have any memory of when the cost of health insurance premiums were going up every single year.

In 2006, 4 years before the Affordable Care Act became law, a New York Times headline read, “Health Care Costs Rise Twice as Much as Inflation.”

In 2008, 2 years before we passed the law, a Washington Post headline read, “Rising Health Costs Cut Into Wages.”

It is naive—in fact, it is just plain wrong—to suggest that health care costs were not going up before the Affordable Care Act, and health insurance premiums were not going up. If you could buy a policy, you could expect the cost of it to go up every year. What we tried to achieve with the Affordable Care Act was to slow the rate of growth in health insurance costs. We have achieved that.

More than 20 million Americans who did not have it before the Affordable Care Act now have health insurance. We are also finding that the cost of programs like Medicare have gone down over \$400 million because we are finding cost savings in health care, cost savings brought about because of the Affordable Care Act. I said \$400 mil-

lion; sorry, I was wrong. It is \$473 billion saved in Medicare since the Affordable Care Act because the rate of growth in health care costs has slowed down.

For employer premiums, the past 5 years included four of the five slowest growth years on record. Health care price growth since the Affordable Care Act became law has been the slowest in 50 years. Have some premiums gone up? Yes, primarily in the individual market.

Now, the Senator from Texas and I have something in common. The biggest health insurer in my State is also a major health insurer in Texas—Blue Cross. Blue Cross came to me and said: We are going to have to raise premiums. How much, I can't say ultimately. It is still going through the decision process. What was the reason? They said: Not enough people are signing up for the health insurance exchanges. What we are trying to do is to get more people to sign up for health insurance so that we literally have universal coverage across this country.

We have made great progress; 20 million people more are covered. But to argue that we should go back to the good old days of health insurance, of discrimination against people with pre-existing conditions, discrimination against women, making the decision that if your child has a medical condition, your family would not have health insurance—to say that we should go back to that—is that what the Republicans are proposing? I am still waiting for the Republican alternative to the Affordable Care Act. They have had plenty of time to work on it.

They call it partisan law, but let's make the record clear. In 2009, when President Obama was sworn into office and started this effort to reform health insurance in America, Max Baucus, a Democrat from Montana, was the chairman of the Senate Finance Committee. He reached out to the ranking Republican, CHUCK GRASSLEY of Iowa, to try to devise a bipartisan bill.

They took a long time deliberating and meeting. In fact, many of us were frustrated, saying: When is this going to result in an actual bill? In August of 2009, Senator GRASSLEY announced he was no longer going to be engaged in that deliberation and negotiation. From that point forward, no Republicans participated in the drawing up of the bill or an alternative. It passed on a partisan rollcall despite the best efforts of many Democratic Senators to engage the Republicans in at least debating the issue and helping us to build the bill.

They were opposed and remain opposed. They still oppose it today and still have no alternative, no substitute. It is their hope that we will somehow return to the good old days of health insurance. Well, they were not good old days for millions of Americans. It meant discrimination, exclusions, expenses, and treatment no one wants to return to.

One topic is never mentioned by the Republicans when they come to the floor and talk about health insurance. I listened carefully yesterday and again today with Senator MCCONNELL and with Senator CORNYN, and one thing they failed to mention: Did you hear them say anything about the cost of pharmaceuticals and drugs? Not a word.

Yet when you ask health insurance companies why premiums are going up, some are saying: They are being driven by the cost of pharmaceuticals. One company says that 25 percent of our premium increase goes to the cost of pharmaceuticals. Well, we know what they are talking about, don't we. When people take over these pharmaceutical companies, they grab a drug that has been on the market, sometimes for decades, and decide to raise the price 100 percent, 200 percent, and 550 percent in the case of EpiPens, those pens that save kids who have anaphylactic reactions to peanuts and other things they are allergic to.

So if we are going to deal with the drivers in the cost of health insurance, my friends on the Republican side have to be open to the suggestion that we need to do more to protect American consumers from being fleeced by pharmaceutical companies. Why are we paying so much more for drugs in America that are literally cheaper in Canada and cheaper in Europe? It is because our laws do not give the consumers a fighting chance. Our laws allow pharmaceutical companies to charge what they wish with little or no oversight.

Do you want to bring down the cost of health care? We have hospitals already engaged in that effort, doctors engaged in that effort, medical professionals committed to that effort. But what one hospital administrator said to me is: Senator, when are we going to get the pharmaceutical companies to join us in trying to reduce the cost to consumers?

Let me just close by saying that the Senator from Texas said: There were those in the Senate who wanted to have a government health insurance plan. Guilty as charged—not as the only plan, but as a competitor when it came to these health insurance plans. What if we had Medicare for all across the United States as an alternative in every insurance exchange and allowed consumers across this country to decide whether that is an option that is valuable for them?

I am not closing out the possibility of private insurers. Let them compete as well. But consumers at least deserve that option, a nonprofit Medicare-for-all insurance plan. It was stopped because we did not have the support of all of the Democrats, to be honest with you, and no support from the Republican side. I still think that is a viable alternative that we should explore.

So I will still wait. There will be more and more speeches about the Affordable Care Act. I will still wait,

after 6 years, for the first proposal from the Republican side for the replacement of the Affordable Care Act. I have not seen it yet, but hope springs eternal.

I yield the floor.

The PRESIDING OFFICER (Mr. ROUNDS). The Senator from Nebraska.

Mrs. FISCHER. Mr. President, I rise to offer remarks on the Water Resources Development Act today. Specifically, I would like to address amendment No. 4996, which has now been modified and included in the Inhofe-Boxer managers' package. First, to Senators INHOFE and BOXER, thank you for your commitment to passing the WRDA bill every 2 years.

I appreciate their efforts to work with every Member in this Chamber to make certain that commitment is upheld. The bill reflects our duty and ability to ensure safe, reliable water infrastructure. In large part, it achieves this by granting greater flexibility to local stakeholders to manage their community's diverse water needs.

For example, in Nebraska, our 23 natural resource districts will be allowed to fund feasibility studies and receive reimbursement during project construction instead of waiting until that project is completed.

WRDA also includes real reform for State municipalities, like those in Omaha, struggling with unfunded combined sewer overflow mandates.

Personally, I am relieved that WRDA 2016 eliminates the EPA's flawed median-household income affordability measurement which hurts fixed- and low-income families.

Regarding amendment No. 4996, I thank the chair, the ranking member, and staff of the EPW Committee for working with me in a bipartisan manner to ensure that America's farmers and ranchers have greater certainty for their on-farm fuel and animal feed storage. This amendment provides a limited exemption to farmers from the EPA's spill prevention, containment, and control—or the SPCC—rule. Two years ago I worked with Senator BOXER, who was then chairman of the committee, in a good-faith effort to address concerns raised by my constituents about this rule, and I am very pleased to have the opportunity to do so again.

My modified amendment would wholly exempt animal feed storage tanks from the SPCC rule both in terms of aggregate storage and single-tank storage. Further, this amendment includes additional language that will exempt up to 2,000 gallons of capacity on remote or separate parcels of land as long as these tanks are not larger than 1,000 gallons each. Ultimately, this will give ag producers greater flexibility to access the necessary fuel needed to power machinery, equipment, and irrigation pumps.

Some may think these are just technical tweaks, but let me assure you they are critically important to farmers and ranchers across our country.

Most agricultural producers live miles away from the nearest refueling station; therefore, producers rely upon on-farm fuel storage to supply the fuel they need at the time they need it. This amendment will ensure that producers can maintain that on-farm fuel storage. It will bring some reasonable, measured exemptions to the SPCC rule for small- and medium-sized farms and for livestock producers.

This compromise comes at a critical hour for our ag producers. They are struggling through one of the toughest farm economies since the 1980s. Markets are weak, and margins are tight. This compromise offers much needed regulatory relief. For many, it is a lifeline. It lifts an unnecessary burden.

I urge my colleagues to support these commonsense exemptions that will limit harmful Federal regulations on the men and women who feed a very hungry world. I wish to comment briefly on those harmful regulations. As I mentioned, the Senate passed a provision in the 2014 WRDA bill requiring the EPA to do some research before determining what is and what is not an appropriate, safe fuel storage level for the average American farmer. It is my view—and it is shared by many producers across the country—that if there is no risk, then there is no reason to regulate. Don't fix problems that don't exist.

The EPA released results of this study last year, and it is difficult for me to call it a study. The word "study" carries with it the implication of careful scrutiny. The EPA's report was, in reality, a collection of assumptions lacking in scientific evidence. It supported a recommendation that moved the goalposts on the exemption levels below the minimum that was previously agreed to by this Chamber and signed into law. The EPA report failed to show that on-farm fuel storage poses a significant risk to water quality. It cited seven examples of significant fuel spills and not one of them occurred on a farm or a ranch. Even more misleading, one referenced a spill of 3,000 gallons of jet fuel. I know that in the Presiding Officer's State of South Dakota and in my State of Nebraska, it would be very hard to find a farmer who employs the use of a jet engine when they are harvesting a cornfield.

To place these costly fees and heavy regulations on farmers and ranchers at so difficult a time is very dangerous and it is serious. To do so based on a report with false, misleading information is irresponsible.

I know the impact of Federal policies from first-hand experience. Farmers and ranchers understand that their success is the direct result of careful stewardship of our natural resources. We depend on a healthy environment for our very livelihoods. We know the value of clean water—you cannot raise cattle or corn without it. No one works harder to protect the quality of our streams and our aquifers. When it comes to preventing spills from on-

farm fuel storage, producers already have every incentive in the world. We live on this land and our families drink the water.

Again, I thank Chairman INHOFE and Ranking Member BOXER for their willingness to come together, reach a compromise, and safeguard the livelihoods of our farmers and ranchers.

The Senate's approval of WRDA will be a relief for farmers throughout Nebraska and all across America, who should not face these unnecessary regulations. The bipartisan provision regarding on-farm fuel storage completely exempts animal feed ingredients, and it does provide greater flexibility to producers to access the fuel where they need it, and that is reflective of the real-world realities we face in production agriculture.

I appreciate my colleagues' support and cooperation on this issue.

I yield the floor.

The PRESIDING OFFICER. The Senator from Oregon.

ZIKA VIRUS FUNDING

Mr. WYDEN. Mr. President, if ever there were an issue that ought to be bipartisan, it is tackling the Zika virus because this virus, of course, is taking an enormous toll on our country.

What we are seeing is women and men getting infected, research stalling out, and babies being born with deformities and severe disabilities. My view is there shouldn't be anything partisan about tackling this. It ought to be common sense. The Senate ought to come together, and we should have done it quite some time ago. Yet Republican leaders seem to be putting this into slow motion because they want to limit access to the very health services pregnant women depend on for their care. When you listen to their view, it is almost like giving pregnant women cans of bug spray and wishing them good luck. In my view, that defies common sense.

What I have always felt—and this has been true throughout my time in public service—is that with the big public health issues where the safety and well-being of so many Americans is on the line, you say: What we are going to do is we are going to do our job, we are going to come together, and we are going to do it in a bipartisan fashion based on what researchers and public health authorities say makes sense.

Yet here the Senate is on an issue that is at the forefront of the minds of millions of American women and families, and what we are being told by Republicans is that the price of dealing with the Zika virus is limiting women's rights and reducing access to reproductive health care, and so much of that agenda is a preventive agenda, which is exactly what the public health authorities say is most important.

My hope is that this Congress is very quickly going to say that we are going to set aside the anti-women, anti-family language, and, as part of a must-pass bill, that we are going to say we are going to come together as a body,

Democrats and Republicans, and address what are clear public health recommendations of the leading specialists in this country and do the job that Americans told us to do, which is, when you have something that affects millions of Americans and their health and safety—I had a number of forums on the Zika virus this summer in Oregon. It is a great concern. For example, the Oregon Health Sciences Center, our premier health research body, is very concerned about the research agenda stalling out.

I would say to my colleagues, let's set aside this question of trying to find ideological trophies as part of the Zika legislation. Let's address the clear public health recommendations we have received. Let's do it in a bipartisan way. Let's do it in a way that reflects common sense, and let's do it quickly.

With that, I yield the floor.

The PRESIDING OFFICER. The Senator from Wyoming.

OBAMACARE

Mr. BARRASSO. Mr. President, I come to the floor after having seen the minority leader and then the minority whip on the floor this morning talking about the President's health care law. It is a law that the President said people should forcefully defend and be proud. What I heard was a defense of a bill—now a law—that was passed solely along partisan lines a number of years ago. It is very hard to be proud or defend that law based on what the American people are experiencing.

I come to the floor noting that the President is from the home State of Illinois, the minority whip is from the home State of Illinois, and there have been a number of stories in the press recently from that State about just how horrendous the impact of the law has been on the people of the President's home State, to the point that just yesterday there was a story in the Washington Examiner with the headline "Illinois gets ready for huge Obamacare rate hikes."

People say: Well, what is not to like about ObamaCare?

According to a Crain's Chicago Business report dated August 27—the headline is "What's not to like about ObamaCare? Plenty in Illinois."

There is plenty in Illinois not to like about ObamaCare, but it is not just Illinois and it is not just Nevada, where the minority leader is from; a Gallup poll of the entire country that recently came out showed that more Americans are negative than positive about the health care law. Have there been some people who have been helped? Absolutely. But overall, most Americans in this case have said the impact has been more negative than positive.

It is interesting because the way the question was asked—they asked: Has this health care law helped you personally or has it hurt you and your family?

I was astonished to see that 29 percent of Americans say ObamaCare has hurt them and their families person-

ally. Three out of ten Americans say this law has hurt them and their families personally. Well, how does that happen? Maybe they lost their doctor. The President said: If you like your doctor, you can keep your doctor. Many people couldn't, in spite of what the President told them. The President told them their insurance premiums would drop by \$2,500. Instead, people are noticing premiums going up around the country. The President said: If you like your plan, you can keep your plan. We know that has not been true.

And then what I found additionally astonishing and should be concerning to all of us as Americans—and as a doctor most concerning to me—is the question, How will this health care law affect your family in the future? More Americans expect the health care law to make their family's health care situation worse in the long term.

These are people talking about their own families, not the minority leader or the minority whip or the President of the United States coming to the floor and talking about this and that—the theoretical aspects. I am talking about American families—men, women, children—all trying to live a healthy life and finding it has been impeded, hurt by the President's health care law.

It is amazing that 36 percent—more than one in three Americans—expect this health care law to make their family's health care situation worse. Did we hear about that during the debate on the Senate floor when the bill was written behind closed doors in HARRY REID's office or when NANCY PELOSI said: First you have to pass it before you find out what is in it. Did the American people understand that 6 years later, over one in three would say personally their health care and the health of their own family would be worse because of this law?

The State of Illinois. This is the headline yesterday: "Illinois gets ready for huge Obamacare rate hikes." The first line of the story: "Half the insurers selling plans in Illinois' Obamacare marketplaces are hiking prices by 50 percent on average, according to the final rates the State published Wednesday."

These are rates approved by the State of Illinois. Remember, the President said: Oh, we will not let them go up that high. The State of Illinois says that is the only way they can stay in business.

Another headline: "Illinois Obamacare rates could soar as state submits insurance premium increase to the feds." Rates could increase by an average—and we know what the approval rate is—over half will be increasing by over 50 percent. So with that impact, it is interesting that for a 21-year-old nonsmoker—we are talking about somebody who is healthy, who doesn't smoke, and who probably goes to the gym—if they are buying the lowest price silver plan in Cook County, IL—we are talking Chicago, talking

about the President's hometown—next year, that 21-year-old healthy individual, nonsmoker, could pay a premium of \$221 a month, up from \$152 a month. That is a \$70 higher premium every month—\$840 for the year—for a 21-year-old who is just trying to get health insurance because the law says they have to buy it.

The President says: You just can't get what works for you, you have to buy what I say works for you. You have to listen to the President on this. You can't choose what makes sense for you. The President says: Don't worry. Taxpayers will subsidize it.

If you are not receiving a taxpayer subsidy, you are paying the subsidy for that person, but a lot of people don't get the subsidies. According to the situation in Chicago, about 25 percent of the people who buy insurance on the exchange—the customers there, which is about 84,000 people—do not receive tax credits. They don't receive the subsidy. So they are feeling this in their pocketbooks because the President says they have to buy it because he thinks he knows better, and it sounds like the minority leader and the minority whip have that same opinion.

So the headline comes out, "What's not to like about Obamacare?" And then the answer to the question is: "Plenty in Illinois." It talks about Illinois residents who buy health insurance through the ObamaCare exchange should brace themselves for steep premium increases, but it is not just the premiums. They also have to brace themselves for fewer doctors to choose from—less choice in doctors, less choice in hospitals to go to when they enroll, and the enrollment opens on November 1.

The big national health insurance companies have pulled out of Illinois because of substantial losses. There is actually a co-op in Illinois called the Land of Lincoln co-op. It lost \$91 million and they closed their doors.

Is it only Illinois, is it only Nevada where they are down to just one choice in most of the State? The President promised a marketplace, but instead it is a monopoly. Companies have pulled out. People have very few choices, if any.

The article says:

While people buying insurance coverage through the Illinois exchange may howl, premiums are jumping even higher in other States. For instance, the insurance commissioner of Tennessee, declaring the state's exchange market "very near collapse."

Very near collapse in Tennessee. Yet they approved an increase—the one insurance company—of 62 percent. A 62-percent increase. Is that what the President means when he says "forcefully defend and be proud"?

The President and Senators on the floor today talked about the issues, and the President pointed to this, and he said: Oh, well, people aren't going to have to go to the emergency room after the ObamaCare health care law has been passed because they will only

have to use it for emergencies and not for routine care. Well, what came out in the Chicago Tribune, the President's hometown newspaper, on August 30 of this year? "Illinois emergency room visits increased after Obamacare." They increased. The article says: "Emergency visits in Illinois increased . . . by more than 14,000 visits a month on average, in 2014 and 2015 compared" to before the President's health care law was signed. This is from the *Annals of Emergency Medicine*. They follow these things.

The article in the Chicago Tribune says one of the goals of expanding coverage to all was to reduce the use of pricey services such as emergency department services. That is what the President said. That is what the Democrats said when this bill was being debated. The emergency room was the area of last resort for people who didn't have doctors and who didn't see them regularly, so with the health care law, they wouldn't need to go to the emergency room, but the study's authors noted that this spike of visits in Illinois runs contrary to what the President promised and the President's goal.

The co-ops have been especially troubling and certainly in Illinois the Land of Lincoln co-op, but it is not just Illinois. Co-op after co-op after co-op has failed, including one yesterday in the State of New Jersey—gone. What does Crain's, the Chicago business newspaper, say about Illinois? "Illinois Obamacare plan to fold after 3-year run." "Land of Lincoln Health, an Obamacare insurer that launched three years ago to bring competition"—the idea of the President, saying he wanted to bring competition—"to the online exchange, is liquidating among big financial losses."

In location after location, State by State, people who have relied upon the President's promises have been bitterly disappointed. What is so distressing about what happened in Illinois with the co-op is that because it failed during the middle of the year—done—people then need to find new insurance.

We have talked before about the issues of high copays, high deductibles. When a co-op fails and you have to buy new insurance, you have to start over from scratch with paying the copays, paying the deductibles. So somebody who actually bought insurance through the President's idea of this co-op—a co-op that has now failed—finds themselves not only having to find a new insurance company—if they can find one—because the law says they have to buy it, but they also have to start over.

So the Land of Lincoln—the so-called co-op health insurer on the State exchange—is going to shut down the end of September—in a couple weeks. Its 49,000 Illinois members—this is according to the Chicago Tribune—its 49,000 Illinois members have to get new insurance coverage for October, November, and December because it is done at the end of this month. They will likely have to start from zero again on their

deductibles and out-of-pocket maximum payments, in some cases costing them thousands of additional dollars.

Is that what President Obama means when he says forcefully defend and be proud? There is very little to be proud about what this President has brought upon the American people, which is why we see so many families concerned.

The final issue I bring up is the fact that so few people are signing up in spite of the fines, in spite of the taxes, and in spite of the mandates, to the point that the Washington Post had a front-page story entitled "Health-care exchange sign-ups fall far short of forecasts." At this point, they expected 24 million people signing up. They are at 11 million. So they are 13 million short. There are still almost 30 million people in this country uninsured, but it is not because they are making it hard to sign up. Oh, no, Mr. President. You may have seen this story that came out yesterday on CNBC news: "Obamacare marketplaces remain vulnerable to fraud, new government audits find." The article says: "Two new government audits reveal that the nation's Obamacare marketplaces remain 'vulnerable to fraud,' after investigators successfully applied for coverage for multiple people who don't actually exist."

They made up people, they applied, and the ObamaCare exchange sold them the insurance and counted them as good. It says: "In several cases this year, fake people who hadn't filed tax returns for 2014 were still able to get Obamacare tax credits. . . ." They were not just able to get insurance but got subsidies from hard-working American taxpayers. They were still able to get ObamaCare tax credits to help pay their monthly premiums for coverage right now.

Continuing to quote from the article: "This year is the first year in which applicants for those subsidies had to have actually filed their federal tax returns from prior coverage years. . . ." But they had not filed them. That didn't matter to the ObamaCare exchange people. They are so desperate to get people to sign up because so few people are signing up that they will sign up people who don't exist.

They put up 10 fictitious applications, with 8 of them failing the initial online identity checking process, but all 10 were successfully approved, according to the Government Accountability Office.

It is amazing that people all around the country know how poorly this law is working for them in terms of their lives and their families. I heard one of the Senators today say Republicans have no options. The Republicans have offered plenty of responses to what is happening with the Obama health care law. The State health care CHOICE Act allows States to make a lot of decisions that are now being made by unelected, unaccountable Washington bureaucrats. We have plans working to-

ward patient-centered care to allow people to get the care they need from the doctor they choose at lower costs.

These are things that have been rejected by the Democrats because the President has said "forcefully defend and be proud." Hillary Clinton has said defend and build upon. She wants to do it with additional taxpayer subsidies—subsidies that go to people who do not exist, subsidies that don't deal with the cost of care, subsidies that don't deal with the fact that people are facing high deductibles, high copays, and can't keep their doctors.

In spite of what the President and the Democrats may say, and in spite of what candidate Clinton may say, a huge number of American people have considerable fears their life will be made worse by the President's health care law. Almost 3 in 10 Americans today—29 percent of Americans today—say they and their families have been personally harmed by the President's health care law. That is a sign of failure, Mr. President. It is not a sign of success. It is not something people should forcefully defend and be proud of. It is a sign we need to take a different path—a path that is not the Obama approach, not the one-size-fits-all, and it is not the Washington knows better than the people at home.

We need to get the decisions out of Washington and being made at home so the American people—people who just want to get up, go to work, take care of their family, and get affordable care when they need it—can get the care they need, from a doctor they choose, at a lower cost.

Mr. President, I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER (Mr. HELLER). The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mrs. CAPITO. 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. CAPITO. Mr. President, I am here today to speak in support of the Water Resources Development Act, or what we call WRDA. I thank Chairman INHOFE and Ranking Member BOXER for the way they have worked very well together to get this very important piece of legislation across the finish line, as they did with the Transportation bill. This piece of legislation has broad bipartisan support.

As we know, West Virginia suffered historic flooding this summer. We can see this in Greenbrier County, WV, on June 25, 2016. This shows how swollen and filled all the waterways were. We lost 23 West Virginians from the storms, and tens of thousands suffered catastrophic damages to their homes and to their livelihoods. WRDA contains a number of provisions that will help prevent this kind of devastation in the future. We can no longer wait until it fails to fix our Nation's infrastructure.

In addition to a major loss of life, communities across West Virginia are dealing with significant economic losses that will take years to recover. Our friends in Louisiana are going through the same, very difficult building back.

Let me touch on some of the highlights of the WRDA bill.

I sponsored a provision in WRDA with my fellow Senator from West Virginia, Mr. MANCHIN, to study the feasibility of implementing projects for flood risk management within West Virginia's Kanawha River Basin—something such as this—to prevent this. This bill also addresses dam safety and includes a provision I have been working on with Senator JACK REED. I thank him for his hard work in this area.

According to the Army Corps of Engineers' "National Inventory of Dams," there are more than 14,000 high-hazard potential dams in the United States. As we know, the State of West Virginia has a lot of mountains, a lot of valleys, a lot of water, and a lot of dams. Some 422 of those dams are located in my small State of West Virginia. Put simply, when a dam has high-hazard potential, it means that if the dam fails, people will lose their lives and their property.

This provision allows for \$530 million over 10 years for a FEMA program to fix those dams. I know that States across the Nation would welcome this provision.

Flood prevention and mitigation is only one of the important parts of this WRDA bill. WRDA also has drinking water infrastructure—an issue, again, that is very important to all of us. In my State of West Virginia, we dealt with this firsthand, in 2014, following the Freedom Industries spill into the Elk River. As we may recall, that caused 600,000 people to lose their water for a large period of time—several weeks in some cases.

WRDA provides assistance to small, disadvantaged, and underserved communities. It will replace lead service lines in these communities and address sewer overflows. We have so much aging infrastructure in this country. It includes \$170 million to address lead emergencies—like those in Flint, MI—and other public health consequences. It provides \$70 million to capitalize the new Water Infrastructure Finance and Innovation Act, better known as WIFIA. That program provides loans for water and wastewater infrastructure anywhere in the country. This program is modeled after a similar and highly successful program that supports our highways.

Maximizing the use of our waterways is another important part of WRDA. In my State, our rivers not only provide commercial transport but also vital recreational opportunities. I have submitted a bipartisan amendment, which I hope will be accepted into the final bill, that emphasizes the increasing use of locks along the Monongahela River for recreational use.

Finally, WRDA includes consensus legislation to allow EPA to review and approve State permitting programs for coal ash disposal. The EPA's coal ash rule went into effect last October, but EPA does not currently have the authority to approve our State permitting programs. This bill fills that gap, benefiting utilities, States, and the environment by authorizing State oversight of coal ash disposal. There is no other environmental regulation solely enforced simply through private lawsuits, which is what we are seeing. So this bill fixes that by giving States the authority, and it empowers local entities to help keep their infrastructure strong and functioning.

Lastly, the bill gets us back to a regular schedule of passing WRDA every 2 years. Doing so will allow us to continue to modernize our water transportation infrastructure and keep up with flood protection and environmental restoration needs across the country.

So let's seize this opportunity. This is a significant bill with a number of benefits for a lot of States all across the country. This legislation proactively addresses a number of concerns. It will bring short-term and long-term gains to our economy, and it will show the American people that Congress can come together in a bipartisan way to fix problems, to support needed improvements to our infrastructure, and to make the right investments in our communities.

Lastly, I wish to add that the devastating floods we had in West Virginia took 23 lives, but what it showed us as West Virginians is what a great Nation we live in. I want to take the time to thank people from across this country who drove to West Virginia, who sent money to West Virginia, who raised money for West Virginians, who sent supplies, and who said prayers for all the many families who were devastated and still suffer the devastation from a flood such as this throughout our State.

I think we do sometimes focus a little bit too much on what is going wrong in this country. For me, one of the things that is going right is the volunteerism, the benevolence, the loving embrace that we felt in West Virginia from the rest of the country when we went through such a devastating flood but that other areas of the country feel when they suffer like consequences.

I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mrs. FEINSTEIN. 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. FEINSTEIN. Mr. President, it is really propitious that the Senator from Nevada is in the Chair today because I am going to speak about our legisla-

tion, which is part of the WRDA bill. Let me begin by thanking the Presiding Officer for his leadership. We put this legislation together in 2015. This has to do with Lake Tahoe, and the Presiding Officer was the main author of the bill. Senator REID, Senator BOXER, and I were supporters, and here it is in this WRDA bill. I want the Presiding Officer to know how I feel. This is how the Senate should work. We worked together for something that has benefited both of our States, and we are able to say we are getting the job done.

I wish to congratulate the Presiding Officer, Senator HELLER. This is so special for me. I am delighted that Senator HELLER is in the Chair, and maybe I can briefly go over the last 20 years of work on Lake Tahoe to bring us to this moment. I know Senator HELLER couldn't be at the summit this year, but I want him to know that he was really missed, and I want him to know that Senator REID put together one amazing summit. As a matter of fact, I called him and said: HARRY, you can't have a rock group at this summit. This is a serious thing. We meet every year, and we go over all of the science, planning, and problems at the lake. He said: Let me tell you something. I am retiring. It is my turn to do this, and I am going to do it my way. And it turned out to be great.

I want the Presiding Officer to know that 7,000 people attended the summit. Our Governor spoke, but your Governor could not be there because he was committed to an event in your State. Senator BOXER spoke, Senator REID, of course, spoke, and the President was there and also spoke. I was worried that it would be difficult if all of us spoke because there were 7,000 people expecting to hear this Las Vegas rock band called the Killers after the program.

Well, I must tell you that they were the utmost in terms of an audience. After the program was finished, and before the rock group performed, I became hopeful that we now have a whole new constituency of people working for the preservation of this lake.

As I mentioned, I have worked on Lake Tahoe with my colleagues for 20 years, and I believe we are at a critical moment. To understand the long-standing commitment to Lake Tahoe, one must start with the first Lake Tahoe Summit in 1997. Senator HARRY REID invited President Clinton, and President Clinton's trip put a spotlight on the declining health of the lake. The 1997 summit also launched a public-private partnership, or a Team Tahoe, made up of Federal, State, local, tribal, and private sector participants, which has invested \$1.9 billion in restoration of Lake Tahoe. I want to just quickly report to the Presiding Officer some of the numbers, if I may. As I stated, we have invested \$1.9 billion in the lake over 20 years—\$635 million is Federal dollars, \$759 million is California dollars, and \$124 million is Nevada dollars.

As you know, southern Nevada land sales have gone into this, thanks to your Governor and also Senator REID. Local governments contributed \$99 million, and I want you to pay attention to this number: \$339 million has been raised by businesses and the private sector over the 20-year period. What we have is a very real, bi-State combined effort to preserve and restore Lake Tahoe. It is a special partnership.

I also want the Presiding Officer to know that during the stakeholders' luncheon, which preceded the summit, Dr. Geoff Schladow, a professor and scientist at University of California, Davis, said that his greatest concern was the fact that this lake is now warming quicker than any large lake in the world. Also, the Tahoe Environmental Research Center at UC-Davis recently released their annual "State of the Lake" report for 2016 which we discussed. We learned this year that the average daily minimum air temperature rose 4.3 degrees. And the average annual lake clarity depth decreased by 4.8 feet. In addition, we learned that prolonged drought and dead trees are increasing the risk for catastrophic wildfire. Sedimentation and pollution continue to decrease water quality and the lake's treasured clarity. And invasive species, like the quagga mussel, milfoil, and Asian clam, continue to threaten the lake and the economy of the region. We are going to have a continuing problem with the challenges we face, and that is why it is so important and timely to pass the Tahoe bill.

I am so proud of the accomplishments that we have made together. I want to again thank the Presiding Officer for this because it is really important. Lake Tahoe is one of two big, clear lakes in the world. The other is Lake Baikal in Russia. It is the jewel of the Sierras and known throughout the world for its beauty. It is a national treasure we must protect.

Let me cite what we have done and the progress we have made to date. We have completed nearly 500 projects, and 120 more are in the works. Our completed projects include erosion control on 729 miles of roads and 65,000 acres of hazardous fuels treatment. More than 16,000 acres of wildlife habitat and 1,500 acres of stream environment zones have been restored, and 2,770 linear feet of shoreline has been added to the lake.

I think what we have overall now is a bi-State Team Tahoe, and I think it took us 20 years to get there. I remember when Senator REID got President Clinton to come in 1997, as I mentioned earlier, and had a big meeting at Tahoe Commons, which many of us attended. At that time, everybody was fighting. Planning agencies were fighting with homeowners, and environmentalists were fighting with others, but that doesn't exist today. Today we have effected a team, and I am so pleased that the Senator from Nevada is in the Chair, which was completely unplanned, so I can say thank you and

how very proud I am that we have achieved this and that it is part of the WRDA bill.

This Tahoe bill builds off of these 20 years of collaborative work and includes \$415 million over 10 years in Federal funding authorizations for wildfire fuel reduction, forest restoration projects, funding for the invasive species management program and the successful boat inspection program, funding for projects to prevent water pollution and manage stormwater, and funds for the Environmental Improvement Program, which prioritizes the most effective projects for restoration.

I wish to particularly thank our colleagues, Senator INHOFE and Senator BOXER. The only way you get this done is by working together, and I think the fact that they have worked together has ensured that we now have this opportunity to deal with this new challenge, which is unprecedented warming. Along those lines, just a word: As I understand what is happening, the projection is for less snow and more rain, which means more warm water. This impacts the cold-water fish in the Lake, and the Truckee River, which is fueled by Tahoe, and all of the streams that play into Lake Tahoe really depend on that snowpack. So the next few years, I think, are going to be crucial.

The time to act is now, and the Federal Government must take a leading role. Close to 80 percent of the land surrounding Lake Tahoe is public land, including more than 150,000 acres of national forest. Federal lands include beaches, hiking and biking trails, campgrounds, and riding stables. So the Federal Government has a major responsibility to see that these public lands remain in prime condition. And that is what this bill would help do.

I want the Presiding Officer to know that I look forward to working with him. We must continue the tradition that was set by Senator INHOFE and Senator BOXER, which Senator REID helped to start. We have to carry on. I am delighted that the Senate is working again and that this bill is part of the WRDA bill.

I want to end by once again thanking the Presiding Officer for his leadership. I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The bill clerk proceeded to call the roll.

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

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

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

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

CONTINUING RESOLUTION

Mr. RUBIO. Mr. President, I am pleased to report that we had some en-

couraging news yesterday with the announcement of the Senate majority leader that additional money to fight the Zika virus would be included in the continuing resolution, which is the budget document that will help to move us forward at least through December and that hopefully will be moving through the Senate very soon.

Throughout my time in the Senate, I have regularly opposed these short-term spending bills because I don't think funding government on a month-to-month basis is the smart way to run the government of the most powerful and important Nation on Earth. But with Zika becoming a public health emergency the way it has, this is a necessary exception for me to make. All of us, obviously, will reserve to see all the other details of this budget document, but assuming it is as reported—as I am aware in the conversations that are ongoing—I will be supporting this continuing resolution. It is worth making an exception for something like this when the Zika funding is in it. At this point, I just really believe we need to get Zika funding approved and moving. We need to make sure that the fight for Zika doesn't run out of money by the end of this month. For me, that is the most urgent priority.

We can't let the perfect be the enemy of the good. The perfect, I believe, is still the full funding that was originally requested—the \$1.9 billion, which I supported. The good is what, hopefully, will be finalized soon and, hopefully, will pass quickly. But the unacceptable would be to do nothing and to let the money run out on the ongoing efforts to fight Zika.

Even the \$1.9 billion the administration requested months ago will not ultimately be enough. We do not know for sure how much more will be needed to win this fight, but the \$1.1 billion for Zika that is being negotiated would be a step in the right direction and would mean more resources for my home State of Florida, which is in the continental United States and has been disproportionately impacted. Just yesterday, there were another six cases of confirmed transmissions in the State and not travel-related, and of course there is the suffering that is ongoing on the island of Puerto Rico, where a significant percentage of the population has now been affected and/or infected by Zika.

I have been talking about this issue since January, and it has been frustrating to see it tied up in Washington's political games. As I said repeatedly, I believe both parties are to blame for our getting to this moment. On the one hand, I believe Members of my own party have been slow to respond to this, and there were efforts, I believe, to try to cut corners on funding, which will cost us money in the long term. But on the other hand, you have Democrats here inventing excuses—just making it up—in order to oppose it, and they do so for purely political reasons. You have an administration playing chicken with this issue

by claiming that money would run out in August, only to discover that they had more money that could be redirected from other accounts. Now, thanks to the lack of action by Congress and by the administration, we have nearly 19,000 Americans who have been infected, including 800 in Florida and 16,000 on the island of Puerto Rico. We have 86 pregnant women in the State of Florida who have tested positive for the virus, which we know carries the risk for heartbreaking birth defects. As I said, the Florida Department of Health announced that it wasn't 6; it was 8 new non-travel-related cases, bringing that total to 64. That means there are 8 new cases of people who got Zika somewhere in America, probably in Florida.

Zika has also had a devastating economic impact on Florida. The Miami Herald reported that Miami hotel bookings are down, airfare to South Florida is falling, and business owners in affected areas are reporting steep losses. Polls show many visitors would rather stay away. As tourism takes a hit, so will the entire economy in the State of Florida, since tourism is one of our cornerstone industries. That is why we see all of us from Florida working together across the aisle to get this done. For example, I have worked with my colleague BILL NELSON, the senior Senator from Florida, from the very beginning. I will be meeting with our Governor Rick Scott later today about the same issue.

The bottom line is that at the national level, like at the State level in Florida, there is no excuse for this issue to be tied up in politics any longer. My colleagues, Zika is not a game, and we need to pass this funding as soon as possible so that our health officials and experts have the resources they need to conduct the vital medical research that will lead us to a vaccine and ultimately help eradicate Zika in Florida, across the United States, on the island of Puerto Rico, and beyond.

So yesterday's announcement is encouraging. We are closer than we have ever been to getting something done, and now I hope will be the time for action. Hopefully, we will have something soon that is public and that we can get passed right away. I sincerely hope that Senate Democrats won't once again make up or find some excuse to oppose it, and I hope that Members from our party will work cooperatively as well. I hope, ultimately, that the House will also do the right thing so that we can get this done and we can move forward on the research necessary for the vaccine, on the money needed to eradicate these mosquitoes, and, ultimately, on the treatments that people will desperately need to deal with Zika once and for all.

RECESS

Mr. RUBIO. Mr. President, I ask unanimous consent that the Senate stand in recess under the previous order.

There being no objection, the Senate, at 12:26 p.m., recessed until 2:15 p.m. and reassembled when called to order by the Presiding Officer (Mr. PORTMAN).

WATER RESOURCES DEVELOPMENT ACT OF 2016—Continued

The PRESIDING OFFICER. The Senator from Oklahoma.

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

The PRESIDING OFFICER. The Senate is not in a quorum call, so the Senator may proceed.

Mr. INHOFE. I thank the Chair.

Mr. President, right now the reason there is this long wait is we are trying to get everything in place to pass a major piece of legislation, one that is quite significant. It is comparable to our Transportation bill, comparable to our TSCA bill on chemicals, and it is one that came out of our committee, the Environment and Public Works Committee. It is one I am very proud we were able to get done.

Yesterday I talked about the WRDA bill and why it is so important to pass now, the WRDA bill being the water infrastructure bill. It gives recent real-world examples of the problems our Nation is facing and how this legislation can address them.

Today I remind everyone of the process that got us here today. I think it is important because people are saying we don't go through the daylight very often, where everybody has a chance to participate—everybody. We are in that process right now.

Back in December of last year, Senator BOXER and I sent our "Dear Colleague" out to Members letting them know we were going to do a WRDA bill—Water Resources Development Act—in 2016. This was back in 2015, in December.

Well, before the introduction of our bill and our markup in the EPW Committee, we sent out another email asking Members about their priorities, and we got them. We marked up WRDA on April 28, 2016. That means we actually worked on it for 4 months prior to that time, taking up the priorities that people were sharing with us.

We then let all offices know once again that we were preparing to go to the floor with the goal of passing WRDA in the Senate before the August recess. Well, that didn't happen, but my staff continued to work over the August recess with offices on their priorities, and we brought a substitute amendment that was the result of that work to the full Senate on September 8. That was on a Thursday, and we announced that we were going to close the amendments and that everyone should get amendments to us that could be included in the managers' amendment by noon the next day—the next day being Friday—and they did that. That amendment included over 40 provisions that were added after the

committee mark. That is a lot of daylight.

Finally, last week I came to the floor to let everyone know that Senator BOXER and I needed to see all the amendments by noon of last Friday if they wanted them to be considered in the managers' amendment. To date, we have included hundreds of the WRDA priorities from Senate offices, which are included in the substitute, and we were able to clear over 40 additional provisions this weekend. That is just from those that came in prior to noon on Friday. So we had 40 additional provisions just as a result of that.

We hope to adopt that by voice vote today. I say hopefully, but I think people are pretty much in agreement that can happen now. Everyone has had a chance. By the way, when we adopt that, we can entertain other amendments, and we will work with Members on those amendments.

This has been a very open and collegial process, and all Members have had their concerns and priorities heard. We have done our best to address Member priorities. And after we are on the bill, we will continue to do our best to clear germane amendments—only germane amendments.

What we have in front us is a bipartisan bill that will help us modernize our water transportation infrastructure and keep up with flood protection and environmental restoration needs around the country. The problems the WRDA bill addresses are not State or regional problems, they are problems that face the Nation as a whole.

It is clear that people are frustrated with the current political climate. Passing WRDA is a chance for us to start to regain the trust of the American people and prove to them we can do our job and get things done.

I often refer to the EPW Committee that I chair as the committee that gets things done. And we do. So far we have been very successful. We passed the highway bill. Many people were saying: You will never pass a highway bill, a 5-year bill of that magnitude. Yet we did. That hadn't been done since 1998, so it ended 17 years of stagnation. Then we passed the TSCA bill. Everyone said: You are not going to get that. Remember, that was the Frank Lautenberg bill that he had worked on for quite a number of years. We said: Well, we are going to get it done. We got it done.

Senator BOXER and I do not always see eye to eye. She is one of the most liberal Members of the Senate and I am one of the most conservative Members of the Senate. But we have shown over a period of time, time and time again, that when we work together on an issue, we can accomplish our goal. Now we have the WRDA bill before us—something we have both worked very hard on and a bill we are very proud of.

So I am here today to say not passing the WRDA bill is not an option. There is just too much at stake.