

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

TRAVEL BAN DECISION

Mr. MENENDEZ. Mr. President, I have come to the floor to speak on the nomination of Congressman PRICE to be the Secretary of Health and Human Services. But before I do, I must speak to the decision that the U.S. Court of Appeals for the Ninth Circuit just decided in the case of the State of Washington and the State of Minnesota v. the President and the Department of Homeland Security.

I am pleased to see that the courts of the United States are still part of the separate coequal branch of government that the Founders dictated when they ultimately created an ingenious document, the Constitution of the United States, which served the Nation well for so long, even though it seems the President may need a review of history and an understanding of the Constitution as it relates to the separate coequal branches of government, because he seems to be willing to try to disparage the judiciary in an effort to try to either effect their decisionmaking or to call into question the legality of their decisions or the righteousness of their decisions.

I am glad to see that that has not affected our judicial system. I just want to read some elements of the court's decision, which I think are pretty extraordinary. Of course, this is far from a final decision on the merits, but it was on a motion for a stay of the order of the district court that said, basically, that the Muslim ban could not be continued to be enforced.

The court said—and I am quoting—in a unanimous opinion which speaks very powerfully to their decision:

We therefore conclude that the States—

Meaning the State that brought forth—Washington, as well as the State of Minnesota—

that the States have alleged harms to their proprietary interests traceable to the Executive Order. The necessary connection can be drawn in at most two very logical steps: (1) the Executive Order prevents nationals of seven countries from entering Washington and Minnesota; (2) as a result, some of these people will not enter state universities, some of them will not join those universities as faculty, some will be prevented from performing research, and some will not be permitted to return if they leave.

We therefore hold that the States have standing.

That was one of the critical legal bars.

Secondly, they opined on the reviewability of the Executive order. This is, I think, extraordinarily important. The Court went on to say—I am paraphrasing at this point: Yes, the courts owe substantial deference to the immigration and national security policy determinations of the political branches—legislative and executive. But it went further to say:

Instead, the Government has taken the position—

This is on behalf of the executive branch—

that the President's decisions about immigration policy, particularly when motivated by national security concerns, are unreviewable—

Unreviewable—

even if those actions potentially contravene constitutional rights and protections. The Government indeed asserts that it violates separation of powers for the judiciary to entertain a constitutional challenge to executive actions such as this one.

I did not really capture that the government had made that argument. But that is an extraordinary argument. The court went on to say:

There is no precedent to support this claimed unreviewability, which runs contrary to the fundamental structure of our constitutional democracy. Within our system, it is the role of the judiciary to interpret the law, a duty that will sometimes require the "[r]esolution of litigation challenging the constitutional authority of one of the three branches." We are called upon to perform that duty in this case.

Further they say: "Although our jurisprudence has long counseled deference to the political branches on matters of immigration and national security, neither the Supreme Court nor our court has ever held that courts lack the authority to review executive action in those arenas for compliance with the Constitution."

That is an extraordinary set of statements that the government made, saying that the President's actions are unreviewable in this regard.

They further go on to say: "Nonetheless, 'courts are not powerless to review the political branches' actions' with respect to matters of national security."

It would indeed be ironic if, in the name of national defense, we would sanction the subversion of one of those liberties which make the defense of the Nation worthwhile.

Well, I fully agreed with the circuit court's determination in that regard.

It goes on to say: "In short, although courts owe considerable deference to the President's policy determinations with respect to immigration and national security, it is beyond question that the Federal judiciary retains the authority to adjudicate constitutional challenges to executive action."

Well, all I can say is, thank God. Thank God that the courts of the United States feel that they are not controlled by the executive branch in pursuing the decisions that are made. This is a great day for democracy in our country and for the preservation of the separation of powers. This is a great day, I think, from my own perspective, that a ban that does not help the United States but harms us and is against every fiber of our being and the nature of the history of our Nation, which was founded by those fleeing religious persecution—ultimately, today, we restore that sense of our history, and we restore who we are as a nation both at home and across the world.

But today's decisions in this regard are also important as we consider the nomination of Congressman PRICE, so I

want to rise today, along with so many of my colleagues, to voice my strong opposition to the confirmation of Congressman PRICE to be the Secretary of Health and Human Services.

I am deeply concerned about his views on what is the core mission of Health and Human Services, not only his career-long opposition to the very existence of Medicaid and Medicare but his wavering fidelity in science and his regressive views of women's health care and the social safety net.

The Secretary of Health and Human Services is one of the few Cabinet positions that affect virtually every single man, woman, and child in America. It affects the health care of 56 million seniors on Medicare, of 74 million low-income individuals and children on Medicaid, and of 12 million Americans who have enrolled in the Affordable Care Act coverage. But more than that, the Department of Health and Human Services is home to the world's leading institutions of research at the National Institutes of Health, of advancing public health and epidemiology at the Centers for Disease Control and Prevention, known worldwide, of working to ensure that we have access to the most advanced, most effective, and safest medications at the Food and Drug Administration, and many other critical departments and agencies that we as Americans rely on.

Many of our Republican colleagues have pointed out that Congressman PRICE's history as an orthopedic surgeon is enough evidence that he is someone who should be in charge of the Department of Health and Human Services. I can't speak to his credentials and qualifications in the operating room, but I do have a constitutional obligation to speak about his credentials and qualifications to be the Secretary of Health and Human Services. So I can say without hesitation that his career in Congress and his positions on key issues of policy have proven to me that he is not the right person for the job.

Throughout his time as a congressman—most recently as the chairman of the House Budget Committee and during his confirmation process through the Senate Finance Committee, on which I am privileged to serve—it has become abundantly clear that Congressman PRICE views patients, including seniors on Medicare and even those with private employer coverage, as nothing more than a source of revenue or a budget line item. The characteristics that had defined Congressman PRICE's career run contrary—to the fundamental mission of the Department of Health and Human Services, and it should be a cause for concern across the aisle and across the country.

Despite the alternative reality portrayed during his confirmation hearings in both the Finance Committee and the Health, Education, Labor, and Pensions Committee, Congressman PRICE's vision for our Nation's health

care system has been laid bare for the public to see for years. All one has to do is look at the legislation he has introduced and the radical budget proposals he, along with Speaker RYAN, has been pushing through the House of Representatives. Let's look at some of them.

Let's start by taking a look at his plan for Medicare, which is, by all intents and purposes, a plan to fundamentally end Medicare as we know it, end Medicare as we know it. Despite Congressman PRICE's seeming denial of this fact, when I asked him about it directly during his confirmation hearing, there is absolutely no other way to characterize his plan: It ends Medicare as we know it.

Currently and for more than 50 years, Medicare has provided a guarantee—a guarantee; that word is critical—to seniors that they will have coverage, access to care, and the ability to rest assured that their health care needs will be taken care of. It is a system into which they paid their entire working lives and a compact that has been made with the Federal Government that we will uphold our end of the deal and ensure that they have quality coverage to stay healthy.

The Affordable Care Act, despite the years-long gnashing of teeth and fake tears shed by some of my Republican colleagues, has improved upon this deal and made Medicare stronger. It has extended the life of the Medicare trust fund by more than a decade. It has saved seniors \$27 billion on prescription drugs and last year alone provided more than 40 million seniors access to no-cost preventive services—no-cost preventive services. In my home State of New Jersey last year, seniors on Medicare saved more than \$263 million on prescription drugs, and nearly 1 million seniors were able to receive free preventive services.

Additionally, thanks to the law's health care delivery system reforms, we are seeing far fewer hospital-acquired conditions and greater coordination of care that has resulted in a healthier population and a more efficient health care delivery system. That reality stands in stark contrast to TOM PRICE's vision of what he thinks Medicare should be and in stark contrast with the vast majority of seniors who want to protect the program for their loved ones and for themselves.

Unfortunately, President Trump, who himself spent an entire campaign promising that he is “not going to cut Medicare or Medicaid,” nominated a leading member of this radical anti-Medicare movement to impose devastating cuts to the program, force seniors to pay higher costs, and lower the quality of care throughout the health care system.

Congressman PRICE's destructive legislative history on Medicare does not lie. It is there. It is in the record. It is there for anybody who wants to see it. It tells a stark truth about his desire to increase the eligibility age, about

ending the guarantee—the guarantee of coverage.

You know, that is why we call it an entitlement. If you meet the criteria under the law, you are entitled to those health care services; you are guaranteed those health care services. But his whole legislative history is about ending the guarantee of coverage we currently have and replacing it with the possibility of coverage. The difference between a guarantee and a possibility is a far, far too significant gulf to be able to overcome—but only if you can afford the difference between Congressman PRICE's coupon and the actual cost of care under his vision. The Congressional Budget Office has shown that this will unquestionably increase costs for seniors.

His dark view of Medicare, that—to quote Congressman PRICE—“nothing has a greater negative impact on . . . health care than the Federal Government's intrusion . . . through Medicare”—that is an extraordinary statement. I am going to quote it again. “Nothing has a greater negative impact on . . . health care than the Federal Government's intrusion”—intrusion, mind you—“through Medicare.” That is understandably causing a lot of concern back home in New Jersey. Many people have been calling and writing me to express their thoughts.

Dr. William Thar of Summit, NJ, himself a retired physician of more than 50 years, wrote in that PRICE's “willingness to privatize Medicare indicates a lack of concern for Americans who need health care coverage.”

I also heard from Cara Davis of Glen Ridge, NJ, who wrote in on behalf of her uncle, who has end-stage renal disease and requires dialysis, saying, “If [Price] and the Trump administration successfully move Medicare to a voucher program”—again, that is different from a guarantee—“I fear that my uncle will not be able to afford the necessary coverage for his dialysis treatments.”

For me, the battle to protect Medicare is more than a political battle; it is more than a theoretical battle; it is a deeply personal battle to protect a program that allows seniors to live with dignity during the twilight of their lives.

My personal connection to the value of the Medicare Program stems not from my experience but that of my late mother, Evangelina. For 18 long, difficult years, my mother suffered from Alzheimer's disease. During those years, we watched as this strong, courageous woman drifted further and further away from us. After her diagnosis, I, like so many families across our Nation, hoped for the best, but we expected the worst. And while there were times early on when she seemed just fine, those times turned into lost moments, and those lost moments eventually lasted forever.

At this point, I had to wonder if all the moments of her life—her struggle to flee her homeland and seek freedom

in the United States, of my youth and all of the time spent together—were still in there, still with her somehow, or whether those memories were lost forever.

As her illness progressed, she lost her cognitive abilities, and eventually we had to admit to ourselves that our mother was no longer with us, until, mercifully, the Good Lord took her, and the long goodbye came to an end.

Throughout this experience, throughout her struggle of fighting back against the progress of Alzheimer's, our family knew that Medicare would be there to provide her with access to the health care she needed. I learned that Medicare wasn't just there for her; it was there for the rest of us, too, providing her with access to care, while granting us the ability to focus on making the most of the limited time we had together.

Medicare was there to meet the challenges of her illness as well as the intergenerational challenges that arise when caring for a parent in the twilight of their lives while simultaneously working to put your own children through college. I lived it, I saw it, and I understand it. My mother would not have lived with the dignity that she deserved in the twilight of her life after working a lifetime and paying for Medicare, but for Medicare as a guarantee.

I know all too well that an underfunded voucher would undermine Medicare's ability to live up to the responsibility that we have to care for one another and to provide that same dignity to seniors as they and their families prepare to say good-bye for the last time.

That is why I couldn't agree with Dr. Thar or Ms. Davis more, and I share their concerns about what Congressman PRICE has in mind, despite the repeated pledges from President Trump to the contrary for the future of Medicare.

My concerns about Congressman PRICE don't stop with his desires to end Medicare, because those desires also extend to end Medicaid, as we know it, as well. His desires to end Medicaid are really a two-front war. The first is to repeal the highly successful expansion of Medicaid provided for under the Affordable Care Act, which has extended lifesaving care and coverage to over 200,000 New Jerseyans, many of whom are covered for the first time.

Nationwide, the Affordable Care Act's Medicaid expansion is one of the most successful aspects of health reform. Currently, 32 States and the District of Columbia have taken advantage of Medicaid expansion, making coverage available to 11 million people, because they recognize the value in providing people with coverage, with access to preventive care, with the ability to manage chronic conditions—all of which lead to a healthier, more productive population.

The second is to eviscerate funding from Medicaid by taking away the current funding structure and replacing it

with a block grant or some other form of arbitrary underfunding that they mask as allowing for “state flexibility.”

We have seen this picture before. Take away an obligation, an entitlement, move it to a block grant, underfund it, and ultimately slay that opportunity for people to have a guarantee.

We all know what is meant when Congressman PRICE talks about State flexibility. He means the flexibility to slash enrollment and deny people access to coverage. He means forcing States to choose between cutting payments to doctors for treating low-income Medicaid patients or cutting other vital State services like education and infrastructure. He means unraveling Medicaid benefits so that for those few still able to enroll, they won't have adequate coverage for most of the health care issues they need treated. It means simply putting his radical ideological opposition of the Federal Government being involved in health care ahead of the lives of millions of men, women, children, and seniors and the disabled across the Nation. That is truly remarkable for a man who took the oath to “first do no harm.”

As with his views on Medicare, his desire to end Medicaid expansion has caused a lot of people from New Jersey to write me about their concerns. I would ask Congressman PRICE and other like-minded Republicans to consider carefully the stress and potentially devastating impacts these policies have on real people—real people like Jolie Bonnette from Brick, NJ, who wrote to me about how she was able to finally gain access to health coverage, thanks to Medicaid expansion. She wrote: “Without this care and my Medicaid medication coverage, I would have died, because I would have no access to doctors or medications.”

Jill Stasium from Jersey City wrote in saying that thanks to Medicaid, “[I] have been receiving top quality health care for the first time in my life.”

I ask my colleagues how the mantra of State flexibility, which is just another way of ensuring funding for Medicaid is slashed and access to life-enhancing treatment is denied, is going to impact Ms. Bonnette and Ms. Stasium. I ask how they can justify taking away their coverage—coverage that has provided, for the first time in their lives, not only the peace of mind of having health insurance, but also it is the first time they have had regular access to the doctors and medication necessary to live.

How do we justify that? We can't do it on the basis of State flexibility and surely not on the basis of a 6-year-long political vendetta against the Affordable Care Act. Yet somehow, with this nominee and this Republican Congress, this is something that we are all going to have to justify to every single one of our constituents.

Unfortunately, the list of destructive policies supported by TOM PRICE

doesn't end with his desires to end Medicare as we know it and to dismantle Medicaid. This is also not surprising given the Republican agenda for the last 7 years to repeal the Affordable Care Act, throw millions of Americans off their health insurance, and return us to the dark ages where insurance companies have free rein to deny coverage for preexisting conditions, cancel coverage after a devastating diagnosis, limit what benefits are covered, and discriminate against women. That is what the marketplace was before the Affordable Care Act.

Now, this is not new. The Republicans have been trying to repeal health care reform and deny millions of Americans health care coverage since before the law was even passed. It has sadly become dogma for Republicans—dogma to repeal ObamaCare, which they voted to do 60-some odd times. But now, after 7 long years, the chickens have come home to roost.

They now have the ability to live up to their dream of repealing the law, but are starting to realize what the implications are—starting to realize that real people will face real life-and-death situations that result from Republicans putting partisan ideology ahead of the well-being of their constituents, starting to realize that on-the-ground implications of the Affordable Care Act mean real people receiving real treatment for real health conditions.

One of these people is David Konopacki from South River, NJ. David is a diabetic who, thanks to the Affordable Care Act, no longer has to choose between paying for college and paying for the medication he needs. David put it so succinctly: “The Affordable Care Act is literally the difference between life and death for so many.”

The same holds true for Mrs. Lori Wilson from Morristown, NJ. Her son, like David, has diabetes and has had diabetes since birth. As she writes, her son “is just one citizen among millions whose life, literally, depends on access” to care, and under the Price Republican plan, that access is denied.

I mentioned that repealing the Affordable Care Act means reinstating the ability of insurance companies to deny coverage for preexisting conditions. As diabetics, these folks would find it impossible—certainly, financially impossible—to find coverage that would allow them to get their medications and see their physicians. That is what is shocking about TOM PRICE. Despite knowing full well that the ban on preexisting conditions is one of the most widely supported and critically important aspects of the Affordable Care Act, he considers it to be a “terrible idea.”

Let me say that again. TOM PRICE's views on health care are so radical that he thinks insuring people with preexisting health conditions—like diabetes from birth—and guaranteed access to coverage is a “terrible idea.” That is an extremely callous way to put ideology above people's lives.

Let me close on this. I have spoken about the many reasons I am opposed to Congressman PRICE's nomination to run the Department of Health and Human Services, including his long-held opposition to Medicare. But above all else, one of the reasons I am opposing Congressman PRICE is because of the seeming lack of fidelity to the one thing that runs at the heart of health care and the heart of the Health and Human Services Department, which is science.

For years Congressman PRICE has been a member of a group called the Association of American Physicians and Surgeons. This is a group of so-called doctors who push dangerous conspiracy theories and widely debunked claims that have serious implications for the public health. The prime example of this is their assertion, despite all evidence to the contrary, that vaccines aren't safe and that they cause autism. Nothing could be further from the truth. In fact, this week I received a letter signed by 350 organizations, including several from New Jersey and several representing the autism community, restating the fact that “vaccines are the safest and most cost-effective way of preventing disease, disability, and death” but unfortunately, because of widespread misinformation, the United States “still witnesses outbreaks of vaccine-preventable diseases,” including the biggest outbreak of whooping cough since 1955, and the fact that we have upwards of 50,000 deaths a year from complications of vaccine-preventable influenza.

While TOM PRICE, personally and as a physician, might understand these basic facts, what worries me most is that the President of the United States does not, posting on Twitter for years that vaccines are dangerous and appointing anti-vaccine conspiracy theorists to critical posts in the White House and possibly to key positions within the Department of Health and Human Services.

When I asked Congressman PRICE directly about his fidelity to science and his willingness to stand up to the President about adhering to science as the guiding principle at the Department of Health and Human Services, his answers were far less than satisfactory, and he left me with the impression that he is unwilling to counter the President when he touts untrue claims about health care and ensure that personnel within HHS are stewards of sound science and not ideology.

For the Department that oversees the Centers for Disease Control, which is the global beacon of health care that must be focused on science, that is simply incredible.

I rise today to give my voice in opposition to Nominee TOM PRICE as the next Secretary of Health and Human Services, and I rise to be the voice of Dr. William Thar, Cara Davis, Jolie Bonnette, Jill Stasium, David Konopacki, Lori Wilson and the over 6,000 New Jerseyans who have called

and emailed me to vote in opposition to TOM PRICE's nomination. I will do that when it comes time for a vote.

With that, I yield the floor.

Mr. LEAHY. Mr. President, the Cabinet nomination we are considering today is one of great consequence. The reach of the Department of Health and Human Services is extensive, with direct and indirect consequences for the health and well-being of all Americans. Like many other nominations that this body is rushing to confirm, Representative PRICE has not satisfied the many questions that have been raised about his ability to defend programs that are vital to so many Americans. In fact, his record in Congress runs counter to these goals.

I have always believed that all Americans deserve access to quality, affordable health care. We made a tremendous step in this direction through the Affordable Care Act, ACA, which has extended health insurance coverage to more than 20 million Americans and their families through cancer screenings, immunizations, and preventative health care at little or no cost-share. The law has ensured that vulnerable populations have access to quality care through State expansions of Medicaid. The ACA stopped insurance companies from discriminating against women, seniors, and individuals with preexisting conditions. And it has already saved taxpayers billions in Federal health care costs, while bolstering reserves for our Nation's Medicare and Social Security Trust funds.

Unfortunately, Representative PRICE does not see it this way. As one of the first lawmakers to draft legislation calling for the full repeal of the ACA, Representative PRICE believes that health care should once again be under the largely unfettered control of big businesses and insurance companies. He may say that he wants more Americans to have "access to affordable coverage," but his record in the House shows otherwise.

It is not only the Affordable Care Act that Representative PRICE has put in the crosshairs, but virtually every Federal, health program. Representative PRICE's track record in opposing programs like Medicaid, Medicare, and Social Security is extensive. As Congressman, he has proposed dissolving or block granting Medicaid and replacing Medicare with vouchers, unadjusted for income, for consumers to purchase private plans on the market. In November, he released an agenda proposing across-the-board cuts to Medicare, Medicaid, and Social Security. He has also long fought against women's healthcare and access to family planning services. And he has advocated banning abortions and abolishing funding for Planned Parenthood, which would make it far more difficult for women to have access to health care.

Medicare, Social Security, and Medicaid are crucially important to patients and their families. Medicaid provides vulnerable populations, including

children, with essential and comprehensive health benefits, like mental health care and substance abuse treatment, which are required to be covered by Medicaid under the ACA. And for decades, Medicare and Social Security have offered health care protections to low-income Americans and seniors, offering guaranteed resources in retirement. These are earned benefits that hard-working Americans have paid into throughout their lives. It is only fair that these people should expect to have these resources when they enter retirement.

We cannot deny the vital health protections of Medicaid, Medicare, and Social Security to our Nation's families. And I cannot in good conscience support someone who does not share this game goal. Lives, literally, are at stake.

I am also deeply concerned about allegations of Representative PRICE's violation of the STOCK Act, which prohibits Members of Congress from making investment decisions based on information they receive as a result of their roles in Congress. Serious questions of his all-too-coincidental trading with medical companies, after introducing legislation that supports these very companies, are troubling, and signal that this nominee is unfit to lead the very agency responsible for protecting the health of Americans.

I am glad the minority members of the Senate Finance Committee refused to join the business meeting scheduled to move Representative PRICE's nomination last month. There remain serious questions relating to potential conflicts he would have as Secretary. Despite these concerns, Republicans on the Finance Committee made the unprecedented decision to change the rules and confirm Congressman PRICE without even one Democratic member present. This move runs counter to the majority's own rules. But more importantly, it contradicts what we stand for in promoting the interests of Americans as their elected officials.

If confirmed, there are valid reasons for the American people to be concerned that Representative PRICE's agenda will make its way into the Department of Health and Human Services, and Americans will suffer for that. It is the responsibility of this agency to uphold and protect the well-being of the people of this great and good country, and it would be counter to this goal to allow someone like Representative PRICE to oversee such efforts. That is why I will strongly oppose his nomination, and I encourage all in the Senate to do the same.

Mr. UDALL. Mr. President, I rise today to oppose the nomination of Congressman TOM PRICE to be Secretary of the Department of Health and Human Services.

I oppose the nomination because Mr. PRICE wants to dismantle America's health care system—with no guarantee that Americans will continue to receive the health care coverage they

now enjoy. He is part of the Trump "repeal with no plan" contingent.

In my view, any repeal of the Affordable Care Act must be coupled with a program that has rock solid guarantees to the American public, guarantees that Americans will not lose the health care benefits they now have.

Further, I oppose any vote on Mr. PRICE's nomination until there has been a full investigation and disclosure to the American public of his conflicts of interest. Mr. PRICE has invested in companies just prior to introducing legislation that would benefit those very companies. Before we vote on Mr. PRICE, the American public needs a full accounting whether his investments comply with Federal insider trading laws and ethical provisions.

The President's first order of business was an attack on Americans' health care. His Executive order gives Federal agencies broad authority to grant waivers, exemptions, and delays of provisions in the ACA. As Secretary of Health and Human Services, Mr. PRICE will be given rein not only to grant waivers but to not enforce key ACA provisions and to pass regulations that undercut ACA protections. For example, undermining the individual mandate—a key target of Mr. PRICE's—could lead to collapse of the individual health insurance market and drive up premiums for everyone.

The ACA has resulted in the broadest health care coverage Americans have ever known. Now over 91 percent of Americans have health insurance.

In my own State of New Mexico, the number of uninsured has dropped by over 50 percent. New Mexico is not a wealthy State. We had one of the highest rates of uninsured in the country before the ACA—19.6 percent. That's almost one in five people. Now, only 8.9 percent of New Mexicans do not have insurance. This is still too high, but it is a big improvement.

Americans strongly support ACA protections. Almost 70 percent of Americans think insurance companies should not be able to deny insurance because of a preexisting condition. Eighty-five percent of Americans want their young adult children to be able to get coverage on their insurance policies. Eighty-three percent think preventative services should be free.

The Republicans and Mr. PRICE have no plan to make sure Americans do not lose these rights and benefit.

Now, the ACA is not perfect. We all know this. It needs improvement. It needs work. But the solution is not to throw the health care system into chaos with no plan. The solution is to work together on a bipartisan basis and fix the ACA's problems.

Hundreds of my constituents have called and written asking me to protect the ACA. New Mexicans are scared—really scared—that their health care will be taken away. People are scared their health is in jeopardy. For some, they are scared their lives will be put at risk.

I am angry that the President, Mr. PRICE, and the Republicans have created so much fear and worry among my constituents and around the Nation. None of them has to worry whether their children will get the health care they need. My constituents now do.

Kevin, from Albuquerque, now has to worry whether his 33-year-old daughter Amber will get the health care she needs. Amber has multiple sclerosis. That is a tough disease. I talked about Amber once before here, and her story bears retelling.

Amber's annual medical costs are high. Her medications alone are \$60,000 a year. Her doctor visits and MRIs run into the thousands of dollars.

But Amber now has health insurance through the open market thanks to the ACA. And, thanks to the ACA, she is healthy. She works. She leads a productive life.

Without the ACA, Kevin worries his daughter will be kicked off her health insurance plan because her medical expenses are so high and that she will not be able to get new health insurance—because of her preexisting MS. For Amber and Kevin, the ACA's protections mean everything.

There are literally hundreds of thousands of New Mexicans and millions of Americans like Amber. This one ACA provision—prohibiting discrimination based on preexisting illness—protects an estimated 861,000 New Mexicans and 134 million Americans. If we ourselves don't have a serious illness like Amber, we have a family member or friend who does.

Same with people who have high medical costs. These are the people who need medical care the most. The ACA provision—prohibiting lifetime benefit limits—protects an estimated 555,000 New Mexicans and 105 million Americans.

Why is there even any discussion about jeopardizing millions of Americans' health care?

The ACA saves lives. It saved Mike's life. Mike and his wife, Pam, are from Placitas, NM. Before the ACA, they didn't have insurance. They couldn't afford it and probably couldn't get it for Pam because she had a preexisting illness.

As soon as they could, they signed up for an insurance plan under the ACA. Using their new preventive care services, they found out Mike had an aggressive form of cancer. Thankfully, they caught it early. Mike was treated at the University of New Mexico Cancer Center and is cured.

Pam says there is "no question" that the ACA saved her husband's life.

Hundreds of thousands of New Mexicans and millions of Americans benefit because the ACA requires health insurance companies to provide free preventative services. It is well documented that such services prevent illness, save lives, and save money in the long run.

I am also concerned about the impact ACA repeal would have in Indian Coun-

try. During his confirmation hearings, Congressman PRICE was asked specifically about the devastating consequences Medicaid expansion repeal would have on Indian health providers. These providers depend heavily on this Federal funding to provide lifesaving services to our Native communities. Any reduction in Federal funding to these facilities would be unconscionable.

But Congressman PRICE has a clear record of voting to support the elimination of the Medicaid expansion and, when asked directly, could offer no solution for making Indian Country whole if this funding were to be cut. Nothing in his hearing or written answers has assured me that Congressman PRICE intends to protect Native communities from the negative impact of ACA repeal.

And, finally, ACA repeal would be devastating to my State's economy. That is what a Ph.D. economist from New Mexico State University told the New Mexico Legislature last week. Dr. Jim Peach said ACA repeal would be "devastating" to our State.

As I said, New Mexico is not a wealthy State. We have one of the highest unemployment rates in the country, at 6.6 percent.

But the ACA has been an economic boon for us. Seven of the 10 fastest-growing job categories in New Mexico are in health care. In fact, boosts from health care and tourism actually led to positive job growth for the last 2 months. So health care jobs are of critical importance in New Mexico.

But, if the ACA is repealed, it is estimated New Mexico could lose between 19,000 and 32,000 jobs. I can tell you right now New Mexico cannot take that kind of hit in its employment numbers.

And, the loss in spending in New Mexico would be astronomical.

ACA repeal would mean a loss of \$93 million in Federal marketplace spending in 2019 in New Mexico and \$1 billion between 2019 and 2028.

It would mean a loss of \$2.2 billion in Federal Medicaid funding in 2019 and almost \$27 billion between 2019 and 2028.

This hit to our economy would be immediate and would be sustained. Tax revenues would decrease. And the New Mexico legislature is struggling mightily now how to balance the State budget.

The fact is no State budget is ready to take on the extra load if the ACA is repealed and health care gets pushed back to the States. We will go back to the days of no care, uncompensated care, and use of taxpayer-subsidized ER services as a last resort.

But Mr. PRICE and the Republicans are not talking about any of the damage in human or fiscal terms if the ACA is repealed.

In fact, they are already moving to undermine the Affordable Care Act, roll back its protections, reduce assistance to families, create chaos in the in-

surance markets—by executive action alone.

President Trump's Executive order directed his government not to implement the Affordable Care Act wherever possible under existing law. And we cannot be confident they will not bend the law in pursuit of this Presidential decree.

I cannot support a nominee to head our health care system who is not firmly committed to maintaining the health care coverage Americans now have. And who will not push—and push hard—for the right of every American to have health care.

Finally, I cannot support holding a vote on Mr. PRICE until all financial conflicts of interest of his have been fully vetted and the American public knows there has been no violation of law or ethical responsibilities.

Mr. PRICE is a wealthy man, like so many of Mr. Trump's cabinet nominees. And he has tried to increase his wealth by investing in health-related companies. It is widely reported—in the Wall Street Journal and elsewhere—that Mr. PRICE has made over \$300,000 worth of investments in health-related companies—companies that could benefit from his legislation.

We are all familiar with the STOCK Act. It applies directly to us and prohibits us from using inside information that we obtain through our positions as Members of Congress for personal gain.

There are serious questions whether Mr. PRICE's investments ran afoul of the STOCK Act.

I would like to refer to a February 7, 2017, column from the New York Times discussing Mr. PRICE's widely reported investments. So, a first example, in March of last year, Congressman PRICE announced opposition to a Medicare measure that would limit the money doctors could make from drugs they prescribe their patients. The proposal was meant to reduce doctors' financial incentives to prescribe expensive drugs.

Makes sense—we don't want doctors to prescribe more costly drugs because they would personally benefit.

But, just 1 week later, Mr. PRICE bought stock in six pharmaceutical companies that would benefit if this consumer protection measure were defeated.

And then, at the very same time, those very same companies were lobbying Congress to block the measure. And Big Pharma succeeded.

A second example—last year, he purchased shares in Zimmer Biomet, a company that makes hip and knee implants.

Six days later, he introduced a bill that would have directly helped Zimmer. His legislation sought to delay a Federal regulation that would have changed payment procedures for Zimmer. In fact, Zimmer was one of two companies that would have been hit the hardest by the regulation.

Mr. PRICE has said his broker bought the Zimmer stock. But these circumstances warrant investigation.

And, bottom line, Mr. PRICE is responsible for his investments.

A third example—last summer, Mr. PRICE was offered a special deal—to purchase shares at deeply discounted price from Innate Immunotherapeutics, an Australian drug company. He got in at 18 cents a share—at a time the stock value was increasing rapidly, rising to more than 90 cents a share. The value of his shares rose more than 400 percent.

At the same time, Innate Immuno needs Federal Drug Administration approval for one of its drugs.

This deal raises questions whether Mr. PRICE gained from an investment opportunity—unavailable to the public—from a company whose profits could be influenced by his political decisions.

A Cabinet nominee should not come into office under a cloud of conflicts. A vote on his nomination before there is full inquiry into his investments and ethical behavior is premature.

For these reasons, I will vote no on the nomination of Mr. PRICE as Secretary of Health and Human Services.

I ask unanimous consent that the New York Times column I referred to be printed in the RECORD.

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

[From the New York Times, Feb. 7, 2017]

TOM PRICE, DR. PERSONAL ENRICHMENT

(By David Leonhardt)

Each year, a publication called Medscape creates a portrait of the medical profession. It surveys thousands of doctors about their job satisfaction, salaries and the like and breaks down the results by specialty, allowing for comparisons between, say, dermatologists and oncologists.

As I read the most recent survey, I was struck by the answers from orthopedic surgeons. They are the highest-paid doctors, with an average salary of \$443,000 in 2015—which, coincidentally, was almost the exact cutoff for the famed top 1 percent of the income distribution.

Yet many orthopedists are not happy with their pay. Only 44 percent feel “fairly compensated,” a smaller share than in almost every other specialty. A lot of orthopedists aren’t even happy being doctors. Just 49 percent say they would go into medicine if they had to make the decision again, compared with 64 percent of all doctors.

I know that many orthopedists have a very different view: They take pride in helping patients and feel fortunate to enjoy comfortable lives. But despite those doctors, it’s clear that orthopedics suffers from a professional culture that does not live up to medicine’s highest ideals. Too many orthopedists are rich and think it’s an injustice that they’re not richer.

This culture helped shape Dr. Tom Price, the orthopedic surgeon and Georgia congressman who is Donald Trump’s nominee for secretary of health and human services.

Price had a thriving practice near Atlanta before being elected to Congress in 2004. His estimated net worth of more than \$10 million (and possibly a lot more) makes him one of the House’s wealthier members.

Yet he hasn’t been content to make money in the standard ways. He has also pushed, and crossed, ethical boundaries. Again and again, Price has mingled his power as a congressman with his desire to make money.

So far, the nominee receiving the most attention is Betsy DeVos, Trump’s choice for education secretary, and she definitely deserves scrutiny. Still, I think Democrats have made a mistake focusing so much on her rather than on Price. He could do more damage—and his transgressions are worse than those that have defeated prior nominees.

Last March, Price announced his opposition to a sensible Medicare proposal to limit the money doctors could make from drugs they prescribe their patients. The proposal was meant to reduce doctors’ financial incentives to prescribe expensive drugs. (And, yes, if you’re bothered that your doctor has any stake in choosing one drug over another, you should be.)

One week after Price came out against the proposal, he bought stocks in six pharmaceutical companies that would benefit from its defeat, as Time magazine reported. At the time, those same companies were lobbying Congress to block the change. They succeeded.

It’s a pattern, too. Price has put the interests of drug companies above those of taxpayers and patients—and invested in those drug companies on the side.

Last year, he also bought shares in Zimmer Biomet, a maker of hip and knee implants. Six days later, according to CNN, he introduced a bill that would that have directly helped Zimmer.

In his defense, a spokesman for Price has said that his broker bought the Zimmer stock and Price didn’t find out until later. That’s certainly possible, but still not acceptable. Members of Congress bear responsibility for their personal stock transactions, period.

A third episode may be the worst. Price accepted a special offer from an Australian drug company to buy discounted shares, as The Wall Street Journal and Kaiser Health News reported.

He told the Senate that the offer was open to all investors, although fewer than 20 Americans actually received an invitation to buy at the discounted price. The stock has since jumped in value, and Price underreported the worth of his investment in his nomination filings. It was a “clerical error,” he says.

Even without any larger context, his actions are disqualifying. He’s repeatedly placed personal enrichment above the credibility of Congress. The behavior is substantially worse than giving money to an illegal immigrant (which defeated a George W. Bush nominee) or failing to pay nanny taxes (which scuffled a Bill Clinton nominee).

But of course there is a larger context. Price has devoted much of his political career opposing expansion of health insurance. His preferred replacement of Obamacare would reduce health care benefits for sicker, poorer and older Americans.

His views have a long history within the medical profession. For decades, doctors used their political clout to help block universal health insurance. They offered many rationales, but money was the main reason. Many doctors feared that a less laissez-faire health care system would reduce their pay.

It’s to the great credit of today’s doctors that they have moved their lobbying groups away from that position and helped extend insurance to some 20 million people. They understand that some principles matter more than a paycheck.

Or at least many of them do.

The PRESIDING OFFICER. The Senator from Washington.

Ms. CANTWELL. Mr. President, I come to the floor this evening to continue my remarks from earlier today in

opposition to the nomination of Congressman PRICE to be Secretary of Health and Human Services and to continue talking about the Medicaid program.

My colleague from New Jersey was talking about the affordability of health care in general and some of the critique about where we are going with health care in the future. That is really what I think the next few years here in the Senate are going to be about—the future of health care.

Unfortunately, the nominee before us is more about the past of health care, focusing on issues like fee-for-service instead of the patient-centric health care that we need.

Earlier today, I was talking about the innovation that is happening in Medicaid through the Affordable Care Act and, specifically, what is happening in Midwestern States, Eastern States, Southern States, and Western States—how the expansion of Medicaid is not just giving more people access to health care but how innovative programs that are reaching that population are allowing people, instead of going into nursing home care and costing States more and having more expense, going into community-based care and home-based care that will help us keep costs down and give patients what they want: the ability to stay at home and have care.

I also talked about how, on top of the Medicaid expansion, we put a program like the Basic Health Plan into place, which drove down the costs of premiums for people in that program.

Through Medicaid, not only have we expanded health insurance by helping states cover their citizens, but the uninsured rate has also dropped. I mentioned that in our State of Washington, it dropped to just 6 percent. Through delivery system reforms, we are also driving a better way for us to improve the Medicaid Program.

Now I want to contrast that to the position of this administration and to Congressman PRICE, because it is a very different view. As I said, I think it is a very backwards-looking view about what we need to improve our health care system. I want to make sure that our colleagues on both sides of the aisle understand this.

Now, my biggest concern is that the current administration and members of that administration are talking about what they want to do with Medicaid. I know that Speaker RYAN has said that he would like to block-grant Medicaid back to the States. This may sound like some great idea until you realize that, right now, Medicaid is already a state option. Medicaid is a voluntary program for States to participate in. The money goes back to the State based on the need. It is not block-granted.

I talked earlier today about when you block-grant it and cap it at a certain level, you are asking people to do more with less. Instead of addressing their needs and improving the system,

like I mentioned on rebalancing to community-based care versus nursing home care, or making it more affordable like in the Basic Health Plan, all you are doing is capping it and continuing to give an amount of money that doesn't meet the needs of individual citizens. So I did not like the fact that Speaker RYAN seems to be on this parade of saying: Let's block-grant Medicaid.

The reason we came to this is that my dear colleague from Vermont came to the Senate floor one night and showed a tweet from—I think it was actually then-Candidate Trump, but it might have been President Trump—that said: No, I am not touching Medicare or Social Security or Medicaid. My colleague from Vermont wanted to know whether the President was going to stick to that promise. What has happened since then is we have seen that there has been a promise, so to speak, on some of these programs, but not on others.

I know Vice President PENCE said that he and Donald Trump will give States new freedom and flexibility through block-granting Medicaid. So they are for this idea of block-granting Medicaid.

In fact, White House Counselor Kellyanne Conway said: block-grant Medicaid to the States.

So many on the other side are saying you are going to keep your health care; don't worry, it is going to be there for you; no one is going to lose it. I guarantee that if we block-grant Medicaid, which is the premise that Mr. PRICE has been rallying on, not just once but many times, it is not going to work out for many Washingtonians in my State, and it certainly is not going to work out for many people all across this country.

Mr. PRICE wrote a budget that would block-grant Medicaid. And he wrote a bill that would repeal the Medicaid expansion in its entirety and repeal all of the Affordable Care Act. So I know for some people, as I said, that might sound like giving the States flexibility, but right now, that dollar goes up and down based on need. When Medicaid is block-granted, you are going to give States a set amount of money and, as I said, that set amount of money may not keep pace with the cost of care.

Through Medicaid waivers authorized by Congress and approved by the Centers for Medicare and Medicaid Services, States can work with the Federal Government to deliver flexibility. I just mentioned two programs that are already in the Affordable Care Act.

Earlier today I mentioned all of the States that were utilizing rebalancing programs and the shift they are seeing in keeping people out of nursing home care and putting them in community-based services. So that is a huge win.

A number of States have pursued these Medicaid waivers through a section of the Social Security Act called 1115. It is really not necessary for anybody to know the number, but basi-

cally those innovations are allowing States to continue to improve the delivery of health care. In the State of Washington, that means we are delivering better care, better outcomes, at lower cost. That should be our target—not taking a hatchet to Medicaid and chopping it and saying we are going to give you less and less money.

We know that our health care delivery system is going to be challenged in the future, and we know Mr. PRICE's budget would cut one-third of Medicaid funding within 10 years. That is a huge cost to the Medicaid program. So what would it mean? It would mean millions of Americans would lose their health insurance because States will not have the investments to cover them. Uncompensated care will skyrocket, and that would really hurt the safety net that hospitals provide. People don't go without health care just because Medicaid doesn't cover them. They show up in the emergency rooms, they get uncompensated care, it is more expensive, or they ignore their health care needs until they can absolutely afford it. We are seeing this across America even now. We have had physicians tell us stories of people who are just waiting until they can afford coverage.

So that is why it is so important to get affordable coverage like the Affordable Care Act has been able to provide and to unleash innovative programs within these systems, like the Basic Health Plan that I mentioned earlier today, which allows us to buy in bulk, like a Costco model. Costco delivers Americans a lot of cheaper products because they buy in bulk; it drives down the price. The consumer wins and the insurer wins because they know they are going to get big purchases, and that provides flexibility. I mentioned how New York has more than 600,000 people on the Basic Health Plan, and instead of paying a yearly premium of about \$1,500, they were basically saving about \$1,000 or more on their annual insurance premiums. Why? Because the State was able to offer up a bundle to New York residents and drive down costs. That is the kind of flexibility we need in the health care system. We don't need to just say we are going to cut one-third over a 10-year period of time.

Let me again contrast this progress with Mr. PRICE's ideas. Congressman PRICE's budget would cut \$1 trillion from States over 10 years through Medicaid block grants—\$1 trillion, leaving States with a hole in their budget that I know, if they are like our State and are challenged with other issues, they would not be able to cover. The notion that block-granting Medicaid and repealing the Medicaid expansion is the way forward is absolutely not what the people of Washington State think. I am here to represent the viewpoint that innovations in the Affordable Care Act are working, and we shouldn't just simply block-grant and cut Medicaid.

So instead of improving the delivery system of health care and instead of

expanding coverage and giving peace of mind, here is what Mr. PRICE's Medicaid cuts would do, according to some of the independent experts who study Medicaid.

The National Council on Disability says about block grants: "Older Americans and people with disabilities would be at special risk. . . . States would face strong financial pressure to reduce services to low-income seniors and people with disabilities if the Federal Medicaid funds were capped."

The Center on Budget and Priorities says: "To compensate for the federal Medicaid funding cuts a block grant would institute, states would either have to contribute much more of their own funding or, as is far more likely, use the greater flexibility the block grant would give them to make draconian cuts to eligibility, benefits, and provider payments."

The Commonwealth Fund says that "the federal contribution under a block grant program would remain the same, or grow only according to a present formula, no matter how large the population in need becomes or how much a State actually must spend on health care for Medicaid recipients."

So we can see that people understand that block-granting Medicaid is nothing more than a war on Medicaid—nothing more than a war on Medicaid.

That is why I cannot support Mr. PRICE's nomination. We gave him chances in the hearing to talk about why this kind of approach is not acceptable and why the programs within the Affordable Care Act that are driving down costs, giving people access, making improvements, working all across the United States in various parts of our Nation are actually the right ways to improve the delivery system, but we couldn't get commitments.

So if my colleagues are being honest with themselves or if they actually understand this, they should be very afraid of the notion that Mr. PRICE is putting forward in wanting to block-grant Medicaid. I think some of them do understand. It is why the Governor of Nevada, Brian Sandoval, and the Governor of Michigan, Rick Snyder, and others, are asking Congress to let them keep the Medicaid gains already in the Affordable Care Act and not shift those costs to the States.

So while shifting costs to the States might be exactly what some people want to do, this is exactly why we need to fight to make sure that the Medicaid expansion remains supported, and that we have the right focus moving forward—a delivery system, that is, that works for the patients and improves outcome and lowers costs. That is why I mentioned two aspects of the Affordable Care Act. We did the Medicaid expansion, and then, for a working family just above the Medicaid eligibility level, which is 138 percent of the federal poverty level, they were able to buy in bulk and get the kind of cost savings in health care that, as I said, let more than 600,000 New Yorkers

sign up for truly affordable health care in impressive numbers.

So that kind of progress being made in Medicaid and in the income levels just above it is exactly the kind of progress we must keep pursuing. Our colleagues seem to want to turn back the clock on this plan.

We did not get a single commitment from Mr. PRICE on keeping Medicaid healthy for more than the 70 million Americans that depend on it. Therefore, all I can do is go back to his record, his votes, and his comments to understand his desire to block-grant Medicaid, which is a war on Medicaid. It will not make that population healthier. It certainly will not really control health care costs for the future, and it is certainly the reason I will be voting no on Mr. PRICE.

Mr. President, I yield the floor.

The PRESIDING OFFICER. The Senator from Massachusetts.

Ms. WARREN. Mr. President, I rise today to urge my colleagues to vote against the nomination of TOM PRICE to be the Secretary of the Department of Health and Human Services.

The decisions made at HHS touch the lives of every family in America. The Secretary who runs this agency makes decisions about everything from safety of the food we eat to the drugs we take, to the health insurance we buy and the quality of nursing homes we live in. This is an extremely important job, and we should not hand over the keys to this agency unless we are certain that the person will put the American people first every minute of every day.

President Trump has nominated Congressman TOM PRICE to serve in this job. Unlike many of the President's other nominees who are stunningly inexperienced in areas where they will be setting policy, Congressman PRICE has a lot of experience in health care policy. Yes, he has experience, but it is the kind of experience that should horrify us if we care about Medicare, if we care about Medicaid, or if we care about our own insurance coverage.

Congressman PRICE's record is perfectly clear. He wants to destroy fundamental protections that millions of Americans depend on for their health and economic security, and, frankly, he isn't very subtle about it. He has described ACA's ban on discriminating against individuals with preexisting conditions as "a terrible idea." He has voted 10 times to defund Planned Parenthood—voted 10 times against a group that provides lifesaving cancer and sexually transmitted infection screenings to millions of patients a year. He has tried to privatize Medicare and raise the age of eligibility. Privatize Medicare; think about that. And he has been one of the chief boosters in Congress for gutting the Medicaid program—the Medicaid program, which provides health care for millions of kids, for people with disabilities, for families with parents in nursing homes—cut money to keep people in nursing homes.

Nonpartisan analyses of these plans are not pretty. Millions of people in this country, young and old, children and grandparents, poor and middle-class workers would be denied access to lifesaving care.

Congressman PRICE touts his own magic numbers that say differently, but make no mistake, this is the record of someone who wants to use his position at HHS to advance a radical, reckless agenda that puts rightwing, anti-government ideology ahead of the health and safety of the American people.

During his hearing before the HELP Committee, I asked Congressman PRICE some pretty simple questions. I asked him about more than \$1 trillion in cuts that he has proposed to Medicare and Medicaid. I asked him if he would keep or undermine President Trump's campaign claim that he would protect these programs. I asked him to guarantee that not one dollar in cuts to Medicare would take place on his watch. I asked him to guarantee that not one dollar in cuts for Medicaid to help people living in nursing homes would happen on his watch. I asked him to guarantee that not one dollar in cuts for people with disabilities would happen on his watch.

I asked him three separate times to make this commitment, and three separate times he refused to do so. Think about that—cut Medicare for millions of seniors, cut help for people with disabilities, cut Medicaid for people living in nursing homes. This is the person Donald Trump wants to put in charge of those programs.

We have a lot of work we need to do on health care. We need to reduce the cost of insurance. We need to make sure insurance is available to small business owners, gig workers, and part-time workers. We need to make sure insurance continues to cover health care for women and people with preexisting conditions who otherwise are not going to be able to get insurance. What we don't need is to put someone in charge who is hell-bent on destroying health care in America.

For me, this is easy. When someone says he wants to cut Medicare, I am done with him. When someone says let's take away the money that people rely on to pay for nursing homes, this guy is finished. When someone says that protecting people with preexisting conditions is a bad idea, they don't get the job. This should be easy for everyone in Congress. This is a moment for Senator Republicans to step up and say no.

There is another reason to reject Congressman PRICE's nomination, a reason that has nothing to do with his terrible ideas, a reason that would disqualify him even if we agreed on every single issue. The reason is basic ethics.

During his time in Congress, Mr. PRICE has made money by trading hundreds of thousands of dollars' worth of stock in healthcare-related companies at exactly the same time that he

pushed legislation that could affect the value of these stocks. His formula has been pretty simple. First he buys the stock, then he pushes bills to help the company, which helps the stock price go up.

For example, Congressman PRICE bought stock in a company that makes hip and knee replacements, and then he introduced a bill to suspend a Federal rule affecting Medicare reimbursements for hip and knee replacements. Congressman PRICE bought stock in a bunch of pharmaceutical companies, then cosponsored a bill to suspend a Federal rule that would hold down drug prices for the drugs that these companies manufacture. Congressman PRICE bought stock in an Australian biotech company with an experimental drug to treat multiple sclerosis, and then he voted for a bill that would make it easier for the FDA to approve these drugs.

So what does Congressman PRICE have to say for himself? How does he explain this connection between buying stock, then supporting changes in the law that would boost the value of the stock he just bought? Well, he has his excuses lined up, and I have to say they are doozies.

He says he didn't know about the trades; his broker made them without asking him first. Oh, wait. He did know about the trades. He just happened to know about an obscure Australian biotech firm, and he just happened to decide to invest as much as \$100,000 in it because it was a good investment. Then he hit his last excuse: It is all OK because he paid the same price as anyone else who bought the stock.

Wow, that is really a heaping, steaming pile of excuses, and the excuses stink. These are Congressman PRICE's stock trades, not anyone else's. He made those decisions to buy those stocks, and then he repeatedly pressed for rules that would increase the value of those stocks. In fact, with one of the deals, it isn't just a question of stinkiness; it is a question about whether he broke the law.

By his own account, Congressman PRICE found out about an Australian biotech company called Innate Immunotherapeutics from a fellow House Member who, it just so happens, sits on the company's board and holds the largest stake in the company. So when he decided to buy his latest batch of stock, Congressman PRICE got access to a private sweetheart deal, meaning he got a discount on the price of the shares the general public couldn't get.

This sequence of events might break the law. That is not good at all. And getting special access to a sweetheart deal doesn't help your claim that you are just an ordinary guy with a boring stock portfolio. So when Congressman PRICE appeared before the Finance and HELP Committees, he said he had not paid a lower price than had been available to other investors. That is just not true. The company itself pointed it out. In fact, Congressman PRICE got a

special discount that went to only 20 people in the country—20 special friends, including the Congressman who could help write the laws that would make the company even more valuable.

An outside watchdog has called for an SEC investigation into whether Congressman PRICE committed insider trading. PRICE lied to Congress about his trades, and that should be the end of it. No more nomination for Secretary of HHS. The Congressman should have the decency to withdraw his nomination. It should have happened weeks ago. And if he didn't go voluntarily, the President and his friends in Congress should have quietly but forcefully pushed him out, but that is not what happened either. Instead, Republicans barreled straight ahead, and they changed the rules to do it.

Since Congressman PRICE lied to the committee, Democrats wanted him back for another hearing to ask him about it. Republicans refused, and Democrats boycotted the Finance Committee to try to force PRICE to explain why he lied. So the Republican response was to just suspend the Senate rules so they can run around the Democrats and move forward PRICE's nomination anyway.

Do we do not care about basic ethics anymore? Is that just gone? A Congressman should not be buying stocks then pushing laws to help the company, and that Congressman sure shouldn't be lying to the United States Senate about it.

Because Congressman PRICE has no shame, it will take three Senate Republicans to reject his nomination. Where are the three Republicans who will say no to a man who bought stock and then tried to get the rules changed in Washington so the companies would be more profitable? Where are three Republicans who will say no to a man who got a special stock deal that went to only 20 people in the whole country? Where are three Republicans who will say no to a man who lied to a Senate committee? This has nothing to do with politics. It is about basic ethics. It is about potentially illegal behavior. Where are three Republicans who will say no to this man?

When Donald Trump selected Congressman PRICE for this job, he said PRICE was part of a "dream team that will transform our healthcare system for the benefit of all Americans." Over the past few weeks, I have been trying to understand exactly what that dream looks like.

For families all over this country, the dream is pretty simple. They want to know that when they get sick, they can go to the doctor and not be hit with a surprise bill they can't pay. When they buy insurance, they want to be sure it covers birth control or cancer screenings and preexisting conditions. They want to be able to fight cancer and not lose their house or declare bankruptcy because their insurance company imposes a lifetime limit on benefits.

President Trump does not share this dream for health care in America, and neither does Congressman PRICE. From his first day in office, President Trump has acted to undermine access to health care. Now he has nominated an HHS Secretary who will help him sabotage our Nation's health care system from inside the Department of Health and Human Services.

Yes, we have our differences over health care, and, yes, there are fixes we need to make, but where are three Republicans who will say no to a man who wants to cut Medicare? Where are three Republicans who will say no to a man who wants to cut nursing home care? Where are three Republicans who will say no to a man who wants to cut insurance coverage? Democrats can't do this alone. Three Republicans need to put aside partisanship and stand up for the American people. We need you. The American people need you.

With my remaining time, I want to share some of the letters I have been getting from families in Massachusetts who have seen the reckless, radical plans that President Trump, Congressman PRICE, and Republicans in Congress have put forth for the Nation's health care system. These families know exactly what is at stake in this debate. Congressman PRICE didn't have an answer when I asked him to protect Medicare and Medicaid, but these letters are from constituents and they show just how important these programs are.

Lee from Holliston wrote to me, concerned about cuts to Medicare and Medicaid. I am just going to read an excerpt from his letter:

I am a 65 year old disabled woman who depends on the generosity of MassHealth and Medicare to survive. I am terrified that Medicare and Medicaid will be so drastically cut that I will no longer be able to maintain my life. I live in HUD housing, receive Medicare and MassHealth which covers all of my healthcare and allows me to continue to live on my own through senior services and the Personal Care Attendant program.

I guess I am just feeling scared and hopeless as I realize the potential for destroying the lives of seniors who live on Social Security and nothing else. I wear an insulin pump, have type 1 diabetes going on 53 years, and I have multiple complications—including an amputation 11 years ago.

My healthcare costs are just unaffordable without all the assistance. Medicare and MassHealth covers everything for me so that the \$1,050 per month I receive is doable for living expenses.

I just need to know it is going to be OK.

Lee, we need three Republicans to help out here. Congressman PRICE has made it clear that he wants more than \$1 trillion in cuts to Medicare and Medicaid, and that affects you. We have to find three Republicans to help out and to help stand up for you and the rest of America.

I also heard from Alan from South Shore, who is worried about his daughter Meg. Here is what he wrote:

My daughter Meg is 29. She was born with a condition called neurofibromatosis. As a result of this, she has benign but inoperable

tumors on her spine. They cause her chronic pain and problems walking. On some days, she cannot walk even one step. On other days, she might begin walking with a walker, then suddenly collapse on the floor.

Meg cannot hold down a job: She spent the last quarter of 2016 in and out of hospitals. She receives about \$700/month from Social Security Disability. She has no savings. She pays for her Medicare prescription drug Part D supplement out of her Social Security. MassHealth is free for her, and it pays for Meg's Medicare Part B. I am retired, so I can only help her a bit.

If Trump's first idea about TrumpCare goes into law—where he assumes you will buy your health insurance out of savings—I fear Meg will live in her bed, watching repeats of quiz shows on her television. And her network of care—including emergency services, rehab physical therapy, chronic disease management prescription drugs—will be reduced.

I understand why you are worried, Alan. I am worried, too, because I think that is exactly the path we are on with Congressman PRICE's nomination to head up HHS. That is why we are fighting back.

Boston Center for Independent Living also shared with me a story from a constituent named Jill who receives health care from the State's Medicaid Program. Let me tell you a little bit about Jill.

Jill is 62 years old. She has a heart defect, a seizure disorder, and serious osteoporosis. She had a varied career as a manager of a women's clothing company a decade ago, and in the 1980s, she installed some of the first computer networks in public schools. In the past several years, Jill has had significant health problems: surgery for her heart condition and multiple broken bones due to her worsening osteoporosis.

MassHealth, the State's Medicaid Program, has covered hospital bills, appointments with specialists, rehab stays, and an affordable medication plan.

Jill is now hoping to use a personal care assistant to give her support with shopping, making meals, and basic housekeeping.

Jill said: "For me, Medicaid is a lifeline—any cuts from Washington would be a disaster."

I hear you on that, Jill. I just hope that Congressman PRICE, President Trump, and the Republicans hear you as well.

Medicaid helps a lot of people in Massachusetts, including the very youngest. I got a very powerful letter from Marika from Duxbury, who wrote to me about giving birth to her son Jack after just 28 weeks of pregnancy. I want to read parts of her letter:

I'm writing to you today because I am horrified about the changes that may be happening to healthcare in the United States.

My husband and I welcomed our son, Jack, at 28 weeks in July of 2015. I had a very normal, healthy pregnancy—until suddenly it wasn't. I ended up with rapid onset of HELLP, a rare and life-threatening syndrome, and an emergency C-section saved both my life and Jack's.

Jack was 1 pound, 14 ounces when he was born. We were both in the ICU for some time,

my son Jack for 110 days. He had all the issues you'd imagine at 28 weeks—cardiac, pulmonary, feeding.

Today, at 18 months old, Jack is a fighter—my hero really—and despite still needing oxygen and a continuous feeding tube that is surgically inserted into his intestines, he is cruising, talking, and ALIVE.

He is alive, and quite frankly, I'm alive because of our amazing healthcare. I have the benefit of an exceptional employer plan from Harvard University. But Jack also qualified (because of his birth weight) for MassHealth. And our public health insurance has been an incredible resource:

Jack's hospital bills were in the millions after his 110 day stay in the NICU. This doesn't even include my own hospital costs for my stay. Despite having excellent jobs and resources, my husband and I would have been bankrupt, and immediately so, without our private health insurance and MassHealth benefits.

Since coming home from the NICU, Jack is still on a feeding tube and oxygen, and he cannot be accepted into regular daycare. He would go to a medical day care, but he has no cognitive delays, and so placing him in such a facility would not ensure that he gets the regular developmentally appropriate engagement that he needs. And so MassHealth pays for skilled nursing care in our home with no out of pocket costs. This means that Jack gets the care that he needs, and my husband and I can still work at the jobs that we love.

Jack participates in early intervention programs and receives feeding therapy, physical therapy and occupational therapy free of charge.

Jack's Synagis shots cost zero dollars. Synagis is a prescription medication that is used to prevent a serious lung disease caused by respiratory syncytial virus, RSV, in children at high risk for severe lung disease from RSV. The average wholesale price is \$780.15 for the 50 milligram Synagis vial, and \$1,416.48 for the 100 milligram vial. Jack gets a 150 milliliter shot every month.

I cannot imagine this life without my son's public health insurance. I recently enjoyed the NICU Family Advisory Board at Beth Israel Deaconess Medical Hospital in Boston (where Jack and I were cared for) as a way to give back. Today, I mentor other families who have unexpectedly found themselves the parent to a tiny premature baby fighting for life. In nearly every case, navigating the insurance system and fears about money are top of mind.

I am glad to hear that Jack is doing well, but I understand why it is that you want to hang on to MassHealth and why it is that we cannot take the cuts Congressman PRICE has proposed.

Families in Massachusetts are also deeply worried about the future of the Affordable Care Act. Jackie from Norwood wrote to me about how the ACA helped her get coverage for therapy after her mother was killed. She wrote:

My mother was murdered when I was 24. I was on her healthcare, which kicked me off the day after she died. I had recently accepted a new job and I was set to start that Monday (she was killed on Saturday). I had already left my previous full-time job the Friday before.

Due to having to move states after her death, I couldn't start my new job. I didn't know when I'd have work again that could provide insurance, nor did I have another parent whose plan I could join. I also had no way of affording COBRA payments.

So in the matter of one night, I was left helpless in so many ways. Not having health

insurance was one of many side effect issues that no homicide victim's family should have to worry about. Especially the next day and when planning a funeral.

Thanks to the Affordable Care Act, I was able to get covered almost immediately, which meant I could still afford my current medications and I was able to get into needed therapy right away. If it weren't for the ACA, I would have been left struggling and sick as a result of something FAR out of my control.

Very true, Jackie.

Jackie goes on to say:

I ended up finding work within a couple of months, and I am still in treatment for PTSD. I was lucky enough to find employment at Harvard University and no longer needed coverage through the ACA. I have generous health benefits provided to me. However, I never want a fellow citizen or victim of homicide to be without medical care due to cost, preexisting conditions, or other setbacks. I am happy my tax dollars go to help programs like MassHealth and the ACA. We all work hard, but that doesn't mean we are all as fortunate.

I am not the typical poster child for a homicide victim/survivor. I am white and college educated. I work for an Ivy League school. I still needed help when disaster struck, and so many others less privileged than me need help finding affordable health care.

Please continue fighting for me and other victims and survivors of homicide.

That is what we are here for, Jackie. That is what we are supposed to do. We just need three Republicans to help us out on this.

I also heard from Jennifer from Northampton, who is terrified for her family if the ACA is repealed. She says:

I suppose I can't say when our story starts. Maybe the day I met my then-life partner (now wife) of 16 years. Maybe it begins when she had to have emergency surgery in Maryland when she wasn't covered under my insurance, because our union wasn't legally recognized. Maybe it begins with the tens of thousands of dollars of debt we incurred in uncovered medical expenses when we tried to get pregnant with our son.

Or maybe it started two days ago when the unthinkable happened. My wife got laid off. After seven years of exemplary services to a large human services agency whose mission is supporting individuals and families affected by homelessness, my wife was given no warning, no severance and no compassion in her sudden dismissal from the agency. For any family this would be devastating. Now we come to the dire part.

About a year ago, my younger sister, Stephanie, was diagnosed with an aggressive form of Triple Negative Breast Cancer at 35 years of age. But this story isn't about that.

Six months later, my mother got diagnosed with Stage 4 Metastatic Breast Cancer.

I didn't have to be an over-educated lesbian to know that there was something genetic going on in my family. I got tested for the BRCA gene and was found positive for the mutation that causes breast cancer, specifically Triple Negative (like my sister had) and am currently looking at an 80% chance of developing Breast Cancer in my lifetime.

I need a double mastectomy and I need it soon. It's scheduled, in fact, for March 6th, 2017. And now, my wife doesn't have a job. I am a Behavior Analyst who specializes in the treatment of children with Autism Spectrum Disorder. I have a small private practice and don't make enough money to support our household. I also don't have access to health insurance through any of my contracts.

That is why it's dire.

One laid-off spouse, one four year old son, one self-employed wife with an 80% chance of developing breast cancer and fear of the ACA being repealed. This is dire.

We are terrified, I am terrified.

This isn't a "wait and see" situation for my family. This is us. This is now. And this is real.

Yes, Jennifer, and that is why we are here tonight, in the U.S. Senate, to debate whether or not Congressman PRICE—a man who wants to cut Medicare, cut Medicaid, repeal the Affordable Care Act—is going to be the next head of Health and Human Services. That is why we are fighting. That is why we are looking for three Republicans to step up with the Democrats and turn him down. We must protect the Affordable Care Act.

I also got a letter from Olivia, a college student from North Reading. Olivia wrote me about what the ACA means to her as someone living with multiple chronic illnesses. She wrote:

I am a twenty-two year old white woman from a middle-class suburb of Boston. I attend the University of Massachusetts Amherst and will be applying to graduate school next year. I eat an anti-inflammatory diet, I exercise regularly, do not smoke, and drink lots of water. I am on my parents' insurance, which they receive through their employer. I am a patient at some of the best hospitals in the world.

I am so fortunate to live in a state that protects my right to affordable health care. I was also hopeful when I heard that President Trump was considering modifying ObamaCare rather than repealing it. However, I am still worried about the actions that will be taken in 2017 by his administration and by Congress.

If you met me you would see a "young, vibrant, and ambitious woman"—other people's words, not mine. Many people and politicians in this country would meet me and not assume that I rely on the ACA. I am not from a low-income family, I don't live in an area that doesn't have adequate medical facilities, and I appear well. I am, however, living with multiple chronic illnesses. I suffer from asthma, fibromyalgia, chronic urticaria, chronic migraines, irritable bowel system, gastro-esophageal reflux disease, and a rare-genetic kidney disorder.

I take multiple medications daily that keep me alive, prevent further health complications, and that allow me to take care of myself. I also seek other therapies to manage my conditions, such as chiropractic care and physical therapy. I currently have great health insurance, yet I still pay hundreds of dollars a month just to give myself any quality of life.

I read the Trump/Pence administration's health care plan and I am aware of the efforts by the GOP to repeal Obamacare and their readiness to do so now that President Trump has taken office. I don't believe I have to explain to you why this worries me.

No, you don't.

I won't go on a rant about why health care reform should be about the people not the money (though I could). I will also not talk about why we should have universal health care (though I could). I am hoping that my story offers a slightly different perspective on why certain aspects of the ACA cannot be modified.

Please remind your fellow senators that millions of Americans suffer from multiple chronic illnesses, many of which are invisible, and that we are a minority that is often

forgotten. Many people are just like me. We are college students and new graduates who have to learn to manage our medical conditions before going out into the real world.

To do this, we may have to stay on our parents' insurance until we are twenty-six years old. We are people who can only work part-time jobs and will need insurance to help keep our medical costs down. We may require expensive prescriptions and numerous doctor visits a year; we cannot have a cap on our care because our conditions are chronic and unpredictable. We are people who will have to apply for insurance with pre-existing conditions which should not be held against us. We are thankful for preventative care because it prevents illnesses that would exacerbate our other conditions.

Health care is a business that we need but that we didn't ask to be a part of. It is a business we all take part in, whether we plan to or not. We are NOT burned-down houses—we are citizens who provide meaningful contributions to our country.

I hope that Congress can work together to continue to give people like me a fighting chance.

I am with you on that. I hope Congress can work together to give people like you a fighting chance.

I also got a letter from Christine in Canton, who wrote to me about her son. She writes:

My oldest child is a 21-year-old college student (soon to turn 22 in February), who is also transgender. He suffers from anxiety and depression. He's been working very hard to complete college while also seeking treatment for his mental health issues. He sees a therapist weekly and has also been hospitalized twice for mental health issues since he's been in college.

Luckily, due to the Affordable Care Act, he is able to remain on our insurance, where the co-payments for both therapy and hospitalization are at least manageable. If he were not to have coverage through our insurance, I'm not sure that we could afford to pay for his treatment—and as a college student, he certainly could not afford to pay for it. It frightens me to think of what will happen to him if he is not able to receive treatment to keep him healthy.

Like so many others covered by the Affordable Care Act, it is a life or death situation. I need to know that you will fight by any means possible to keep the Affordable Care Act from getting repealed.

I also have a 19-year old college freshman and a 17-year old high school senior. While they do not have the same health issues as their brother, we all know how that can change in an instant. The repeal of the Affordable Care Act will also have consequences for them down the line.

I guarantee, Christine, I will be here to fight for you, to fight for keeping the Affordable Care Act for you and for families like yours.

Denise from southeastern Massachusetts wrote to me about how her family is fighting cancer. Here is what she said:

We are family of four, with three cancer survivors. My husband is a childhood cancer survivor who is now fighting a blood disorder and is a patient at Dana Farber. I am a three-time cancer survivor. Having been diagnosed with breast cancer at age 42 (with no family history), I have since had two recurrences.

I have had radiation, five years of tamoxifen therapy, a bilateral mastectomy, and reconstruction. My reconstruction has been difficult, with five surgeries within 18

months. I have been postponing another surgery due to cost, since my insurance has changed for the worse. At age 23, my daughter was diagnosed with Hodgkin's lymphoma and underwent surgery and seven months of chemotherapy.

We are a family that has always been proactive and responsible in receiving regular health care. Now, my husband and I have been rejected for long-term care. My daughter, who has two children, pays a higher premium for life insurance and has been denied cancer insurance. We are in a position where we cannot even succeed in our attempts to take responsibility for ourselves.

This outreach to you is a further attempt to do just that; to maybe give you one more example of reality in your fight for us. We are not whining; we are fortunate to be a close, loving family that has had the strength to rally every time adversity has struck.

But we are tired from the fight and very afraid for the future. It is shocking to us that, in the richest country in the world, after years of working, planning and saving, that we are at the point of fearing a possible bankruptcy in our later years. We also fear financial destruction for our hard-working children due to uncovered medical expenses or the possible exorbitant premiums of a high-risk insurance pool.

Please, please never tire in the fight for access to comprehensive affordable healthcare. Good medical care should not be a privilege for the rich, but a fundamental right for all.

Boy, I am with you on that one, Denise. It is a fundamental right for all, and that is what we will continue to fight for.

I also received a letter from Jenny in Worthington. And I want to read you Jenny's entire letter because she really underlines what is at stake in this fight.

My husband and I have spent our entire careers in the arts. I write music for the theater; my husband is a novelist, playwright, and freelance medical writer. We have two children. We own a home. We paid back every dime on our student loans and we contribute regularly to our self-funded retirement accounts. We have no consumer debt. In short, we are hardworking, fiscally responsible people.

We recognize the trade-offs that come with being our own bosses. We enjoy the freedoms of self-employment, and take seriously the extra burden that society imposes on us, including making our own Social Security payments, contributing to Medicare, and buying health care on the individual market, something we have done our entire adult lives.

When the Affordable Care Act was passed, we were thrilled. For the first time, we had adequate coverage for our family. Our deductibles shrank. We lost the dreaded co-insurance provision and began to think that we could prepare financially should we face the worst.

Or so we believed.

Our difficulties began in late 2014, when I was diagnosed with breast cancer. Over the weeks that followed, I endured 5 surgeries, including a unilateral mastectomy and reconstruction. Almost immediately after, I began to experience complications. Since then, I've come to learn that I was having a reaction to the silicone implant used in my reconstruction and that was just the early stage of a complex autoimmune condition that still lacks a name.

Back then, all I knew was that I was wracked with constant, severe pain. I lost the ability to walk. I could no longer think straight and I lost sight in my right eye.

Luckily, we stumbled upon an article by a Dutch team that had examined a cohort of women suffering from the same condition. After consulting with the lead author of the paper, we decided that my implant was to blame, and we determined to have it removed.

Although I experienced some relief immediately after ex-plantation, I have never fully recovered. The joint pain and exhaustion persist. I have shed more than a third of my body weight. The battery of medications I take do little more than keep my pain at bay, permitting me to drive my son to school or shop for groceries, but not much more.

As for my artistic life, it has been put on hold. I have unfinished commissions from two theaters—Chicago Shakespeare Theater and Playwrights Horizons, in New York City—and both institutions have been incredibly patient. Yet the truth is that I have been unable to work for more than two years.

Severe cognitive impairment is a hallmark of my condition, and I have serious problems with my short-term memory. Holding the thread of conversation is incredibly difficult, and I experience blinding headaches if I write music for more than a couple of hours. Frequently, it feels as though someone has reorganized my brain but forgotten to leave me the instructions. It is frustrating; it's terrifying.

Only one thing has made it possible for me to survive this at all: the coverage I receive through the ACA.

The day I got my cancer diagnosis, I was in the process of re-certifying through the Massachusetts Health Connector. I was thrilled when my local Navigator told me that thanks to my new diagnosis, I qualify for Massachusetts' Breast and Cervical Cancer Treatment Program, a Medicaid-backed initiative designed to cover middle and low-income women through their treatments. Not only would I be covered, but our two children would also be insured by MassHealth, our state's Medicaid program. Though my husband continued to purchase care through a separate plan, this single event saved our family from financial ruin.

Now, all of that stands to change. With the repeal of the life-saving provisions guaranteed by the ACA, we are faced with the complete erosion of our savings. The Republican Congress has already voted to eliminate the ban on denying individuals coverage on the basis of previously existing conditions, meaning that I will most likely be uninsurable. What will happen then? Will we go bankrupt? Will we lose our home? How will I cope without my medications when we can no longer afford to pay for them?

The passage of the ACA did more to shore up our little family than any other piece of legislation in my lifetime. It has enabled me to face my grave illness without worrying whether cost would be a factor in my treatment or whether I could try the next medication my doctors prescribed to relieve my pain.

In sharing our story on social media, I have been overwhelmed by the outpouring of concern from our tiny community of theater professionals. The President of the Dramatists' Guild, a professional association for theatre artists, called me to offer the assistance of their Emergency Fund should we need it. And while it is heartwarming to receive the support of my professional community, the hard truth is that even the most doggedly determined not-for-profits can't possibly replace the broad social safety net of the Federal government—a safety net Republicans are determined to shred.

In every industrialized country but ours, health care is considered an inalienable human right. It is abhorrent to claim that

care is something Americans should have to “shop for.” Price-comparison shopping may seem like a wonderful market-driven design, but in reality it forces us to confront the terrifying arithmetic of balancing how much care we need against what we can afford. The sicker one grows, the harder it becomes to solve that equation.

We have no idea what the Republicans intend by way of a replacement to the ACA. They refuse to specify, despite their years of claiming that the ACA is a failure. They talk of expanding Health Savings Accounts (HSAs), though such accounts represent nothing but a disingenuous transfer of the cost to the consumer. Even if such an approach made sense, how far would \$6,750 (the current HSA limit) go in meeting actual health care costs? That amount would be wiped out after a single visit to the emergency room.

What’s more, where do they expect sick Americans—those fighting for their lives and unable to work precisely because of their illnesses—to suddenly uncover \$6,750 to sink into a tax-sheltered HSA?

Clearly, this idea has been put forward by people who do not depend on their health insurance for their very lives. They pretend that this sort of thing will save “our system,” but their proposal is like offering a patient an Advil for an amputation—laughably inadequate at best; an utter horror at worst.

What’s more, efforts like the expansion of Medicaid under the ACA have already saved us. Or many of us. Certainly me, in any case. A Republican friend wrote me recently, venting about the “third-world” coverage Medicaid provides. What he had to say was ignorant and false. Medicaid isn’t failing. To the contrary, it has saved my life and the lives of many others who have simply had the misfortune of falling ill. And isn’t that, after all, one of the primary functions of government? To care for its citizens and return them to the ranks of the healthy and productive?

We have no idea what the year ahead holds for us. It is likely we will face health premiums of \$24,000 or more for a low-level plan. Our premiums will consume 30% of our income, more than our mortgage. Despite MassHealth, we shelled out nearly \$15,000 for uncovered medical expenses in 2016, and we are already on track to surpass that number this year. On top of everything else, this is the year our daughter starts college. I’m not the typical Medicaid patient that people seem so fond of demonizing, nor am I some poster child of the ACA. I am simply one of the countless individuals whose story does not fit the narrative the Republicans are attempting to feed us about the ACA and about what it means to be sick in America. Medicaid is on the chopping block not because it is failing, but because the people who benefit from it too often fail to speak up on their own behalf. Their silence has nothing to do with a lack of will or words. They are simply too busy struggling to survive.

Medicaid benefits our poorest, yet it also assists those slightly higher on the income ladder—people like me who would vastly prefer to be thriving without it. Many more people than you suspect have turned to it in a time of need. They aren’t merely characters in some musical or play. Trust me, I know. They are your friends and neighbors. They are families whose lives have been unended by illness. This is what happened to my family. And, with a single diagnosis, it could be your family too.

Thank you. Thank you for writing. This is why we are here to fight.

I also heard from Kaitlyn, from Cambridge, who said the ACA has allowed her to continue pursuing her postdoctoral research. She says:

I am postdoctoral fellow at MIT, and I have a pre-existing condition. In 2012, during my second year of grad school, I started having debilitating pain in my abdomen. The pain was so bad I couldn’t eat or sleep, and I lost 30 pounds over two months. The pain was so bad I couldn’t wait the full 3 months to see a specialist, and I went to the ER and finally got a diagnosis for an autoimmune disease and began treatment.

However, my condition was so advanced that a little over a year later I needed an emergency surgery while I was visiting family out of state. I spent six nights in the hospital and rang up a bill in excess of \$50,000. Luckily, I was 25 and still on my parent’s insurance. Additionally, I was doubly insured by the student health insurance from the University of California, for which I was automatically enrolled through my graduate program. Other than a \$200 deductible, my hospital bill was paid in full.

Now that I have a chronic illness, having quality healthcare and regular checkups is vital to staying healthy and productive. My medication, Humira, costs \$5,000 a month out-of-pocket, which was more than double my grad school stipend. With insurance, I only pay \$25 a month. Though surgery helped me tame the inflammation in my intestines, my disease began to express itself as arthritis in my joints. The pain was so bad that one Christmas I canceled my trip home to see my family and spent the whole time alone on my couch. I had a bad reaction to some of the medications and became so severely anemic that I needed a blood transfusion. Additionally, one of the medications I take causes severe birth defects. So I needed an IUD to prevent pregnancy.

Easily, all these conditions could become overwhelmingly expensive. But with my student health insurance through the University of California, I could afford it. The premium was \$300 per month, part of which was covered by the university. My medications cost \$110 a month, and I had a yearly out-of-pocket maximum of \$2,000. While I didn’t get my insurance through the exchanges, the other conditions of the ACA which determine the minimum quality of care made it possible for my care to be affordable.

By having proper treatment and care, I can be a productive member of society. I have received my PhD in Applied Mathematics and my research contributes to the design of medical devices that can be used for cancer screening. I am able to mentor young girls and encourage them to study math and science. And who knows—one of them may cure cancer one day! Since I am no longer in pain and I am not in debt, I was able to find a prestigious job after graduation. When a state provides for the health of its people, they can thrive at home and at work. It is not only the moral choice, but also a good choice for the economy.

Kaitlyn, thanks for writing and thanks for being one of the big success stories under the Affordable Care Act. This is what we are fighting for tonight.

I also heard from a young woman in Somerville named Samantha. Here is what she wrote:

I’ve been dealing with severe mental health issues since I was a kid. I am now 27. In that time, I have been through numerous hospitalizations, residential treatment, day treatment, intensive outpatient treatment, and outpatient treatment.

When I was 18, I had to drop out of college and spent 3 months in residential treatment for my eating disorder. The year prior, I spent 2 months in residential treatment and 6 months between day and intensive out-

patient treatment, and I had been in therapy for 4 years.

Due to Massachusetts law, I was still covered by my parent’s insurance, but the Massachusetts health care reform didn’t stop insurance companies from imposing lifetime limits. At 18 years old, fighting for my life, I overheard my parents discussing lifetime limits in regard to my health care. I don’t know how much all that treatment cost, or how much of my lifetime limit I had consumed. For the next 7 years, I was in and out of treatment at various levels.

Mr. President, I ask unanimous consent to extend my time by 10 minutes, if I might, to finish my stories.

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

Ms. WARREN. Thank you.

In 2014, when I had my own health care, I had a bad relapse. For the first time I was paying for my own treatment. I had health insurance through my employer that was really good, but even with that, for 1 month of residential treatment, 1 month of day treatment, and 3 months of intensive outpatient, plus therapy, a nutritionist, a psychiatrist and medication—all crucial to my recovery—my out-of-pocket health care costs reached almost \$10,000.

These days, I am much more stable and have remained in relatively good health, but all because of the continued support I get from my therapist, psychiatrist, and doctor. I can only imagine how much money has been spent and how close I’d be to my lifetime limit if those were still in place. And of course, all that adds up to being a “pre-existing” condition.

The simple fact is that I would most likely be dead today were it were not for the protections provided by the ACA, and if I lose those protections, if I have another relapse, I will either end up dead or unemployed and mired in debt.

Samantha, thank you for writing. Thank you for fighting. That is why we are on the floor of the Senate tonight, to continue to fight for the Affordable Care Act and to continue to fight against cuts to Medicare and Medicaid. This is what is at stake for families in Massachusetts.

As Jennifer said in her letter: This is us. This is now, and this is real. Congressman PRICE wants to cut more than \$1 trillion from Medicare and Medicaid. But I am not giving up, because I am here to fight for Lee and Meg and Jill and Marika’s baby Jack.

Congressman PRICE wants to rip up the behavioral health protections in the Affordable Care Act. But I am not giving up, because I am here to fight for Christine’s son and Jackie and Samantha.

Congressman PRICE wants to get rid of the ACA’s ban on discriminating against individuals with preexisting conditions. But I am not giving up, because I am here to fight for Jenny and Kaitlyn and Olivia and Denise and Jennifer.

I will fight for every one of them and for the tens of millions of people who are counting on Medicare and who are in need of Medicaid to pay nursing home bills and to help with home health care for people with disabilities and who need that Medicaid money for children with serious problems. I will

fight for every one of them. Where are three Republicans who will do the right thing and fight alongside me? That is what tonight is all about.

I yield the floor.

The PRESIDING OFFICER. The Senator from Vermont.

Mr. SANDERS. Mr. President, I rise in strong opposition to the nomination of Congressman TOM PRICE to be the next Secretary of Health and Human Services. My opposition to Mr. PRICE has less to do with his well-known, extreme, rightwing economic views than it has to do with the hypocrisy and dishonesty of President Trump.

The simple truth is, Congressman PRICE's record is the exact opposite of what President Trump promised to working families and for senior citizens all over this country. If President Trump had run his campaign for President by saying: OK, Americans, I am going to cut Social Security, and I am going to cut Medicare, and I am going to cut Medicaid, and I am going to put together a Cabinet that will do just that, I think Congressman PRICE would have been the perfect candidate for Secretary of HHS, but that is not the kind of campaign Donald Trump ran.

He ran a campaign in which he said over and over again: I am a different type of Republican. I am not going to cut Social Security, I am not going to cut Medicare, and I am not going to cut Medicaid. Yet he has nominated individuals like Congressman PRICE, who have spent their entire career doing the exact opposite of what Donald Trump promised the American people he would do.

If Mr. Trump had said: I want to prevent the American people from getting low-cost prescription drugs from Canada, and I want to continue to prohibit Medicare from negotiating for lower drug prices, Congressman PRICE would have been a great choice, but that is not what Donald Trump said during his campaign.

This is what President Trump said. During the campaign on May 7, 2015, Mr. Trump tweeted:

I was the first and only GOP candidate to state there will be no cuts to Social Security, Medicare, and Medicaid.

On August 10, 2015, Mr. Trump said:

[I will] save Medicare, Medicaid, and Social Security without cuts.

Without cuts.

[We] have to do it. . . . People have been paying in for years, and now many of these candidates want to cut it.

On November 3, 2015, Mr. Trump said:

I'll save Social Security. I'll save Medicare. . . . People love Medicare. . . . I am not going to cut it.

On May 21, 2015, Mr. Trump tweeted:

I am going to save Social Security without any cuts. I know where to get the money from. Nobody else does.

On January 24, 2015, Mr. Trump said:

I'm not a cutter. I'll probably be the only Republican that doesn't want to cut Social Security.

Mr. Trump did not make these statements in the middle of the night. It

wasn't an ambush interview with some reporter who caught him off-guard. This was one of the centerpieces of his campaign for President. And I think whether you are a Republican or a Democrat or Independent or whatever you are, you will acknowledge that Mr. Trump said: I am not a conventional Republican. I am going to do it differently. Everybody else, all the Republicans, they want to cut Social Security, Medicare, and Medicaid. And he is absolutely right. They do. But he made a promise to the American people that he would be different, that he would not cut Social Security, Medicare, and Medicaid.

President Trump sends out tweets every single day, but the American people are waiting, are still waiting for that one tweet which says: I will keep my promise. I will not cut Social Security, Medicare, and Medicaid, and if Republicans give me legislation to do that, I will veto that legislation.

In fact, the President could save us all a whole lot of time if he would get on the phone now with the Republicans in the House and some here in the Senate and say: Hey, save your efforts. Don't waste your time because if you bring me legislation that will cut Social Security, cut Medicare, cut Medicaid, I am going to veto it.

If President Trump sent that tweet, it would save us all a whole lot of time but, more importantly, it would tell millions of seniors who today cannot make it on \$13, \$14, \$15,000 a year in Social Security that he will not make their lives more difficult. He will tell seniors who are struggling with difficult, painful, costly illnesses that he is not going to devastate Medicare.

He will tell low-income people who are trying to survive on minimum incomes that he will not take away the health insurance they have through Medicaid, and he will tell middle-class families and working-class families that, no, they do not have to worry that their parents can remain in nursing homes and have those bills paid by Medicaid.

What I think the American people are worried about is not just that Mr. Trump has not yet sent out that tweet. We did get a tweet about Arnold Schwarzenegger and how well he is doing on his TV show—we got several tweets about that—but we did not get the tweet that tells seniors and working people they do not have to worry about their future; that this President was not lying but was telling the truth when he said he will not cut Social Security, Medicare, and Medicaid.

The problem is, President Trump has nominated people like Congressman PRICE whose views are absolutely contradictory to what he campaigned on. So why would you appoint somebody whose views run exactly opposite to what you told the American people during your campaign?

The truth is, in the House of Representatives, Congressman PRICE has led the effort to end Medicare as we

know it by giving seniors inadequate vouchers to purchase private health insurance.

In 2009, Congressman PRICE said, and I quote—and I hope people listen to this quote and try to ask yourselves: How could somebody who ran on a campaign of not cutting Medicare appoint this gentleman to be Secretary of Health and Human Services? This is what Congressman PRICE said:

Nothing has had a greater negative effect on the delivery of health care than the Federal Government's intrusion into medicine through Medicare. . . . We will not rest until we make certain that government-run health care is ended.

Now, how does that tally with Candidate Donald Trump saying: I will not cut Medicare and Medicaid.

We don't need an HHS Secretary who will end Medicare as we know it. We need an HHS Secretary who will protect and expand Medicare. The idea of this voucher program, of ending Medicare as we know it, as a defined benefit plan and converting it into a voucher plan, not only contradicts what Candidate Donald Trump said, but it will be a disaster for millions of seniors.

Right now, if you are a senior and you are diagnosed with a serious and costly illness, you have the comfort of knowing that Medicare will be there throughout your illness. It will pay your bills.

The Republican plan, led by Congressman PAUL RYAN, has a very different approach, and what that plan is about is a voucher plan which says that we will end Medicare as we know it. We will give seniors a voucher of an undetermined amount—the last number I heard was \$8,000; it may go up, it may be lower—and give that check to a senior who then goes out into the private insurance market looking for the best policy that he or she can get.

I would like the American people to think for a moment what kind of policy an 80-year-old person who is struggling with cancer and who has a check for \$8,000 can get. The answer is, when you go into a private insurance company.

Also, if the Republicans are successful in doing away with the Affordable Care Act and the patient protections within the Affordable Care Act, including a ban on the insurance companies' ability not to insure you if you have a preexisting condition—now let's assume they got rid of that.

Now you are 80 years old. You walk into an insurance company, and you say: I have been diagnosed with cancer, and here is my check for \$8,000.

The insurance agent looks at you and says: Are you kidding? Don't be absurd. Why would we cover you? What do you think we are going to give you for \$8,000 when you are about to run up some enormous health care costs related to cancer? You are going to be in the hospital. You are going to undergo all kinds of treatment. You are going to need expensive drugs, and you expect us to take you with an \$8,000

check. How are we going to make any money out of you? Because that is what our job is. We are an insurance company. We don't care about health care. We care about making money. That is our function. We don't make money on \$8,000 for taking care of somebody who is 80 years of age who has cancer. Furthermore, because the Republicans got rid of the law protecting people with preexisting conditions, we don't even have to take you. Or maybe we will take you, but you are going to have to add another \$10,000 on top of that \$8,000 because that is the only way we make money.

Oh, by the way, also, so there is no confusion, they want to raise the retirement age to make sure you keep working until 67 years of age.

So not only is that a disaster, but maybe in a deeper sense, if we take democracy seriously, if we think candidates should run for office based on what they really believe, all of that stuff is a direct contradiction to what Candidate Donald Trump talked about.

I have heard many Republicans say: Look, what he was talking about was really absurd. It was ridiculous. Of course we are not going to do that.

Well, then, that takes us to a whole other discussion: What does it mean if you have a candidate who runs for office who simply lies to the American people and really doesn't mean anything he says?

I have no problems getting up and debating or disagreeing with my colleagues who have a very conservative point of view. That is their point of view. This is a democracy, and we have different perspectives. And many of those candidates ran on positions. They were honest enough to say: Hey, if you elect me, I think we have to cut Social Security, and they gave their reasons. I think we have to cut Medicare; they gave their reasons. I think we have to cut Medicaid; they gave their reasons. I think we have to give huge tax breaks to billionaire; they gave their reasons.

Well, for some reason or another, the people in their State elected them. That is fine. It is called democracy.

But that is not what Donald Trump did as a candidate. So I rise in opposition to Congressman PRICE becoming Secretary of HHS because his appointment would go in diametrical opposition to what Candidate Donald Trump told the American people. I think that is a bad thing for democracy. If you run for office, keep your word, you know? Do what you told the American people you would do. The profound disgust so many millions of people feel for the American political process is not just of what we believe, it is that we don't keep our word, the promises we make to them, and this is exactly where Donald Trump is today.

Let me touch on another area where I think President Trump has not been clear with the American people, and that is, we pay today by far the highest prices in the world for prescription

drugs. One out of five Americans between 18 and 65 cannot afford to fill the prescriptions that their doctors write for them. The numbers go down after 65 because of Medicare Part D. But can you imagine living in a nation where one out of five people cannot afford to fill the prescriptions their doctors write?

Mr. Trump campaigned on taking on the pharmaceutical industry. Well, the record of Congressman PRICE is very different from the rhetoric that Candidate Donald Trump used during his campaign.

So I eagerly await Mr. Trump's statement—he can do it through a tweet; that would be fine with me—that says he will support concrete legislation that some of us are going to be offering very shortly which does two fundamental things that will substantially lower prescription drug costs in America today.

No. 1, at a time when you can buy many medicines for far less cost in Canada or in many other countries around the world, at a time when we have free trade agreements so that the lettuce and tomatoes you are having dinner can come from Mexico or Latin America or anyplace all over the world, the fish you eat can come from anyplace all over the world, we will introduce legislation that says that individuals, pharmacists, and prescription drug distributors will be able to purchase lower cost medicine in Canada and eventually in other countries around the world.

Mr. Trump—President Trump had talked during his campaign about taking on the pharmaceutical industry. I hope very much that he will at least keep his word on that issue and that he will join us in supporting legislation to allow for the reimportation of brand-name prescription drugs from Canada and many other countries around the world. If he is prepared to do that, we will pass it. We will pass it because there are a number of Republicans who support it, and the vast majority of Democrats support it. We have the votes to pass it, and if President Trump signs that bill, we will go a long way in ending the burden that so many elderly people and working people and people with chronic illnesses are facing today, and that is the outrageously high cost of prescription drugs.

By the way, this huge increase in prescription drug costs takes place at a time when, in 2015, the five largest pharmaceutical companies in this country made \$50 billion in profit—\$50 billion in profit in 2015—yet one out of five Americans under 65 cannot afford the medicine they need. The top 10 CEOs or executives in the pharmaceutical industry that year made over \$300 million in salary.

Passing reimportation is one mechanism to lower the cost of prescription drugs, but it is not the only one. We have a totally insane prescription drug pricing system in America right now. If you are Kaiser Permanente, you will

pay a certain amount for a drug. And by the way, of course, we don't know what that amount is that you are paying; that is secret. If you are Medicare, you will pay a different amount. If you are the Veterans' Administration, you will pay a different amount than Medicare. And if you are Medicaid, you will pay a different amount than Medicare or the Veterans' Administration. We have a situation today where by law the Veterans' Administration is able to negotiate drug prices with the pharmaceutical industry. Today we have a situation where Medicaid, by law, is guaranteed a significant rebate over list price. But in terms of Medicare, which spends over \$4 billion a year for prescription drugs, a number of years ago Republicans insisted that Medicare would not be able to negotiate drug prices with the pharmaceutical industry.

President Trump has indicated in vague language that perhaps he would support the ability of Medicare to negotiate prices with the pharmaceutical industry. Given all of the tweets he has sent out on so many subjects, I would hope that he has the time to send out a very simple tweet which says: If Congress passes legislation allowing Medicare to negotiate drug prices with the pharmaceutical industry, I will sign that bill. That tweet will have a profound impact on taxpayers because we can save very substantial sums of money, and it will also result in lowering the cost of prescription drugs.

Unfortunately, once again Congressman PRICE is coming from a different place than Candidate Trump came from—again, that contradiction of a President appointing somebody whose views are diametrically opposed to the views he raised during the campaign.

I think the American people are growing increasingly concerned about the contradictions in general, not just on health care, of what Candidate Trump said and what President Trump is doing. During the course of his campaign, not only did Candidate Trump say he would not cut Social Security or Medicare or Medicaid, he also said that he thought Wall Street was causing all kinds of problems and that you can't clean up the swamp by bringing people in who are a part of the swamp, in so many words. You can't bring people in to clean up the problem who have caused the problem in the first place. And you know what, he is exactly right. He is exactly right. You can't bring in people whose greed and recklessness and illegal behavior on Wall Street caused us the worst economic downturn in modern history of this country. You can't bring those people in and then say: We are going to solve the problem that Wall Street caused.

But in an exactly similar way to what he has done with the Secretary of Health and Human Services, he is bringing in top Wall Street executives. His main financial adviser comes from Goldman Sachs, one of the largest financial institutions in this country, a

financial institution that required a multibillion-dollar bailout from the taxpayers, an institution whose illegal behavior caused them to have to pay a \$5 billion fine to the Federal Government. Those are the people he is bringing in to regulate, to take on Wall Street. He is bringing Wall Street executives who caused the worst financial crisis in modern history of this country to take on Wall Street. Well, I don't think most Americans believe that.

So, Mr. President, let me close by saying that I hope that tonight the Senate stands up for the American people, demands that President Trump keep the campaign promises he made, and that we reject the nomination of Congressman PRICE to be the next Secretary of Health and Human Services.

With that, Mr. President, I yield the floor.

The PRESIDING OFFICER. The Senator from Connecticut.

Mr. BLUMENTHAL. Mr. President, I am very honored to follow my distinguished colleague from Vermont on issues that he has worked so long and so hard and so well, and that is health care for our Nation and focusing on the fight for women's health, for access to affordable care for all Americans, and for a Cabinet truly free of conflict and corruption—a cause that we share in opposing TOM PRICE as the Secretary of the Department of Health and Human Services.

What is so painfully apparent to him and me and many of our colleagues is that Representative PRICE's nomination is a doubling down of the ongoing blatant attack on women's health by his administration. His radical anti-choice policies, antiquated views on reproductive health, and demands to repeal the women's health provisions of the Affordable Care Act disqualify him from serving as the next Secretary of Health and Human Services.

Before the ACA was signed into law, being a woman meant higher health care costs for simply being a woman. It is estimated that this discrimination cost them about \$1 billion more every year. They had to pay higher costs simply because they were women.

Representative PRICE has been clear about where he stands on this issue, with his policy effectively eliminating important protections against discrimination that were guaranteed under the Affordable Care Act. Under Representative PRICE's reckless proposal, all women, including healthy women, could see their insurance costs rise—and rise astronomically. His plan also means guaranteed coverage of maternity care services could be lost. It means well-woman visits, birth control, domestic violence screening, and breastfeeding support—all provided now without any out-of-pocket costs—would be lost. The simple truth is, with Representative PRICE's policies, many women will go without necessary care.

More than a quarter of all women and 44 percent of low-income women al-

ready rely on publicly funded health clinics like Planned Parenthood for contraception. Without guaranteed access to birth control, without cost-sharing, this number will certainly climb.

It isn't hard to see why, despite the lonely opposition of Representative PRICE and the Republican Party, 70 percent of Americans support a birth control benefit. Representative PRICE callously asked to see one woman who couldn't afford birth control, one woman who was left behind. If he is confirmed and if the policies he vigorously supports are enacted, he will see millions without necessary health care and particularly birth control.

As many know, Representative PRICE's attempt to defund Planned Parenthood means more than just losing access to birth control; it means cutting off preventive care, cancer screenings, and STD testing for millions of low-income women. The women who get their care from Planned Parenthood seek what all of us want, what all of us should have a right to receive—trusted, compassionate, and medically sound health care. Representative PRICE's politically motivated tax on Planned Parenthood put this care, and their lives, at risk.

Clearly, Representative PRICE is one of the most extreme Members of his party on issues of women's health, and that includes his views on women's reproductive rights—a woman's right to choose. He has supported radical legislation that would ban virtually all safe abortions and even some forms of birth control, which, in essence, would send our country back to a time when women died because the care they needed was outlawed. It was made unlawful; it was banned. That time has gone. We do not want it to come again.

Simply put, Representative PRICE's anti-choice views are not only ill-informed and unconstitutional, but they are downright dangerous.

Representative PRICE has also shown remarkable indifference to the concerns of the millions who will see their health insurance disappear—vanish—following repeal of the Affordable Care Act, if that disgrace should occur. For millions, the Affordable Care Act has been the difference between seeing a doctor at the first signs of disease and waiting until treatment is no longer an option. It has been the difference between financial security and bankruptcy. Much of the bankruptcy in the United States of America has to do with medical costs.

For many, it has been the difference—no exaggeration—between life and death.

The numbers support this point, whether or not Representative PRICE wants to believe them. Since the passage of the Affordable Care Act in 2010, the percentage of uninsured Americans is the lowest it has been in 50 years or more. The positive impact of this law is felt every single day in the State of Connecticut. It has reduced our unin-

sured rate by a massive 34 percent, resulting in 110,000 Connecticut residents gaining coverage. Many of my constituents have felt emphatic about—and have told me so—exactly how the Affordable Care Act has changed their lives and their family's lives for the better.

Representative PRICE refuses to guarantee that these families will be covered following repeal. So I hope he hears their stories and understands what the Affordable Care Act means to them and the millions of other Americans whom he chooses not to see, not to hear, not to know exist.

Representative PRICE refuses to guarantee that these families will be covered. For example, I point to a woman in Connecticut named Colleen who told me that before the ACA was passed, her medications alone cost \$250,000 each year. That is a quarter of a million dollars. Thanks to this law, she has affordable care, no lifetime limits, and knows she will not be a victim of discrimination or denied coverage of her preexisting condition. Colleen said the Affordable Care Act has been the difference for her between life and death.

I have also heard from a father whose daughter has a chronic illness. He asked that I emphasize to all of you, my colleagues, that health insurance is “not a luxury, but a necessity” for his family. His daughter represents one of the 1.5 million people in Connecticut who are now protected from discrimination based on preexisting conditions, thanks to the Affordable Care Act.

I have heard from a retired pastor who counts on the Affordable Care Act for coverage, a farmer who fears for his family's health after repeal, a young woman who was able to start her own business because of the assurances promised by health reform, and a veteran who is scared for his wife.

Representative PRICE cannot promise that these people will keep their coverage, and he has said that outlawing discrimination because of preexisting conditions is “a terrible idea.” He thinks it is a terrible idea to outlaw preexisting conditions. I saw the effects of preexisting conditions year after year when I was attorney general, and I went to bat and fought for people who were denied health care because their insurance companies told them that health care isn't to take care of a preexisting condition not covered by their policy. His proposals do not expand access to affordable care, and they do not protect patients.

Representative PRICE's nomination is wrong for the people of Connecticut and for the people of this Nation.

Representative PRICE's plans would also do away with the expansion of Medicaid under the Affordable Care Act, disrupting the lives and health of nearly 15 million Americans. This would leave so many people without access to preventive care, lifesaving medications, and necessary medical interventions. This is simply unacceptable and cannot be the policies of the

Secretary of Health and Human Services.

In fact, instead of expansion, Representative PRICE wants to block-grant Medicaid and cap the program, resulting in higher costs, less coverage, and devastation for millions of Americans, half of them children who rely on this program.

In Connecticut, we have been hit hard by the opioid addiction epidemic. It is a national scourge, a public health crisis, and we have relied heavily on Medicaid to fill the gaps. At a time when this epidemic needs more resources, not less, Representative PRICE would work to strip that away, leaving people who rely on Medicaid without treatment.

His plan for our Nation's seniors is just as dismal. He champions privatizing Medicare by turning it into a voucher system and ending the promise of guaranteed health benefits.

Giving seniors a fixed amount of funds to buy health insurance would result in high premiums, increased out-of-pocket costs for seniors, many of them already on a fixed income. And for many Americans, Representative PRICE may mean the difference between being able to purchase lifesaving medications and putting food on the table or heating their homes.

Finally, like many of my colleagues—and Senator SANDERS made this point so well—I have serious concerns over Representative PRICE's potential conflicts of interest. Having repeatedly purchased stock in health care and pharmaceutical companies that would directly benefit from his legislative efforts and advocacy on the company's behalf, he nonetheless made those investments and kept them.

In the face of these allegations, Representative PRICE has simply refused to provide information that could disprove violations, which has led many Americans to question whether Representative PRICE will truly put their best interests before crony capitalism.

The American people know better. These potential conflicts of interest and views on the Affordable Care Act, Medicaid, and Medicare are out of touch and out of line with what Americans want and our Nation needs. We should be building on the success of these programs, not tearing them down, and we should be working with one another to improve the health of all Americans, not fostering divisions. Sadly, Representative PRICE's views and policies make this very attainable goal really impossible. Simply put, his proposals are dangerous, they are disgraceful, and they are disqualifying.

I cannot vote for Representative PRICE to lead the Department of Health and Human Services. I will oppose his nomination and I urge my colleagues to do the same.

Thank you, Mr. President.

I yield the floor.

THE PRESIDING OFFICER. The Senator from New Jersey.

Mr. BOOKER. Mr. President, we have had a lot of long nights here, and I just

want to take a moment again to really give my gratitude to the staff. A lot of folks go into making the Senate work. We can see a lot of them down here. I can't imagine the days that they have been pulling, as we have been pulling long nights. Many of them get here early in the morning and they go a long way. So I want to thank them, from the stenographers to many of the Senate staff who make it work.

I also want to thank the pages again. These are young folks who have to carry a full load of classes and course work—hard stuff. I don't understand why they haven't come to me to help them with their calculus homework. But the reality is they are working a full class load of courses as well as being here with us around the clock. They probably aren't caught by cameras. They aren't even getting C-SPAN glory. But your presence here really means a lot, and I am grateful for that as well.

I rise specifically to speak about the President's nomination of Congressman PRICE to be his Secretary of Health and Human Services.

I want to take a step back and talk about the profound history that the United States of America has in terms of our bringing together the resources of this country to combat public health crises. We have a country where every generation has been able to step up and take on things that threaten the common health.

There was a time in this Nation when we had actual child death rates that were tragically high, and that for an industrializing nation, our water, the quality of our milk, women dying in child birth, and children dying was a common thing. But we had this bold understanding that in America, a Nation that believes in life, liberty, and the pursuit of happiness, the common health is important. And we took steps that, frankly, in a booming industrial economy, the private sector couldn't do. We took steps to protect the public health, and we made great strides.

It was a Republican President, actually, in 1953, Dwight D. Eisenhower, who actually created what was then a version of what is now the Department of Health and Human Services. Specifically, it was called the Department of Health, Education, and Welfare.

Now, the very first Secretary was a woman, and her name was Colonel Oveta Hobby. She had served as the director of the Women's Army Auxiliary Corps during the Second World War. She was, in my just great reverence, someone who served and fought for health and safety and security during World War II.

As Secretary, Secretary Hobby had an expansive and expanding role. It was a demanding role. She was coordinating the distribution of polio vaccine, overseeing countrywide hospital expansions, overseeing Social Security and the Federal education policy. She had a huge role, one that was so full that one newspaper joked that "when

she [actually] learns her job, Oveta Hobby may trim her week to just 70 hours." This was someone who went out there as an agent of the government to lift up the welfare of all of our citizenry, the health and well-being of everyone, again pushing toward those ideals.

In the United States, we really do believe in this idea of life, liberty, and the pursuit of happiness, freedom from deprivation, freedom from illness, the belief that we can have life and have it more abundantly. To Secretary Hobby, this was her duty to her country—someone, again, who served valiantly in World War II.

In the collection of papers from Secretary Hobby's lifetime, Rice University includes that she was a great humanitarian and that she believed there was a role—a "common thread," to use her words—to service to her country toward the empowerment of health for all. She set a standard, a powerful standard, as the first Secretary of Health for the greater good that we, acting collectively, could do to ensure the health and well-being of our Nation.

In fact, it was an understanding from President Dwight D. Eisenhower all the way down to Secretary Hobby that if we ensure people's health and access to health care, it is not just an individual concern, but actually, societally, we become better and we become stronger. The healthier all children are, the more likely they are to go out there and compete. If you are battling sickness, it undermines your economic well-being. In the world of infectious diseases, the words of Martin Luther King are true: Injustice anywhere is a threat to justice everywhere; in fact, an illness somewhere is the threat of an illness to people everywhere. This was the brilliance of Republican President Dwight D. Eisenhower, and it is how this great Department began, setting the standard, understanding that in many ways we are all in this together when it comes to our health.

So for me, this is another point in history. It is a challenge to us as to who we will be as a Nation. Will we continue to be a country that believes, as a fundamental birthright in the richest Nation on the Planet Earth, that everyone can access the highest quality health care, the best access to quality doctors with wide avenues to pursue the rich abundance of life because we have the best health care system on the Planet Earth?

I actually was happy to hear President Trump on the campaign trail talk specifically about this issue, tell us we were going to have a health care system better than the one we have now, specifically calling it *ObamaCare*; that we were going to have one that is amazing, one that is going to be covering more people. I think the word that was used was "terrific"; it was going to be terrific. He specifically spoke about some of the bedrock elements of our current health care system that Republicans and Democrats

both agree are things we want to preserve, protect, and in fact make better. He specifically talked about Medicare and Medicaid, defending them: They wouldn't be taken away; they wouldn't be undermined; people wouldn't be kicked off.

So with this excitement, hearing that we have a President committed to these ideals, creating a terrific health care system, we stand on this history in our country where we know our greatness, and it is an affront if we don't have a system that takes care of our most valuable natural resources: the people of this country and a global, knowledge-based economy. What helps us compete is the quality of our workforce.

I am telling you right now, I have learned in my professional life that when children are sick, they don't learn; when a mother is sick, it throws the whole family into crisis; if someone can't afford their medication, it is not just a sin to this country's values, it is a sin morally.

So when President Trump nominated his person to be Health and Human Services Secretary, we might imagine they would reflect the values that he espoused during his campaign and reflect the values he has talked about as President. But instead, he has chosen someone who is diametrically opposed to the things he says he is for—preservation of Medicare. More than this, he has advocated a view on health care that unequivocally would take millions of Americans off of health coverage, thrust millions of Americans into economic crisis, and put the health of many millions of Americans in jeopardy. Usually people say these things hyperbolically, but this is quite clearly a matter of life or death.

For years, Congressman PRICE has told us who he is. He has led the charge in the House of Representatives to repeal the Affordable Care Act and take coverage away from millions of Americans while advocating specifically for the privatization of Medicare and the gutting of Medicaid. For years, Congressman PRICE has advocated for anti-choice, anti-contraception access, anti-commonsense measures, and supported efforts to defund and eliminate proven programs like title X family planning, programs like Planned Parenthood which, through their Medicare reimbursements, often in many communities is the only access women have in their communities for cancer screenings or to get contraception.

Congressman PRICE has been one of the loudest voices on tearing down many of the things that now Americans overwhelmingly say "Hey, now that we've got this, we don't want to lose it," whether that is not having insurance companies dictating to you whether you get health insurance or not having pharmaceutical companies ratchet up prices so much that your lifesaving drugs are out of reach.

Then finally, at a time when we cannot afford to have people who have conflicts, we have a Congressman right now for whom other House Members

are calling for ethics investigations because his personal financial interests clearly have been in conflict. In fact, he seems to be building a career as a Congressman working on health policy on one hand while building a fortune trading health stocks directly related to that work. This is a man who is so conflicted, a man who is so contrary to what our President says he believes, a man who has been leading the charge to take our health care back in an affront to the ideals that literally stem from the founding history of our Department of Health. I cannot support this individual.

But let me quickly go through some of these things. We now have to have an honest conversation in our country about this idea of repealing the Affordable Care Act without replacing it because objective organizations like the Congressional Budget Office, conservative organizations like the American Enterprise Institute, and fellow Republican Senators of mine have acknowledged that to repeal the Affordable Care Act would throw into crisis millions of hard-working Americans who have been able to get coverage because of the health insurance marketplace and the Medicaid expansion. Millions of Americans can now go to a doctor when they feel sick instead of going to an emergency room. By the way, as a local mayor—when people use emergency rooms as their primary care facility, it is extraordinarily more expensive; it is fiscally irresponsible.

Because of the ACA, millions more Americans can now access basic health and preventive services that can lead to lifesaving opportunities that did not exist before. Millions more Americans have the peace of mind of knowing that they are no longer one illness away from financial ruin.

Let me put up a chart for a second about the history of people having insurance.

This is the percentage of uninsured in the United States—going along, about 18 million uninsured. And then what happens? The uninsured rate has been driven down. Enrollment in the individual market continues to rise but has now decreased since 2014.

In late December 2016, Standard & Poor's—hardly a Democratic organization, but a market-based organization—released an incredibly optimistic report for the future of the individual market in the Affordable Care Act. But Congressman PRICE, on the other hand, has repeatedly introduced legislation and resolutions to repeal critical elements or the entirety of the law responsible for these successes without any regard for consequences. He has done this again and again and again and again, eight times. He authored a bill last year that would repeal critical parts, like the Medicaid expansion provision that has expanded access to care for millions, tax credits that would help millions buy insurance. And Congressman PRICE has introduced legislation that would fully repeal the Affordable Care Act.

I want to let you all understand that, to me, this is a point in our American

history where this isn't arguing over opinion; these are facts about what Congressman PRICE has done. If he were successful in any of those eight attempts to rip down the Affordable Care Act, we now know objectively from organizations like the independent Congressional Budget Office that it would mean 18 million people losing their health insurance in the first year alone, 32 million of our fellow Americans by 2026. Objectively, there would be increases in premiums in the market by 20 to 25 percent; 4.4 million of those Americans who would lose coverage would be children; and 11 million of the most vulnerable would lose their Medicaid coverage.

There is a man named Andy Slavitt who is a former Acting Administrator of the Centers for Medicare and Medicaid—again, what our President says he wants to preserve. He put together a list because so many people were calling him, writing him: What are going to be the consequences if they repeal the Affordable Care Act without replacing it? What are the consequences? And he just went through a list: Small businesses, farms, self-employed Americans represent 20 percent of the coverage of the exchange. These are individual entrepreneurs, many of whom, by the way, experience something called job lock, where they are afraid to become entrepreneurs because if they lose their jobs, they lose health insurance. Twenty percent are covered by the exchange, and 127 million Americans—127 million Americans—have preexisting conditions. They would be put at jeopardy, and insurance companies would be able to deny them coverage.

Seniors, Medicare beneficiaries, have saved \$2,000 on prescription drugs because of the ACA—\$2,000; 30 million Americans are on individual policies and Medicaid; 2.8 million Americans with drug disorders would lose coverage; 1.25 million Americans with mental health disorders would lose coverage—1.25 million Americans with mental health disorders. In other words, the ACA put mental health care on parity with physical health care. A 42-percent reduction in uninsured rates for veterans has resulted. He said that bad debt—bad debt, bankruptcy—would go up by \$1.1 trillion because health care bills would again be the lead cause in this country of bankruptcy. In other words, before the ACA, the No. 1 reason people were declaring bankruptcy was because of medical bills. After the ACA, that can't happen. There are steps to prevent that from happening, at least to the extent of \$1.1 trillion.

The Medicare trust fund, which has been extended, will have several years reduced off its life expectancy. Taxpayers will lose \$350 billion added to the deficit and \$9 trillion would be added to the debt if it is repealed—2.6 million jobs lost, especially in communities like rural hospitals, where they

depend upon the ACA to keep doors open and hospitals running. Anyone who likes free preventive services like mammograms and better cancer treatment, preventive services that literally save lives by early detection, gone.

Young adults, 3.1 million right now on their parent's plan because of extending the years. Women who want to buy health insurance will pay more than men in premiums because, amazingly, at times insurance companies would be charging you more simply because of your gender and 105 million people had lifetime limits on what insurance companies pay.

This is a list from one of the great experts who knows factually what would happen if we were to turn back the clock. Let me drill down a little bit more. As head of Health and Human Services, Congressman PRICE would be responsible for insuring the continuance of Medicaid.

Americans like Kelley from New Jersey are able to access care right now because of the Medicaid expansions under the ACA. I want to read what she said. She said:

Thank you for supporting the ACA. I hope that you will continue to fight hard for it. It's the ACA and Medicaid that allow me to be able to seek medical treatments for my scoliosis (which causes me to suffer from chronic pain) and ensure that my newborn receives appropriate medical care when need be.

I work full time and go to college but I still struggle to pay the bills, as I'm only 18 and fast food doesn't pay much even at 35 to 40 hours a week.

Here is someone going to college, raising a child, working full time, and relying on the ACA so she can inch toward her American dream, being a college graduate, getting a better paying job.

She concludes by saying:

I want my baby to have the health care she deserves so she can be happy and healthy.

The Medicaid expansion under the ACA has extended access for millions in our country, millions of hard-working people like Kelly and their children, like her baby, across the country.

In New Jersey alone, hundreds of thousands of people gained coverage. Uncompensated costs were driven down, and my State saved a billion dollars, all because of Medicaid expansion.

Republican Governor of New Jersey: Medicaid expansion was the right fiscal decision for our State and for our communities' families who live in our State.

In PRICE's efforts to undo ACA Medicaid expansion, he has indicated people like Kelly and her newborn baby are not a priority.

I know for a fact that hard-working people across the country and in my community will suffer if PRICE is able to do what he intends to do and has tried to do.

Let me go to another issue; that is, Medicaid. How about Medicare? As Secretary PRICE, he will be responsible for overseeing Medicare, the health care program that services 57 million American seniors and those with disabilities.

Under the Affordable Care Act, we know that the quality of Medicare coverage has improved. The life of the Medicare trust fund has been extended, and we have begun to close the gap in prescription drug coverage that too many seniors and people with disabilities—they know about this. It is known as a doughnut hole. There is more work to do to strengthen Medicare and to make prescription drugs more affordable for everyone, including our seniors.

The changes we have done already have had real positive impacts on the daily lives of Americans. Let me read another letter from Myra in Willingboro, NJ. She wrote to tell me about the difference that Medicare is having for her family as they live with chronic illness. She said:

As your constituent and an advocate of affordable, accessible health insurance, I would like to share how adjustments to the health care system could impact me. As you consider policy changes, I urge you to think about how your constituents living with chronic conditions will be affected.

It is so important to my husband who lives with Parkinson's disease and myself who is being treated for Chronic Lymphatic Leukemia that our Medicare benefits continue without any cuts in benefits. It is most important that we continue to be able to visit doctors able to care for our specific needs and have the expensive medications covered that are needed as we live with these diseases.

As a support group leader for people living with Parkinson's disease—

I pause here to say, my father suffered for years with Parkinson's, died from Parkinson's. The support groups are essential, and the medical challenges that this chronic disease brings are great.

I continue with her letter.

As a support group leader for people living with Parkinson's disease and their caregivers, I know all the members would echo my requests. Many people actually need further assistance to purchase the needed drugs as their policies do not cover them adequately presently. Often the medication prices are prohibitive for folks. They have to constantly check to see which drug plan will allow their medication at an affordable price.

In addition, specific supports for caregivers is another very important need for the Parkinson disease population. Please consider assistance for these people who require assistance throughout the day.

Let me tell you, this is a person writing to say keep what we have and make it better because it is still not enough to meet the challenges. Instead, we are considering making someone the Secretary of Health and Human Services who doesn't want to improve, build upon, get better but wants to throw out.

Take TOM, who believes that for his family, their lifeline to health care access is an intrusion. This is TOM PRICE—excuse me, who believes that this is an intrusion. He writes: "I can attest that nothing has had a greater negative effect on the delivery of health care than the federal government's intrusion into medicine through Medicare."

I want to put these words up. This is what the nominee to Health and Human Services is saying about one of the most valued parts of our health care in America. He is saying: "I can attest that nothing has had a greater negative effect on the delivery of health care than the federal government's intrusion into medicine through Medicare."

I would like to tell you that is an insult to Myra and her husband, millions of American seniors, those on disabilities who rely on what he calls an intrusion. Someone who is calling for an end to a program that millions of Americans rely on, that the President himself swore that he would do nothing to disturb, we are now putting the chief architect of the destruction of Medicare from the House into a position where they can wreak havoc on the health care of millions.

I want to go into that area of pre-existing conditions. Imagine yourself as someone who has a child with diabetes or that you are a survivor of cancer and an insurance company can now look at you and say: I am sorry. I am not going to cover you. The people driven by the market, driven by profits, driven by the bottom line are going to look at you and your humanity and simply say: Sorry, I am not going to cover you. And you live in that place in America, that dark, painful place where you know you are one illness away from destitution.

This is what Maureen wrote to me recently. She said:

Please do not repeal the Affordable Care Act. My 18-year-old son has been fighting cancer for over a year. I am scared to death of what his future will hold without the protections of the ACA. He may be subject to a lifetime cap on insurance payments or be rejected for health insurance entirely on the basis of a preexisting condition. He is only 18. He could be financially ruined before he even gets his adult life started. After fighting cancer as a teen, it scares and upsets me to think that his battles will continue throughout his life in the form of financial hardships from the loss of protections he currently has through the ACA.

She ends saying:

Please consider my family when voting on the ACA.

Please consider my family. There are millions of Americans who now are living in this state of fear, looking at the rising and the ascendancy of Congressman PRICE to a position—someone who has tried again and again to end insurance for people with preexisting conditions.

I don't understand what we are trying to achieve with putting someone who believes that somehow the free market will take care of these folks. I began with our history as a country: booming industrial economy. The free market didn't take care of ensuring that our waters and rivers were cleaned up. The free market didn't take care of eradicating polio. We are a nation that has learned from our history that we have a responsibility to each other, and in our common civic space and in the

governments that are established amongst men and women, we have to do better for folks who are victims or vulnerable to the vicissitudes of the free market.

That is why we are stepping up to say that we can create a system that serves all. We are the richest country on the planet Earth. What even makes this worse than Medicaid under assault, Medicare under assault, people with preexisting conditions, which are issues that are simply around contraception.

Congressman PRICE would be expected to uphold protections currently in place that prohibit insurance companies from charging women more because of their gender and ensuring that insurance companies abide by the Affordable Care Act's contraceptive care.

All that talk about preexisting conditions, many insurance companies saw gender as a preexisting condition. As something as critical as having access to contraception, TOM PRICE has voted time and time again to restrict access to essential health care services and limit reproductive rights.

Before the Affordable Care Act was passed, cost was a major barrier for women seeking access to birth control. Congressman PRICE has repeatedly opposed the provision requiring insurance plans to cover contraception. This is what he said in an interview in 2012:

Obviously one of the main sticking points is whether contraception coverage is going to be covered under health insurance plans and at hospitals, and whether or not they're going to be able to pay for it, especially low-income women, where do we leave these women if this rule is rescinded?"

That is the question. PRICE's response was simple:

Bring me one woman who's been left behind. Bring me one. There's not one.

I am sorry, in this case, PRICE is not right; PRICE is wrong. There is not just one you could bring. There are millions of women who were left behind and struggled with access to coverage before the Affordable Care Act. For this man to stand there and cast a shadow over the basic commonsense understanding that when you allow women to make their reproductive health decisions and have access to contraception, you give them power over their lives and their destinies. You actually reduce unwanted pregnancies dramatically. This is an economic issue. This is an empowerment issue. This goes to the core freedoms as a country.

The Center for American Progress reported in 2012 that before the ACA contraceptive provision went into effect, that "a recent study shows that women with private insurance paid about 50 percent of the total costs for oral contraceptives, even though the typical out-of-pocket cost of non-contraceptive drugs is only 33 percent. Surveys show that nearly one in four women with household incomes of less than \$75,000 have put off a doctor's visit for birth control to save money in the past year." Because of the ACA's contrac-

tive provision, America has changed. According to the National Women's Law Center, 55 million women have saved \$1.4 billion on birth control pills alone since 2013.

Listen to Rachel from West Orange, NJ, a couple towns over from where I live. She benefited from the contraception provision of the ACA as well as access to Planned Parenthood. This is what she wrote:

The Affordable Care Act is something that has made a huge impact on my life. I come from a poor background, and there is no additional money to spare on things like birth control, which I take for my independence and legitimate medical issues. Without birth control, I'm unable to get out of bed for days at a time because of painful periods. This means losing out time off work and opportunities because of a serious medical malady.

I never thought I would be able to normalize my life because I can't afford a \$40 copay every month, in addition to my expensive transportation passes, student loan payments, and helping my parents pay their bills. However, with the Affordable Care Act, I have access to free birth control that allows me to live my life and succeed. It enables my independence, and makes me a healthier individual. I am terrified that any repeal of the Affordable Care Act will harm my health, my career and my ability to lead a normal life.

We want people to lead the life of their dreams—their health, their careers. What she is asking for is not a luxury. It actually benefits us all because we are empowering her to succeed. That makes this country greater. Yet TOM PRICE, this nominee, has voted 38 times on measures that would restrict women's access, including 10 times voting to defund Planned Parenthood. At a time when there are fewer unwanted pregnancies, when women have more power, more control over their lives, TOM PRICE wants to roll things back.

Struggling women are fighting to raise families and go to college and pay the bills and run businesses or be entrepreneurs, that they are having constrictions placed on their lives—you empower women, you empower this Nation.

In New Jersey, Planned Parenthood's 26 health centers provide access to life-saving care for women across the socioeconomic spectrum. I will fight tooth and nail with all that I have for not rolling things back. We are not going back. And a Congressman who has pledged to do just that should not be the Secretary of Health and Human Services.

TOM PRICE has spoken out against sex education. I am a believer. I said this when I was mayor, all the time. In God we trust—I am a man of faith—but everybody else, bring me data. Sex education is actually something that has a powerful economic benefit. When it comes to advocating for better health options and outcomes, we know this is not an idea or theory, but there is a connection between poor, incomplete, or absent sexual education and increasing rates of teen pregnancy, sexually transmitted diseases, sexual assault.

Young people are also disproportionately infected, without sex education, with HIV, and HIV rates among young adults are truly problematic in this country. Kids who are granted full information live healthier lives. But Congressman PRICE advocates against that. He thinks sex education doesn't reduce rates of teen pregnancies—it does; doesn't reduce rates of sexually transmitted diseases—it does; doesn't reduce rates of sexual assault—it does; doesn't reduce rates of HIV—it does. But he thinks that it promotes promiscuity among young people.

I want to end with my last point. All of this is enough, but this is the more astonishing part of my opposition because in this, I would at least think we could get my Republican colleagues to join with me because if you look at past Presidents, something less than this has sunk nominations before. This doesn't have to do with health policy; this has to do with conflicts of interest.

There was a great Senator who pulled himself out of consideration for what, compared to this, is a mild issue that he moved to correct on paying taxes on a benefit that he received. He pulled himself out of consideration. He had that kind of dignity to say: You know what, I have this small issue. I am pulling myself out of consideration.

But TOM PRICE is charging right ahead, while people in the House are calling for his investigation. Some of my colleagues have already addressed this, so I won't go into it much, but the SEC investigation should be there. An independent watchdog from the Office of Congressional Ethics should be there. We don't know because these organizations, the SEC and the Office of Congressional Ethics, don't announce when they are investigating somebody. But there are a whole bunch of people saying that Congressman PRICE has potentially violated something called the Stock Act, which was basically put in place so that Congresspeople, who know things about regulations or issues affecting companies, can't benefit off of that insider information to profit themselves. I don't understand why, at a time that this is all hanging over his head, that there should be an investigation, that we should get to the bottom of it before we put him in the President's Cabinet, Democrats and Republicans here, given past history and past nominees who had to withdraw, why aren't we joining in a bipartisan way and saying: Hey, there is a lot of smoke here, and the facts are kind of screaming for attention.

Let me just be clear. As an example, last March Congressman PRICE bought between \$1,000 and \$15,000 worth of shares in a company called Zimmer Biomet. They are a medical manufacturer that specializes in hip and knee devices. House ethics disclosures show that he invested in the company just 6 days before introducing a bill that would have directly benefited hip and knee replacement companies like Zimmer Biomet, H.R. 4848. Let's do this

again. He invests in a company 6 days before he introduces legislation that would have benefited such a company. That is astounding, to me, and it should raise alarms in terms of the codes of conduct of a potential Cabinet nominee. He invested in a medical manufacturer of hip and knee devices and shortly thereafter introduces a bill, the HIP Act.

What is more, though, is while Congressman PRICE has said that he was unaware of the stock purchase because it was bought by a broker, his financial disclosure forms show that he initialed the purchase to note an error. He initialed the purchase. So to say he had no knowledge of it is a stretch.

Congressman PRICE then added nearly two dozen cosponsors to the bill over the next 3½ months. I am sorry, if a Senator here did that—knowingly buying stock, then introducing a bill—I know this body would look askance on that. More than that, I don't think you need to explain much of this because it is so obvious that American folks at home are knowing that you should not introduce legislation to self-deal to yourself.

Let me give another example. PRICE also bought stock in an obscure Australian biopharmaceutical firm called Innate Immunotherapeutics through a private offering that was not made available to the public. The private stock offering gave Congressman PRICE access to hundreds of thousands of discounted stock.

At his Senate confirmation hearing, he asserted the stocks were “available to every single individual that was an investor at the time,” but this is how the Wall Street Journal reported it—not quite a liberal periodical. It said:

In fact, the cabinet nominee was one of fewer than 20 U.S. investors who were invited last year to buy discounted shares of the company—an opportunity that, for Mr. Price, arose from an invitation from a company director and a fellow Congressman.

The shares were discounted at 12 percent off the traded price in mid-June only for investors who participated in a private placement arranged to raise money to complete a clinical trial. The company's shares have since tripled during the offering.

I am sure that Americans at home who are saving for their retirement would love to have an insider deal like this, would love to be clued in by company heads to an opportunity to triple their money, but clearly something is wrong when a Congressman is doing that. That should cause us to pause as a nation before we put him in as a Cabinet Secretary over all of our health care.

It is a disturbing pattern when Congresspeople use their position of power for personal gain with no regard for public interest. This type of behavior would be unacceptable in most industries. It should be unacceptable to Congress, to Senators on both sides of the aisle who have to advise and consent.

Look, we are at a point in our country where we have taken steps forward

on health care. It has been controversial, I understand, but there is no arguing with the fact that we are now at a point in America where someone with a preexisting condition is not stopped from having health insurance, where young people all over our country have the security of knowing they can stay on their parents' health insurance until they hit 27. We are at a point now where being a woman is not a preexisting condition, where we have expanded access to contraception. We are at a point in our country where the uninsured population has gone down dramatically.

We cannot have someone whose attitude is not what I would hope it would be, one of “Hey, we accomplished a lot. Let's figure out a way to make it better. Let's build on it.” Instead, they not only want to take back the gains I just mentioned, but they want to go further and take back Medicaid and Medicare, privatize them, gut them, block-grant them.

So this is not a close call. This is a Congressperson who for years has told America what his intentions are. He just didn't have the power to do it then because he was 1 out of 435. Frankly, if you include the Senate, he was 1 out of 535 and had a Democratic President also to get through. He couldn't get done what he wanted to get done. Now he is going to go from being one voice on the fringe, yelling for getting rid of Medicaid and Medicare, yelling against women's access to contraception, yelling to put insurance companies back in charge of your life, your destiny, and your health care—he is going to go from a fringe voice, 1 out of 435, to now being the head of the Department of Health, advising the President on things, frankly, that he has said, at least, that he doesn't want to do: gutting Medicare, gutting health care for seniors.

So I go back to where we came from—a Republican President, Dwight D. Eisenhower, and the first head of the Health Department, an incredible woman, World War II—served soldiers in World War II. And they had a vision for this country, that, hey, what we have is not good enough. Let's figure out a way to do better because a healthy society is an economically strong society. A healthy society is a prosperous society. A healthy society lives up to our common values.

We are the United States of America. We should set the national standard for health care. When it comes to the most vulnerable amongst us, whether it is a poor kid on a farm, whether it is someone in an inner city, whether it is an immigrant, we are a country that believes—like the old African proverb: If you want to go fast, go alone, but if you want to go far, go together.

One of the great singers and artists and inspirations in my State is a guy named Bruce Springsteen. He has a song where he says: We take care of our own. Well, we have done well on that idea. We have gotten better. We

have made strides toward that standard.

We have work to do. We should be working together, both sides of the aisle, to make our health care better, more inclusive, more accessible, and more affordable. We have a lot more work to do. But I don't want to go back. So help me, I will fight every day to prevent us from going backward where there will be fewer people covered, more people, because they can't afford things, suffering untold health crises.

I don't want to go backward to where women are denied coverage or access to empowering things, basic things, fundamental things like contraception.

I don't want to go backward with senior citizens who are in the sunset years of their lives, when they should be free of stress and worry and strain but suddenly are worried again and struggling and suffering. I don't want to go back to those days; therefore I will vote a resounding, full-throated no on Congressman PRICE because, as the poet Maya Angelou said, if someone tells you who they are, believe them. He is someone who has told us what he wants to do. We should stop him from doing it.

I yield the floor.

The PRESIDING OFFICER (Mr. PERDUE). The Senator from Florida.

VENEZUELAN PASSPORTS

Mr. RUBIO. Mr. President, I wanted to take a few moments today. I know we are in the middle of this debate about the health care law, about the nomination. On a topic I have been working on for a while, I was compelled to come to the floor at this late hour because it has now broken in the press. It is important to kind of give some clarity.

As my colleagues know, I have spent a significant amount of time over the last few years discussing the issues in the nation of Venezuela, which has a direct impact on my home State of Florida but ultimately on the country. It is a nation that faces some very significant challenges, primarily because its political leadership is a disaster. It is no longer truly a democracy. It is now a government run by a tyrant who has basically ignored the Constitution. They have taken over the courts. The members of the judiciary in Venezuela are now basically under the complete control of their so-called President, Nicolas Maduro, and before that, Chavez. They control the press. They have a national assembly that actually is controlled by the minority party or the opposition party to the government. But it is pretty shocking. My colleagues would be shocked by this. We all travel abroad often. Imagine if you lived in a country where the President denied you the ability to travel abroad. Well, that is what has happened.

One of the members of the National Assembly in the opposition, Luis Florido was trying to go to Peru to travel and was denied the ability to