

the VA penalized veterans for owning third-party insurance, particularly Medicare.

Leaders in both the House and the Senate got to work to fix this issue and introduced bills in both Chambers of Congress to allow the VA to pay the remaining balance of emergency care after a veteran's third-party insurance was applied. This made good common sense. At the time, the chairman of the Senate Veterans' Affairs Committee, Senator Daniel Akaka of Hawaii, stated the following on this very floor: "The bill I am introducing would amend current law so that a veteran who had outside insurance would be eligible for reimbursement in the event that any outside insurance does not cover the full amount of the emergency care."

Mr. President, congressional intent does not get any clearer than that.

While the Emergency Care Fairness Act was being considered in committee, the VA is on the record as having supported the intent of the bill. Everything was going according to plan and the President signed the bill into law in February of 2010. The problem arose when after the law was passed, the VA implemented a new regulation which continued to deny veterans' legitimate emergency room claims. Despite having previously supported the Emergency Care Fairness Act, the VA reversed course and elected not to comply. This went on for 6 years, and hundreds of thousands of veterans had their emergency room claims denied by the VA.

It was not until a veteran from Minnesota named Richard Staab had a heart attack in 2015 that the VA's illegal regulation was challenged in court. Mr. Staab was rushed to the emergency room following his heart attack and accrued \$48,000 in medical expenses. Because he carried limited Medicare insurance, the VA denied his claim for reimbursement, as it had done for so many veterans, even though his Medicare didn't come close to covering the cost of his treatment.

Mr. Staab sued the VA, and in April of this year, his case was heard by the U.S. Court of Appeals for Veterans Claims. After hearing the case, the court unanimously ruled in Mr. Staab's favor and ruled that the VA was in violation of the law by denying his claim and specifically ruled that the VA's regulation was in violation of congressional intent of the Emergency Care Fairness Act.

Part of the Court's ruling stated: "Therefore, it is clear from the plain language of the statute that Congress intended the VA to reimburse a veteran for that portion of expenses not covered by a health plan contract."

This was a huge win for veterans.

Unfortunately, today the VA has appealed the decision of the U.S. Circuit Court of Appeals. This is an egregious dereliction of duty and a clear effort to avoid complying with the original intent of Congress back in 2009. Just

since the VA's appeal of the ruling, over 100,000 veterans' claims have been put in a pending status. That equates to thousands upon thousands of veterans who are waiting for the VA to help them pay their bills.

It is a fact that those most affected by the VA's noncompliance with the Emergency Care Fairness Act are elderly veterans, many of whom are living on fixed incomes and have limited resources to pay medical bills. Often these veterans find themselves dealing with collection agencies as a result of emergency care received in their communities. In an era where we know that more than 20 veterans commit suicide every day, with 65 percent of those veterans aged 50 years or older, this is unacceptable.

I want to tell a short story about a constituent of mine who was a veteran that was supposed to be covered by the Emergency Care Fairness Act. His name is Mr. Alfred Dymock. Mr. Dymock is 90 years old, and he served in the Army Air Corps during the Korean war. He flew over 100 combat missions during the war and earned a Bronze Star and Distinguished Flying Cross for his heroic service. Mr. Dymock receives all his medical care at the VA as a disabled veteran but also carries his Medicare Part A, as does nearly every American over the age of 65.

During a 1-month span earlier this year, Mr. Dymock collapsed twice in the middle of the night while he was in the bathroom. One time he hit his head and was bleeding. Because his 85-year-old wife was unable to pick him up, she appropriately called 911 each time. In both instances, the ambulance took him to Rapid City Regional Hospital, even though he requested to go to the Fort Meade VA hospital, the VA facility where he normally receives all of his care. The paramedics did not want to take him on the 25-mile drive to Fort Meade because they feared he was having a heart attack and may not survive even in that short of a drive. As a result of these two incidents, Mr. Dymock's emergency room bills totaled over \$44,000.

After Medicare Part A paid its share, Mr. Dymock still owes Rapid City Regional nearly \$10,000. The VA has denied Mr. Dymock's claims to cover this amount because he, like nearly every other American, is eligible for Medicare Part A.

The Dymocks do not own a home. They live in an apartment. They live solely on their Social Security and on Mr. Dymock's VA disability payments. If the VA continues to deny his claims, the Dymocks have no ability to pay these medical bills.

Today, Mr. Dymock is in hospice care with Stage 4 kidney disease and liver disease. His daughter writes to me that even as frail and ill as Mr. Dymock is, he wants to know before he dies that his bills are covered so he can have peace.

It was veterans like Mr. Dymock in Rapid City, SD, that Congress intended

to help when it passed the Emergency Care Fairness Act in 2009. Today I call on the VA to drop their appeal of the court's ruling and begin writing new regulations that comply with the law as Congress intended to properly reimburse our veterans for their emergency room care.

I fully understand there is a cost associated with this course of action. Taking care of our veterans and complying with the law in this case is not a cost issue. I believe it is a moral issue, and in this case, it is also a legal issue. Complying with the intent of the Emergency Care Fairness Act is also simply the right thing to do.

Should the VA agree, I stand ready to support them in their efforts to take care of our veterans and to give them medical care which they need, both from the VA and in the private sector.

While we certainly have a long way to go to fix VA health care, I fully believe that implementing the Emergency Care Fairness Act as it was intended is a step in the right direction. I look forward to working with the Secretary of the VA and my colleagues on the Senate Veterans' Affairs Committee on a broad range of initiatives that continue to improve health care for our veterans.

It is my goal to keep our veterans at the center of all we do. I urge my colleagues to join me in standing up for our veterans in supporting the Emergency Care Fairness Act of 2009.

Thank you, Mr. President.

I yield the floor.

The PRESIDING OFFICER. The Senator from Georgia.

21ST CENTURY CURES BILL

Mr. ISAKSON. Mr. President, first of all, I commend the Senator from North Dakota who is a Member of the Veterans' Affairs Committee for his diligent efforts, his thoughtful words, and all he does for veterans on the Health, Education, Labor, and Pensions Committee, and I appreciate what he said and support his efforts.

As a 71-year-old citizen of this country, one who has been in business, has been fortunate to be married 49 years to a wonderful woman and raised a family, one who has been in public life for 40 years, you learn that there are three kinds of people in the world: those who make things happen, those who watch things happen, and those who wonder what the hell is happening.

We have the chairman of the Health, Education, Labor, and Pensions Committee, Senator LAMAR ALEXANDER, who is one of those people who makes things happen. What we are going to do on the Cures bill in this body next week is nothing short of remarkable, but it is an example of somebody who cares and is ready to do the hard work that legislating can bring about.

It is a bill that incorporates many of the provisions of this administration and Members of this Senate, things that have been worked on for years and

things that will save and improve lives in America.

For me, it is personal for two or three reasons. One reason is the pediatric rare disease provision. In 2005 I met a young lady named Alexa Rohrbach. Alexa was 5 years old when I met her. She came to lobby me about finding cures for incurable diseases and incurable cancers. She had a cancer called neuroblastoma. She won my heart over. I have her picture in my office. I had dinner with her parents 2 weeks ago in Atlanta at the Rally Foundation annual dinner.

Alexa got her angel wings 2 years ago and is in Heaven looking down today, but I am testifying on Alexa's behalf that the more we can do to accelerate research and development for cures of rare diseases, the more we can make the lives of people happy and long, rather than short and sad. Alexa Rohrbach was an inspiration to me, and I speak today for the 21st Century Cures bill, in part, because of Alexa Rohrbach because if this bill had been in place before I met her in person, she would have been saved from the rare disease she had. We would not have to talk about her in the past tense but only in the present.

The second reason is, there are things I worked on for a long time that are coming to full fruition. One of the measures is home infusion. I have a wonderful son named Kevin, who was almost killed in an automobile accident when he was 18 years old in 1989.

Kevin got a bad leg infection. He had the bottom part of his leg blown off and lost a lot of the bone, and they had to put a lot of replacements in, a lot of metal rods. He had to lie in a hospital bed with antibiotics running through his system to keep his bone marrow from getting infected.

When he came home, for the next 6 months he had to be administered antibiotics daily. My wife and I administered those through home infusion. He was able to recover from this disease at home, in his own bed, with his own parents attending to him. Under the law today, for home infusion to be reimbursable, it is only reimbursable if you are in the doctor's office or if you are in the hospital. If you are doing it at home with visiting nurses or any other way, you can't do it.

What costs more, a hospital or home visit? Obviously, a hospital. This bill provides a way for us to find a way forward to reimburse home infusions at home. It is the safest, best, most efficient, and least expensive way to deliver home infusions, incentivized by the 21st Century Cures bill.

We also know that neurological diseases such as Parkinson's, MS, and Alzheimer's are more prevalent than ever before. They are the No. 1 disease for people my age and the generations to follow. This bill creates a neurological disease registry of all these diseases which have common characteristics to help the CDC in early diagnosis and early treatment. I, as one who suffers

from one of those diseases, can tell you the more you learn from one you can tell about another.

I commend Senator ALEXANDER in his efforts to bring that forward so we have a neurological disease registry that works, that we have an expedited review process for drugs of rare cancers in children, and so we do the things we need to do to cure the bad diseases of the 20th century so the lives of the people in the 21st century are better.

Chairman ALEXANDER is a unique individual. He is a former college president, a U.S. Senator, candidate for president of a university, and a great chairman of the Health, Education, Labor, and Pensions Committee. If we pass this bill as a trademark to him next week, it will be, in large measure, because of his belief that if you give everybody a chance to be a part of the same thing, whether Republican or Democrat, rich or poor, northerner or southerner, they will work together to do the right thing for the American people. Senator LAMAR ALEXANDER deserves our credit, deserves our appreciation, and I thank him for allowing me as a member of the committee to have the chance to work on the 21st Century Cures legislation.

REMEMBERING CARL W. KNOBLOCH, JR.

Mr. ISAKSON. Mr. President, I wish to pay tribute to a great American and a great Georgian who passed away last week in Atlanta, GA. The cities of Wilson, WY, and Atlanta, GA, lost a great citizen last week, America lost a great patriot, and philanthropy lost one of its greatest contributors.

Carl Knobloch passed away last Friday. Carl was a personal friend of mine and a unique individual and a unique inspiration to me and many others. He was a gentleman who went to the Hill School, then went to Harvard, and then went to Yale. He was a leading intercollegiate fencer and won an international medal for his intercollegiate fencing ability.

He went into business using everything he learned as a Baker Scholar at Yale University. He went into business. His first business was a drive-in theater in Zimbabwe. His second business was an oil and gas business in Africa. He then went on to build businesses all over the United States of America dealing with natural resources, dealing with gas and oil. He was a specialist in taking companies that were failing and turning them around and making them profitable. Do you know how he did it? He believed that everybody who had helped him succeed ought to have equity in the projects he succeeded in, so he made people who owned failing companies that he took over equity partners so that when he turned the company around, they profited from the work they put in to save the company. That is a great leader of business.

He also was a great subscriber to Theodore Roosevelt's great statement,

which he made as President of the United States, which I want to read verbatim:

The nation behaves well if it treats the natural resources as assets, which it must turn over to the next generation.

Therefore, a great American businessman, Carl Knobloch, formed the Knobloch Family Foundation to take much of his wealth and much of the wealth he gained and direct it toward saving the natural resources of the United States of America. Whether it was our wildlife, whether it was our land, whether it was our oceans, whether it was our plains, or whether it was our beach fronts, whatever it was, where he could save and conserve our assets, he did. He put most of his lifelong earnings into that.

He and his beautiful wife Emily were great friends of my family. Emily will miss him dearly, as I will miss him.

I know America is a better country today because of Carl Knobloch. The environment is safer in America because of Carl Knobloch. The United States of America has lost a great patriot and a great friend.

I pay tribute to my friend Carl Knobloch of Wilson, WY, and Atlanta, GA.

I yield the floor.

I suggest the absence of a quorum.

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

The bill clerk proceeded to call the roll.

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

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

AMENDING THE JUSTICE AGAINST SPONSORS OF TERRORISM BILL

Mr. GRAHAM. Mr. President, I would like to address the body for just a moment. Senator MCCAIN is on his way. We are talking about a problem we are trying to solve that is an important problem for our Nation as a whole and I think eventually for all of those who serve our Nation abroad.

Recently, we passed a bill 99 to 1—I cannot remember the number—that would allow victims of the 9/11 attack to bring a lawsuit under a claims act basically against a foreign entity, a government, for any complicity they may have had in the 9/11 attack.

I just want people to understand that basically here is the deal: Sovereign immunity exists for us. It exists for sovereign governments, but it is waived. If you get hurt by a Federal Government employee, even though sovereign immunity is available to the U.S. Government, we have a Federal Tort Claims Act, and you can bring a claim if somebody—if a postal truck hits you, you can bring a claim under the Federal Tort Claims Act. We waive sovereign immunity in limited circumstances. The same is true if you are in New York or Washington and someone driving a car, working for a