

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

leave the country. Imagine that. Imagine that one of our Democratic colleagues here in the Senate decided they wanted to take a trip next week overseas in the conduct of their office and were told that the President was not allowing them to travel abroad. That happened in Venezuela. Another one, Williams Davila, had his passport taken away by the President of Venezuela. So the country is a disaster because of their leadership. It is actually headed into a cataclysm.

In April of this year, Venezuela has to make a \$6 billion payment on their debt. They will not be able to make that payment. The Government of Venezuela knows that. It is a terrible situation.

But in the midst of all of that, I have argued that the national security interests of the United States is at stake in what is happening in Venezuela. This is not just about the issue of democracy; it is also about the threat it potentially poses to the United States. That is what I come to the floor to speak about tonight.

My office has been engaged with a number of people over the last few months and year who have been coming to us with information. We have been working on some of this. Some of that has now broken into the press tonight in a CNN report that I am about to describe in a moment, but first, let me lay out the scene.

There have been about 8.5 million names added to Venezuela's immigration system since it was last independently audited in the year 2003. OK. So 8.5 million people were added to their immigration system, the new names that have come about. Of the 8.5 million names that were added, 221,000 of those—over 221,000 of those are foreign nationals, and at least 173 of those 221,000 foreign nationals are from the following countries: Iran, Syria, Iraq, Lebanon, and Jordan. So 173 people from these countries were provided government passports and national IDs between the year 2008 and 2012, which leads me to this: In November of 2015, a Venezuelan attache by the name of Misael Lopez Soto, who was assigned to the country's Embassy in Baghdad, became a whistleblower, and he began to reveal the identities of several of these 173 names.

Understand that this is important because there has been a 168-percent jump in U.S. asylum applications from Venezuela since October of 2015, now the third highest nation of origin for asylum applicants to the United States. The overwhelming majority of them are legitimate people fleeing all this craziness that is happening. But I lay the groundwork to understand the connection between Venezuela and the United States.

I now want to go into the story of Mr. Soto, who, as I said, used to work at the Embassy.

Mr. Soto was assigned to work at the Embassy of Venezuela in Iraq. As he began to work there, he noticed some

irregularities, so he began to report what he says was a scheme to sell passports and visas for thousands of dollars out of that Embassy. He was offered all kinds of money to do this, to get a cut of those thousands of dollars. He says he declined it.

CNN and CNN en Espanol have over the last year teamed up on a joint investigation, relying on much of the same information that I have had access to, looking into all of these allegations and what they uncovered. In the story that posted tonight was evidence of serious irregularities in the issuing of Venezuela passports and visas, including passports that were given to people with ties to terrorism.

According to CNN, one confidential intelligence document obtained by CNN—intelligence documents from nations in the Western Hemisphere, not from the United States—actually directly links Venezuela's now new Vice President, who is in line to potentially become the President when the current dictator is going to have to give up power here soon because of this cataclysm that they are facing—the name of that Vice President is Tareck El Aissami. There are now links, according to CNN, to the current Vice President, Tareck El Aissami, and the 173 Venezuelan passports and IDs that were issued to individuals from the Middle East, including people connected to the terrorist group Hezbollah.

It is important to understand—and the CNN article appropriately outlines this—if you have a passport from Venezuela, you are allowed to enter over 130 countries on this planet without a visa. That includes the 26 countries in the European Union. So a Venezuelan passport is a valuable commodity for someone who is trying to travel around the world under an assumed name with a valid government document. That is why it is important.

Mr. Lopez, the whistleblower who once worked at the Embassy, is a lawyer. He used to be a police officer in Venezuela. He said, according to the article, that he thought that becoming a diplomat was a great career opportunity that would allow him to serve his country, so he moved to Baghdad and started his new life at the Embassy.

He remembers what he calls an unwelcome surprise on his first day in July of 2013. His new boss was Venezuelan Ambassador Jonathan Velasco. The Ambassador handed him a special envelope, he said.

“He gave me an envelope full of visas and passports,” Lopez recalled. “He told me, ‘Get this, this is one million U.S. dollars.’ I thought it was like a joke. Then he told me here people pay a lot of money to get a visa or a passport to leave this country.”

Meaning Iraq.

About a month later, Lopez said he realized it was no joke.

An Iraqi employee of the Embassy who was hired to be an interpreter told him that she, the interpreter, had

made thousands of dollars selling Venezuelan passports and visas and that he could make a lot of money too. He says he told her it was wrong and he refused. The employee pressed the issue, telling him that there were thousands of dollars to be made, even discussing an offer to sell visas to 13 Syrians for \$10,000 each.

Lopez said that he was stunned when he found the document inside the Embassy. It was a list of 21 Arabic names with corresponding Venezuelan passport numbers and Venezuelan identification numbers. A Venezuelan immigration official told CNN that a crosscheck of the passport numbers indicated that the passports are valid and that those passports, given to these people with the 21 Arabic names—when he ran the crosscheck, they actually matched the names on the list Lopez found, meaning the people on the list could be able to travel using those Venezuelan passports.

But here is what is incredible: A publicly available database in Venezuela examined by CNN shows that 20 of the 21 identification numbers of the people with the Arabic names that match the passports are actually registered to people with Hispanic names, not the Arabic names listed on the passports.

So basically CNN has uncovered evidence that at least on 21 occasions, the Venezuelan Government—the Venezuelan Embassy has sold passports to someone from the Middle East but assigned them a Hispanic surname or a Hispanic name. People are traveling under assumed identities from the Middle East. We have a couple of those names we are going to share with you in a moment.

In April 2014, only 9 months after he started the job, he emailed a report about all this to the Ambassador. He said the Ambassador did nothing, and, in fact, the Ambassador, Velasco, threatened to fire him.

By 2015, he was so frustrated that no one would investigate it that he took what he found to Delcy Rodriguez, who was Venezuela's Foreign Minister. He emailed the report and said that there was fraudulent issuing of visas, birth certificates, and Venezuelan documents. He said nothing happened. With nowhere else to turn, Mr. Lopez said he contacted an FBI official at the U.S. Embassy in Madrid.

By the end of 2015, the Venezuelan Government accused him of abandoning his post and removed him. A police official showed up at his home in Venezuela with a document that said he was under investigation for revealing confidential documents or secrets.

Now, this is not the first time this Congress hears about this. U.S. lawmakers heard reports about Venezuela's passport fraud during congressional hearings as far back as 2006. In fact, a congressional report warned that “Venezuela is providing support, including identity documents that could prove useful to radical Islamic groups.”

A State Department report at that time concluded that “Venezuelan travel and identification documents are extremely easy to obtain by persons not entitled to them.”

Roger Noriega, the former U.S. Ambassador to the OAS, a former Assistant Secretary of State for the Western Hemisphere, said in prepared remarks before Congress in 2012 that “Venezuela has provided thousands of phony IDs, passports and visas to persons of Middle Eastern origin.”

In 2013, confidential intelligence reports from a group of Latin American countries obtained by CNN said that from 2008 to 2012—I already outlined this earlier—173 individuals from the Middle East were issued Venezuelan passports and IDs. Among them were people connected to the terrorist group Hezbollah. The official who ordered the issuing of those passports, the report said, is Tareck El Aissami, who just a few months ago was appointed and is now the Vice President of Venezuela. Back then, he was the Minister in charge of immigration, as well as a Governor. He personally took charge of issuing granting visas and nationalizing citizens from different countries, especially Syrians, Lebanese, Jordanians, Iranians, and Iraqis, the report said.

So what we have now is an unbelievable situation in which a country in this hemisphere, according to both the whistleblower, independent reports, and now CNN’s own investigation—Venezuela—has been providing passports to people from the Middle East under false pretenses, basically fraudulent documents that allow them to travel all over the world.

Among them, Hakim Mohamed Ali Diab Fattah, a Palestinian and suspected Hezbollah member, was given national ID No. 16.105.824, issued on July 12, 2012. He was deported from the United States in 2002 for his possible connection to the 9/11 hijackers via aviation school in the United States. He was detained and arrested by Jordanian authorities on May 3, 2015, for suspicion of financing terror. This individual has that national ID number from Venezuela and a passport that was allowing him to travel.

Here is another one: Ahmad Adnan Ali, an Iraqi, another suspected Hezbollah member. He is a convicted trafficker facing charges in France and Denmark, and he has documents under two aliases: Ahmed El Timmy Villalobos, with the number 29.645.898. That is the number on the ID that was issued on January 16, 2014. He has another alias and another document: Ahmad El Timmy Gomez. His name is neither Villalobos nor Gomez, but he has these documents.

By the way, all of this, according to CNN, is no surprise to General Marco Ferreira, who was in charge of the immigration office in Venezuela in 2002. He now lives in Miami. He was granted political asylum. “He told CNN that he personally witnessed corrupt senior of-

ficials ordering passports for people who were not citizens when he was running the department.” He said it was “very easy” to assume someone else’s identity. It was “very, very easy to go and be a Venezuelan or pretend being born in Venezuela.”

I bring this up in the midst of all these other things because we now understand that what we are facing in Venezuela is not just a corrupt government and a tyranny but a nation that is under the corrupt leadership of its now Vice President and, of course, its President, a nation that is trafficking in selling passports and travel documents to individuals with links to terrorism. That poses a direct threat to the national security of the United States. I hope in the days to come, with this new information and with this report, that we can work with the Justice Department and the State Department to take appropriate measures to protect our Nation and the world from what is occurring at the hands of the Venezuelan Government under the tyrant Maduro and under its Vice President, who personally ran the department that was undertaking these corrupt activities.

I yield the floor.

The PRESIDING OFFICER. The Senator from Massachusetts.

Mr. MARKEY. Mr. President, tonight I am here to speak in opposition to the nomination of TOM PRICE to be the Secretary of Health and Human Services, and I am standing here this evening in solidarity with millions of Americans across this country who, thanks to the Affordable Care Act, have health insurance, some for the very first time in their lives—not just access to coverage but actual health insurance for themselves and for their families, coverage that provides preventive care without copays, coverage despite preexisting conditions, coverage supported by subsidies for those who need it to help make health insurance affordable for their families.

TOM PRICE’s position on health care is contrary to everything those millions of Americans rely upon, and it is against everything that my State of Massachusetts stands for.

So let’s take a look at TOM PRICE’s formula for health care for America. First, Congressman PRICE wants to repeal the Affordable Care Act. He wants to bring back discrimination against those with preexisting conditions. He wants to kick 32 million Americans off their health coverage. He wants to deprive women of reproductive health choices, and all of this, ultimately, is going to raise prices of insurance, of health care coverage for everyone who has insurance right now, which is 80 percent of America who gets their private coverage.

Second, TOM PRICE wants to end Medicare as we know it. He would increase the Medicare eligibility age and create a voucher system that pushes the cost of the program directly onto seniors. Finally, he wants to slash

Medicaid, which provides health care to disabled and poor families across this country.

So that is his plan. This is the TOM PRICE health care plan for America in the 21st century: No. 1, repeal the Affordable Care Act; No. 2, end Medicare as we know it; and, No. 3, gut Medicaid and raise premiums for everyone else in our country. No one with any sense believes this is a winning formula.

Voting for the Affordable Care Act was the best vote of my entire political career, and that is because I agreed with Senator Ted Kennedy that health care is a right and not a privilege and that everyone in our country is entitled to health care coverage and that that health care is the solid foundation for our entire country to build their lives on.

Ralph Waldo Emerson said: “The first wealth is health.” Without health, you have nothing. That is what the Affordable Care Act is all about—to give every American the first wealth, the most important one, the access to the health care which they need. That is the promise that all Americans were made with the Affordable Care Act, and it is a promise that we still must keep.

Before TOM PRICE and his Republican allies came up with their blueprint to dismantle the ACA and put their big health insurance companies back in charge of your health, there was a Massachusetts blueprint that helped to create that historic health care law. Many of those core fundamentals were from Massachusetts and were then just built right into the Affordable Care Act: creating a marketplace so that insurance companies compete for customers, expanding Medicare to cover more low-income residents in our State, helping lower and middle-income people buy insurance with tax subsidies, encouraging people and businesses to buy in so we are all splitting the cost and sharing the benefits, and a employer-responsibility requirement for all large employers to offer coverage to their workers.

In Massachusetts, we call this RomneyCare, a good Republican program from my Republican Governor—RomneyCare. Then on a national level, they called it ObamaCare. In Massachusetts, we just called it successful. It worked. It is a good plan.

Right now in Massachusetts, 98 percent of all adults have health care insurance; 99 percent of all children have health insurance. The Massachusetts unemployment rate is 2.8 percent. We are No. 1 in math, verbal, and science at the fourth, eighth, and tenth grades out of all 50 States. We have the cleanest environment in the United States. We have health care for all children and all adults, and our unemployment rate, again, is 2.8 percent.

It is not a choice. In fact, it is a business plan for the State. It works—the healthiest families, the most educated children in the Nation, the lowest unemployment rate. It all comes together. It is a plan.

Now, to listen to the critics of this idea—that everyone is entitled to health care—you would think that it would destroy our economy, and they are still waiting for it to happen, as our unemployment rate continues to go down and down and down.

What is up? I will tell you what is up. Cancer screenings are up. Preventive care visits are up. Diabetes treatments have gone up. Health disparities among women and minorities are down. That is who we are. We can do this. It is a plan. It is a plan. It actually ensures that every child in America, every family in America really doesn't have to worry about something happening, some bankruptcy taking place because they can't afford the health care that one of their family members needs. That is what was happening before the Affordable Care Act passed.

So what makes Massachusetts one of the healthiest places in the world to live is in jeopardy with the nomination of TOM PRICE. He is coming for this plan. He doesn't think it works. He doesn't understand what has happened in Massachusetts or across our country.

In fact, in the State of Kentucky, the Democratic Governor, Governor Beshear, has instituted this plan in his red State, and he took the total number of people up to 95 percent of total coverage for Kentucky—hundreds and hundreds of thousands of people.

If we did that across the whole country, then we would essentially have the Affordable Care Act of Massachusetts in the whole country, but there has been strong resistance from States that are ideologically opposed to having this kind of a plan be put in place. So they are coming for it. That is what TOM PRICE is doing.

Let me give you an idea as to what TOM PRICE's plan does for Massachusetts and ultimately for the rest of the country that has adopted the plan. In Massachusetts alone, there will be an average per person loss of \$2,280 in tax credits, and 83,000 seniors and people with disabilities may lose \$1,000 per year in saved prescription drug costs. We could lose an estimated 57,000 jobs just in Massachusetts with all these services just being eliminated. We would have the loss of \$1.85 billion in Medicaid expansion funding and the loss of more than \$700 million in Federal premium tax credits and cost sharing reduction payments for middle-income families.

We also have to consider the Affordable Care Act's prevention and public health fund. Here is what went wrong with our health care system in the 20th century: We were running a sick care system, not a health care system. So what the Affordable Care Act did was it began to shift the emphasis towards prevention. How do you stop people from getting sick in the first place? That is the way we should be viewing disease in our country. The Affordable Care Act is our government's single largest investment in prevention.

Since enactment of the ACA, the prevention fund has provided more than \$5 billion to States and communities across the country to support community-based prevention programs. Nationally, the prevention fund also funneled hundreds of millions into the preventive health services block grant. These grants have been critical in Massachusetts, for example, helping our communities respond to the heroin, prescription drug, and fentanyl crises.

Unfortunately for all of us, TOM PRICE's assault on health care wouldn't stop there. Congressman PRICE's march on the Affordable Care Act would slash Medicaid—and listen to this number—which pays for \$1 out of every \$5 in America for substance use disorder treatment.

The repeal of Medicaid expansion would rip coverage from 1.6 million Americans, newly insured Americans who have substance use disorders. We have an opioid crisis in America, a fentanyl crisis, a prescription drug crisis. People are dying in record numbers. What TOM PRICE is proposing is going to take 1.6 million of these Americans who are receiving treatment right now and just strip them of this health care benefit.

What happens to them? We know what happens if you don't have treatment. We know what happens if you don't have prevention when you have a drug problem. It leads, inextricably, inevitably, toward a conclusion that is now affecting tens of thousands of people in America every single year, and that is death. You tell these 1.6 million people they no longer have coverage, and you are sentencing them to consequences that, I don't think, our country wants to see.

I have served in Congress for nearly 40 years, and I have never seen anything like this opioid epidemic, never.

In Massachusetts, 2,000 people died last year. We are only 2 percent of America's population. If the whole country was dying at our rate, that would be 100,000 people a year dying from drug overdoses. That is two Vietnam wars every single year.

What TOM PRICE is saying is that he is going to rip away the Affordable Care Act funding for those who have substance abuse. Nationally, opioids have now killed more people than gun violence, auto accidents. Many people who have substance use disorders benefit from protections under the ACA. It is guaranteed. The funding is there for it. So this is for me just one perfect example of many, many examples which I can use in order to kind of just give people insight as to the horrors that are going to be done to vulnerable families all around the country.

Donald Trump is bragging today that he is going to provide a big league tax cut for businesses in America, big league tax breaks for the wealthiest people in our country. That is a commitment. The wealthiest can get a big tax break, businesses can get a big tax break.

Where will that money come from? Well, in order to pay for the Affordable Care Act, hospitals across the country kicked in about \$500 billion over 10 years in order to help with the costs, but the hospitals received something in return. Because of the Medicaid subsidies for patients, they would now have insurance, and when they showed up at the hospitals, they would actually have insurance coverage. So that would help the hospitals have the revenue they need in order to take care of business. Since many fewer people were now going to arrive at the emergency room, the uncompensated care—that is the funding which the hospitals just had to provide for patients who just walked into an emergency room—would now be dramatically reduced because the patients would have insurance through the Affordable Care Act. The \$500 billion they had promised to the Federal Government that would not be an expenditure, that would be the tradeoff.

Then you say to yourself, what is the Republican plan now? What they are saying is, they are going to kill these subsidies that have reduced the number of people who do not have insurance going into emergency rooms, and they are going to strip that away. They don't have a plan. This is the TOM PRICE plan—nothing. But they are also saying they are not going to give back the money to the hospitals which had been used in order to deal with the uncompensated care. So it is a con job. The President says you have a big tax break to the wealthiest in our country, big tax break to the businesses in our country. Where is the money coming from? Where is the piggy bank? Here is the piggy bank. The piggy bank is the money that was being used to give insurance for people to go to hospitals with their families. That is being taken away, and they will use it to give tax breaks to the businesses. You are taking it from the people who need it the most, for health care, preventive services, and families and you give it to the people who need it the least, the wealthiest and the businesses in the country. It is a con job—take the money and hand it over to the largest constituency in the Republican Party. And who is the architect? TOM PRICE.

Is that why he would destroy this health care system? Is that why you would cut back Medicare? Is that why you would gut Medicaid? You do it so you can give huge tax breaks to the wealthiest in our society? That is an unacceptable plan, and it makes him an unacceptable candidate to be the Secretary of Health and Human Services in our country.

We have a raging epidemic of opioids. We have all kinds of problems that can be dealt with if people had the insurance coverage and they knew they could go in order to get the help they need.

Now let's focus on the Medicare Program because they want to save money there too. How are they going to accomplish that? Well, there were doom-

and-gloom prospects about the Medicare programs that came from the Republicans, TOM PRICE himself, but just the opposite happened. The Medicare Program since the Affordable Care Act went into place has resulted in the lowest per member rate of spending growth in its 50-year history for Medicare. Premiums paid by enrollees in Medicare Part B and Part D have gone down against all the predictions of its opponents, and perhaps more importantly, the savings have helped America's seniors by ensuring that Medicare will continue to be there for them.

Here is a big number for you. Medicare had previously faced a projected insolvency that could have occurred this year—this year. Medicare insolvent. However, because of the Affordable Care Act, it extended the insolvency date of the Medicare trust by 12 years. Good news for seniors. Repealing the law jeopardizes Medicare for a generation of Americans.

But TOM PRICE doesn't just want to repeal the Affordable Care Act, the second part of the health care assault is to transform Medicare into a voucher program and increase the Medicare eligibility age. After a lifetime of hard work, Congressman PRICE would make seniors wait longer for the benefits they earned.

My father was a milkman for the Hood Milk Company. His arms were the size of my legs. Milk men work hard. Blue-collar people work hard across our country. Working-class people work hard. Should they have to wait until they are 66, 67, 68, 69 to receive a Medicare benefit? They work hard. That makes no sense whatsoever. That is TOM PRICE. How do you increase the age when people can receive Medicare coverage for their health when they are old in order to save money—for what purpose? To then have a tax break for the wealthiest who already have the money they need in order to take care of the health care of their families. That is one thing you never have to worry about. The wealthy in America have all the money they need for their families.

Do you want to know another thing? The higher your income, the more likely you are going to live longer than people who don't have money. You don't have to worry about wealthy people. They are fine. Their health is fine. Their children are fine. Any problems in their family are fine.

Well, how about other families in our country? That is what this plan does. They want to lose that plan in order to give more money to the people who already have enough for the rest of their lives. So that would wind up increasing premiums for grandma and grandpa by hundreds of dollars, making them pay more out-of-pocket for less care. What TOM PRICE essentially wants to do is get us into the Wayback Machine and return us to a time when corporate insurance companies were calling the shots in our country, back to a time when a person could go bankrupt be-

cause of medical bills, back in time to when Americans had to choose between paying for the rent or paying for a life-saving medical treatment.

The Affordable Care Act moved our country from being a sick care system to a health care system, but Congressman PRICE wants to undo all of that progress and get rid of all of those protections.

Here is TOM PRICE's bottom line: repeal the Affordable Care Act, which results in fewer insured patients, and that means more patients in the emergency room and higher premiums for everyone else. That formula is as bogus as a degree from Trump University. It doesn't add up.

The people who have to pay for it are everyone else's insurance policies that are going to go up. Because you better believe the hospitals and insurance companies, when that money is not there in the Affordable Care Act, insurance policies for those people, and you don't get back the \$300 to \$500 billion that the hospitals have now committed back to the Federal Government, somebody is going to have to pay. Somebody is going to pay, and you don't have to be Dick Tracy to figure this out. The people who are going to pay will be every other American who has an insurance policy. It will just go up 5, 10, 15 percent, everybody else's insurance policies. The hospitals are getting their dough; the insurance companies are getting their dough.

When people go to an emergency room, they are not going to be turned away. Somebody is going to have to pay. Where is the payment going to come from? Everybody else's insurance policies, which are going up, and the money that had been saved is going to the Federal Government for tax breaks to the Trump administration. He said today big league tax breaks for the wealthy, big league tax breaks for businesses. Great. This is the plan that if you kicked it in the heart you would break your toe. What about ordinary people? What about the people who need help?

Martin Luther King, Jr., said: Of all forms of inequality, injustice in health care is the most shocking. You cannot work if you are ill, you cannot learn if you are sick, you cannot be secure if you are constantly worried that medical bills can wipe out your entire savings. These clearly are not concerns for TOM PRICE, who has a legislative history that has repeatedly favored wealthy individuals and corporations over the health of the majority of Americans.

Congressman TOM PRICE championed legislation that would eliminate young adults' ability to stay on their parents plan until age 26. Congressman PRICE trumpeted a plan that would let insurance reinstate lifetime and annual limits on coverage and charge women more because of their gender.

TOM PRICE would rip away the Affordable Care Act income-based subsidies and instead offer inadequate tax

credits that can be given to a billionaire, not the middle-class, working-class, blue-collar American.

If TOM PRICE had his way, he would implement a plan that would cause health care premiums in individual markets to skyrocket, increasing premiums for average Americans by 25 percent immediately and doubling over the next 10 years. He wants to strip Planned Parenthood of all its resources, and 2.5 million people would lose access to care in those community clinics. If that happens, fewer mammograms, fewer prenatal exams, fewer cancer screenings, and loss of all those vital services would hit women of color and low-income women hardest. It would increase health inequity and health disparity in our communities of color.

TOM PRICE's assault on women's health doesn't end there. He has proposed legislation that would allow health insurance companies to charge women more than men. He has repeatedly cut and limited access to family planning services. He does not believe that women should get birth control with no out-of-pocket costs. He is an outspoken and virulent opponent of reproductive health and would push women's reproductive rights back to the 18th century. Good physical health and reproductive freedom are critical to supporting women as productive members of their households and our economy. We cannot allow TOM PRICE to turn back the clock.

So this is the challenge. We have an administration committed to increasing defense spending big time, increasing tax breaks to the wealthiest and to corporations big time, and then promising to cut the Federal budget by \$10 trillion over the next 10 years. Well, where is the money going to come from?

We know what they are targeting. They are targeting all these programs that help those who need the help the most in our society. So I urge my colleagues to vote no on this nomination of Congressman PRICE. He is the wrong man at the wrong time for the wrong job. It just doesn't match up, not with a 21st century strategy that we need to have the healthiest population in the world to compete against our economic rivals across the planet, and if for no other reason, just the moral obligation we have to make sure families are not desperate when their loved ones are hurting.

I thank you for giving me the opportunity to come out here at this time, and I urge my colleagues to vote no on Congressman PRICE's nomination.

I yield back the remainder of my time.

The PRESIDING OFFICER. The Senator from Maine.

Mr. KING. Mr. President, I am a former Governor, and as such, I have an inclination to support the Executive's nominees for their Cabinet—for their Secretaries or Commissioners in my case, in Maine. I think that is an

important principle, and it is how I start when I approach the analysis of any nominee to any position put forward by the Executive, whether the Executive is Donald Trump or Barack Obama or anybody else. That is a kind of starting point, and that is how I started this January. And, indeed, thus far, as we have voted here on the floor, I have supported five of the seven nominees who have come before us, plus I supported two additional nominees in committee which have not yet come to the floor, but whom I will support on the floor.

So I am not in total opposition: Don't vote for any nominees. I don't think that is the way our system works, and it is certainly not the way I intend to approach these issues. I have approached them one at a time, looking at the position of the nominees, their policies, their views, their hearings. I have tried to follow the hearings as closely as possible, including their answers to questions. Again, I start with a bias toward approval, perhaps because of my experience as a chief executive myself.

But I can't support nominees who are fundamentally opposed to the mission of the agency they have been asked to lead. To me, that just doesn't make sense. That is why I voted against Betsy DeVos 2 days ago because I didn't believe that she had the best interests of American education—particularly public education—at heart. Her whole career has been about attacking and undermining public education by trying to, in effect, voucherize it, provide vouchers to people to use in other schools which, by the way, in a rural State like Maine, simply wouldn't work as a practical matter. So I could not support her because I felt she was hostile to the very premise of the agency that she was being asked to lead.

Today, I come to the floor to talk about Dr. PRICE. I think he falls into the same category. I understand policy differences, and I understand the election took place, and I understand elections have results and that there are going to be different policies, but his policies on the fundamental mission of the Department of Health and Human Services are just inimical to what that Department was established to do for the American people. The title is Health and Human Services, and that is the role that Department has played and should play and will play in the future of America.

Now, my problems with Dr. PRICE and his positions—and there is no doubt about his positions on various issues. He has a long record in the House of Representatives writing and legislating and advocating, so there is not much argument about where he stands, and there are really three areas that I want to touch on tonight. One is Medicare, one is Medicaid, and one is the Affordable Care Act. I want to try to put these all in the context of my home State of Maine.

Health care in Maine is an enormous part of our economy. It is somewhat higher, actually, as a percentage of our GDP than it is nationally. We are at about 20 percent of GDP. One-fifth of our economy is health care. In part, that is because we have a great number of seniors who, of course, require more health care expenditures, but it is a very important part of our economy, which I will touch on a little bit later. But let's talk about Medicare.

First, Medicare in Maine: 306,000 people in Maine are Medicare beneficiaries. The expenditure in Maine by Medicare is \$2 billion. Now, when we are talking about cutting or changing Medicare, of course we focus, as we should, on those 306,000 people—and I will talk about them—but we also need to talk about that \$2 billion. If we are talking about savings—savings don't just evaporate, they occur in real life, and those are funds that don't go to support medical care for seniors in Maine and don't go to our hospitals and don't go to our practitioners. So \$2 billion is a very significant part of our GDP, and that is just what Medicare spends in Maine, 306,000 people.

Now, I want to touch on an aspect of this that I don't think has been discussed much in these debates; that is, the burden of anxiety about health care and the cost of health care that was lifted from generations of seniors in this country by the passage of Medicare, now some 50-plus years ago. As you get older, there is anxiety about retirement, there is anxiety about income, there is anxiety about your health, but there is also anxiety about the cost of health care. The miracle of that Medicare was that it lifted that burden of anxiety from our seniors. It was one thing they didn't have to worry about. "I have Medicare" have been the words that have comforted thousands and millions of people in this country since 1965.

To change the fundamental premise of Medicare, which is what Dr. PRICE has advocated for vigorously and continuously, from the current system, which is, if you get sick, if you have hospitalization, if you need medical care and you qualify for Medicare, it is paid for. To change that to a system which is essentially a voucher, which is capped at some level of inflation but not the health care level of inflation, is a cruel trick on our seniors. What it will do is, through compounding of interest, if inflation is 2 percent a year, and medical inflation—the cost of medical treatment—increases at 4 or 5 or 6 percent a year, which is typical of what has happened in the last 15 or 20 years; there have been ups and downs, but 4, 5, 6 percent is about where medical inflation has been. So if inflation is at 2 percent, and that is what your voucher is going to increase to, and medical costs increase at 6 percent, that gap is going to grow to the point where we are back where we were in 1964, before the passage of Medicare. Then, seniors suddenly have to worry about how they

are going to pay for their health care. They are going to have an added burden of anxiety, and they are going to have an added burden of money, of finance, of cost.

You can call it all kinds of high-falutin things. You can call it a voucher program, whether or not it is privatization. There are all kinds of ways to paper it over, but what it really is, is shift and shaft. It is shifting the cost from Medicare to seniors, and over time that shift and shaft is only going to increase. I think that is unconscionable, and there is no reason for it.

Yes, the cost of Medicare is going up as a percentage of our budget. That is because we are getting older. That is because we have a demographic bulge going through our society for people who were born in the 1940s and 1950s—the baby boom generation—but that is anticipated, that is understood. There are things we can do to deal with that issue without the radical solution of essentially shifting the cost over to the seniors. It makes the Federal books look good, but it is not going to make the household books in Maine look good.

That is what really bothers me about this policy. We are trying to improve our miserable budget situation by shifting a great deal of these costs off to individuals. That is just wrong. Medicare is too important financially, emotionally, psychologically. It is too important as an essential part of the promise that we have made to each generation of Americans for the past 50 years. And to fundamentally change that and realize, I believe cynically, that as the gap increases over time, the percentage of the premiums that is being shifted onto seniors is going to grow over time, until at some point—and you can do the arithmetic—it is going to eat the whole thing. And the Federal share, yes, will be capped—or capped at some lower level, and the share that is paid by the individual, by the family, by your mom, by your dad is only going to be greater. That is wrong. That is a breaking of the promise that we made to our seniors.

The second piece where Dr. PRICE, I believe, is fundamentally at odds with the premise, with the mission of the agency, is in Medicaid. He has talked about various programs. First, let's get rid of the expansion of Medicaid and the Affordable Care Act and then let's block-grant Medicaid and send it to the States. It is the same principle: It is shift and shaft, only this time you are shafting the States. You are taking a program which now says, if you have medical expenses and you are qualified, they are paid for, and you are saying, OK, in the future, we will give you a fixed amount of money, but if the medical expenses go up, it is on you, Mr. State; it is on you, State of Maine or Michigan or California or Georgia or Florida, or anywhere in this country.

It is simply, again, repairing the miserable books of the Federal Government because we are not facing up to our responsibility to pass reasonable budgets. It is fixing those books at the expense of somebody else. Those monies they are talking about: a \$2 trillion cut in Medicaid. Great, Medicaid is going to look a lot better, but that \$2 trillion doesn't evaporate and doesn't go anywhere. It is not like everybody is going to say: Well, they are cutting Medicaid so we are going to charge less for our hip or for our surgery or for our treatment of drug abuse. It is going to have consequences. It is going to come out of treatment. It is going to come out of health.

There is something about Medicaid that often isn't observed. I learned this as Governor. People think of Medicaid as a kind of welfare program, and there are these people who are taking advantage of it, and perhaps there are. There are always people who take advantage of programs.

The truth is, the majority of the funds for Medicaid go to people in nursing homes—your parents, your uncle, your aunt. Nursing home expenditures for the elderly are a significant cost for Medicaid. Medicare doesn't pay nursing home expenses except for a limited period of time, but a great deal of Medicaid expenses go to nursing homes. You are going to cut Medicaid? You are going to have people who aren't going to be able to afford to stay in nursing homes. That is going to shift that cost back on to the family.

The other majority of people on Medicaid are children. They are children who are covered who wouldn't have coverage otherwise.

One of the best things in this country is the combination of Medicaid and CHIP, which has resulted in an enormous increase in the covered health coverage of children. And it is so important because health problems in children that can be dealt with when they are young, when they are children, when it is covered by insurance, can save us enormous costs later on.

So, again, what does Dr. PRICE want to do? Cap, eliminate ACA expansion of Medicaid, and block-grant it.

Let's not kid ourselves. Block-granting is shifting and shafting to those elderly people who would lose coverage for nursing homes, to the children who need the coverage, but most especially, to the States. As a former Governor, I can see the impact of this on my State of Maine. It is a difficult issue, and if we limit it, the only option will be to limit coverage or to cut back.

Of course, Medicaid is one of the places we are covering the treatment of opioid addiction. The greatest public health crisis in this country in my lifetime is the opioid crisis. We are losing 1 person a day in the State of Maine to overdose deaths—1 person every day. I met a young man at Christmastime at a treatment center. I went to the Christmas party and met his family and he was hopeful and he was under

treatment. I learned this week that he is gone. He is gone, taken by the scourge of drugs.

These are real people. These are real people. These aren't just numbers and statistics. In the next hour, as we are here debating this nomination, four people in America are going to die of overdoses—four people an hour. And when you think of how we mobilized this country and the money we spent to deal with Ebola where one person died—one person in the whole country—and yet we have this horrible disease and scourge that is just decimating our societies and we are talking about cutting back one of the basic props for providing treatment. We have cases where we—there is a huge backlog of treatment beds.

I have been working on this problem in Maine for a long time. One of the things I have learned is that once a person who is addicted reaches a stage where they are willing to ask for help, we have to be there—then. To say to that person there will be an opening in 3 weeks or 3 months is akin to a death sentence because they might not be able to make it 3 weeks or 3 months; yet that is the situation in much of the country today. That is the situation, and we are talking about knocking one of the props out from under our ability to deal with this horrible public health crisis that is devastating this country in every State, but particularly in rural States. It is taking people out of the workforce that we need, it is tearing families apart, and it is affecting everybody. It is not just certain people in certain places. It is everybody. It is middle-class families. It is people of all ages.

To blithely talk about we are going to block-grant Medicaid and fix the amount—it is the same as what I said about Medicare; the iron law of the percentage changes. If you fix it today and inflation continues, then ultimately it withers away, and it is not going to meet the needs of our people. Yet that is what the nominee for the Department of Health and Human Services wants to do. I don't get it.

Finally, there is the Affordable Care Act. I have talked on this floor before about the Affordable Care Act and why I feel so passionately about it, how having insurance when I was a young man saved my life, how not having insurance costs lives.

The mathematics is pretty clear. There have been a number of studies: For every million people who don't have insurance, there are a thousand people who die prematurely. The Affordable Care Act now covers something in the neighborhood of 22 million people, so here is the arithmetic: 22,000 premature deaths a year. This isn't ideology. These are people. To ignore that and say we want free markets and free choice—free choice means death for a lot of people. It meant death for a young man who had what I had 40 years ago and didn't have insurance, didn't get a checkup, didn't have surgery, and

he is gone and I am here, and that is not fair. That is not fair.

I have said since I got here that the Affordable Care Act isn't perfect. It can be changed; it can be fixed. I hear every now and then that my colleagues are saying: Let's repair it. I am all for it. Let's repair it. Let's get over this talk about repeal. But Dr. PRICE has been one of the leading voices, if not the leading voice, in the Congress to repeal the Affordable Care Act. I don't know his exact voting record, but I suspect he voted for every one of those repeals in the House 60, 70 times over the last couple of years: Repeal, repeal. Well, you are repealing people's health care.

He doesn't want to have the patient protections in the Affordable Care Act, the ones that keep it so that you can't discriminate against women in health insurance because they are women. And there have to be preventive services. Preexisting conditions—he says: They have to insure; they have to keep you on for the preexisting condition. But if you lose your health insurance for a few months, sorry. The clock stops, and you can't get it again because of a preexisting condition. That is one of the most important and fundamental promises of the Affordable Care Act, yet he wants to get rid of it.

Here is the reality in Maine. We are a rural State. We have a lot of rural hospitals. I urge every Member of this body to talk to their hospitals. I have done it. I have gone to the hospitals and sat down with them. I did it as recently as 2 weeks ago with a small rural hospital, the Penobscot Valley Hospital in Lincoln, ME. They told me the repeal of the Affordable Care Act would cost them \$1 million a year, and they can't afford it. I have been to the Bridgton Hospital. I have talked to people from—not all, but many of our small hospitals, and 50 to 60 percent of our rural hospitals are running in the red right now. The Affordable Care Act has provided insurance coverage to people who are the customers of those hospitals, and the estimates are that repeal of the Affordable Care Act without a reasonable replacement would reduce their revenues anywhere from 5 to 8 to 10 percent. These hospitals can't stand that kind of cut, and they have told me there are only two choices: One is to shrink their services to their communities, and the other is to close their doors.

In Maine, in our rural State, we have only 16 counties. In 8 of our 16 counties, the hospital is the largest employer in that county. I am sure that is true in all of the States in our country that have these small rural hospitals; the hospital is the major employer. So again, when we are talking about cutting the Affordable Care Act and all these policy things and ideological things, what we are doing is cutting jobs in small towns that can't afford to lose them, and they are good jobs. If that is what you want to do, fine. But fess up and understand that is the consequence of policies that are espoused

enthusiastically by this nominee for the Department of Health and Human Services. It doesn't make sense to be putting someone in charge of an agency that is supposed to be looking out for the welfare and the health of our citizens who is diametrically opposed to maintaining the health and welfare of our citizens.

In Maine, we have 75,000 people on the Affordable Care Act. I know people who have it who couldn't have coverage otherwise without those subsidies. But he is not going to allow those subsidies anymore. It is every man for himself. Every man for himself means a lot of people fall by the wayside, and that is wrong. That is wrong in Maine, and I can't vote for somebody who is going to put a dagger in the heart of these citizens of Maine. I cannot do it. My conscience will not let me.

So on Medicare, shift and shaft to the seniors. On Medicaid, shift and shaft to the States. On the Affordable Care Act, shift and shaft to those people who need health insurance and the hospitals in our communities, the hospitals in those communities. If you take paying customers away, it is a double whammy: You lose the revenues from the customers, and then you have to treat them as charity care. It makes the bottom line in these hospitals even worse. As I said, they have told me in my State—and I suspect this is true practically everywhere—50 to 60 percent of our hospitals are skating on the edge. They are in negative territory. They are in the red, and we are going to cut their revenues by 8, 10 percent? It is unconscionable. It is truly unconscionable. That is a word used around here sometimes, but this is it.

All in the name of some kind of ideology, we want to go back to the health care—I can't believe we are debating Medicare, a program that has been so successful and so important to seniors throughout the last three to four generations. We are now debating it? It doesn't make any sense. To put somebody in charge of the Department of Health and Human Services that is inimical to Medicare, Medicaid, and the Affordable Care Act—this guy is a wrecking ball. He is not a Secretary. He is going into this agency to destroy it. He wants to undercut and diminish and, in some cases, literally destroy some of the major underpinnings of providing health care to people in this country.

If we were sitting in this body and somebody walked by me and was stricken by a heart attack and fell on the floor, I would help him. Every one of us would help him. I suspect Dr. PRICE would help him. He would be the first one there. But by these changes, what we are doing is having people fall by our side and ignoring them in large scale across the country. It is just as real as if it is happening right before our eyes. Twenty-two thousand people will die if health insurance is lost prematurely. Seniors will take on a bur-

den of anxiety and fiscal drain that they can't afford that they have avoided for 50 years.

The final point is that this man's policies are at odds with those of his boss. Through the campaign, President Trump issued pretty much ironclad guarantees to seniors that he was going to maintain Medicare, maintain Social Security, but then he appoints a guy whose whole professional career has been aimed at undermining Medicare. I think they had better get on the same page. I don't always agree with President Trump, but in this case I think he is right. I wish he would whisper into the ear of his nominee: You can't have it both ways. You are either for it or you want to gut it. That is what we are facing in this vote.

This is a vote of conscience for me. It is also a vote about my State. I love those people. I know them. I started out as a legal services attorney in a small town in Maine. My first boy was born in that town, in a little, rural hospital that is struggling. I can't stand by and see someone take over this Department who is going to do harm. That is the medical creed, isn't it? Do no harm; that is the oath. But we are talking about harm to seniors, to children, to people with insurance who will not have it. We are talking about real harm.

That is why I come to the floor tonight to urge my colleagues to reject this nominee. If the President wants to put somebody forward who is conservative and has ways of fixing some of these things and thinks some improvements should be made—and we don't have to do everything the way we have always done it. I'm not arguing that. But goodness, gracious, don't give us a nominee whose whole career has been spent aimed at undermining and diminishing and gutting the very programs that have meant so much to the people of America.

I am voting no on this nominee. I believe my colleagues should do so as well.

Mr. President, I yield the floor.

The PRESIDING OFFICER. The Senator from Oregon.

Mr. WYDEN. Mr. President, before Senator KING leaves the floor, let me just say, as one who ran the legal services for the elderly program in Oregon, that the Senator makes all of us in legal services proud tonight. Senator KING has really put a face on what is at stake here in the way he has focused on the opioid scourge that is hammering areas from coast to coast. Rural health care—without rural health care, we can't have rural life. It is just that simple. Certainly when we get to the closing here in perhaps an hour and a half or so, we are going to get to the bottom line, as the Senator did. I think these changes take America back to the day where health care was for the healthy and wealthy.

So I thank the Senator for his passion and his commitment to his citizens, but also to the people of this

country. Anybody in legal services tonight will be very proud, as I am, because what it is all about is standing up for people, and the Senator has said it very well.

Mr. President, we will be having our closing remarks here in perhaps an hour and a half or thereabouts. We have several Members of the Senate who are on their way for their remarks, and several Members of the Senate have discussed various elements of the serious and unanswered ethics questions surrounding Congressman PRICE's nomination. It is my view that these are issues that have set off loud ethical alarm bells.

I want to take a little bit more time to lay out the full story here.

The stock trades Congressman PRICE made while working on health care policy do, in fact, raise serious ethical and legal questions. None of Congressman PRICE's stock trades raise more questions than the hundreds of thousands of shares he bought in the obscure Australian biotech company known as Innate. His stock in this company is by far his largest of holdings, both in terms of the hundreds of thousands of shares he owns and the value of those shares, and that exceeds a quarter of a million dollars.

Congressman PRICE told the Finance Committee that he did not get a special deal. He told the Health, Education, Labor Committee that he did not get a special deal. But the fact is, Congressman PRICE paid bargain-basement prices for Innate stock in a private sale last August. The private stock sale was limited to a small group of well-connected American investors.

Congressman PRICE's participation has been described as a "sweetheart deal" by Kaiser Health News and a "privileged, discounted offer" by the Wall Street Journal.

As I said during his nomination hearing, Congressman PRICE's participation in the private stock sale showed bad judgment at best. At worst, it raised serious questions about whether he violated the STOCK Act or other security laws. I will take a minute to read section 3 of the STOCK Act. It says: "Members of Congress . . . may not use nonpublic information derived from such person's position . . . or gained from the performance of such person's official responsibilities as a means for making a private profit."

It is well known that Congressman PRICE learned about Innate from a House colleague, Congressman CHRIS COLLINS of New York. COLLINS is not just a casual reader of the Australian business pages; he is actually a member of the company's board and its largest shareholder.

This raises additional questions: Did Congressman PRICE have access to nonpublic information about Innate or its private stock because of his position as a Member of Congress? Did he get special access to the discounted private sale because of his position? Does he stand to profit because of the information or access he may have received?

Finally, did Congressman PRICE tell the Finance Committee the truth about how he learned about the private stock sales and the ability of typical investors to participate?

Congressman PRICE would have us believe that he decided to make these investments based on his own research into the company. That is what he told the Finance Committee.

Let me quote from the Wall Street Journal's article published January 30:

Mr. Price wasn't in line to buy shares in the last private placement because he hadn't previously participated in private fundraising rounds. . . . Mr. Price first invested in the company a year ago, buying shares through the open market on the Australian exchange. He learned about the company from Mr. Collins, who holds a 17 percent stake in it. Mr. Collins said Mr. Price is "one of my friends" and that he sits "next to him" on the House floor. . . . Mr. Price got it on the discounted sale after Mr. Collins filled him in on the company's drug trial, according to Mr. Collins.

The fact is, you don't just get in on a private stock offering by accident. As the Wall Street Journal explained, Congressman PRICE didn't originally even meet the criteria for participating in the 2016 private offering because he hadn't participated in any previous offerings. Yet he was able to buy over 400,000 shares of stock with Congressman COLLINS' help.

My view and the view of my Democratic colleagues is that Congressman PRICE failed to come clean with the Senate Finance Committee on the details of the special discounted deal. He has assured the committee he followed the law, but straightforward questions have been met with dodging, weaving, and obfuscation. Details of his purchase continue to emerge, and the public's understanding of his involvement continues to evolve.

Meanwhile, as scrutiny of the deal continues to mount, Innate's top executives are defending Congressman PRICE at the behest of his colleague Congressman COLLINS, who sits on the company's board of directors.

After the Wall Street Journal story was published, the company and Congressman PRICE went into spin control. The public knows this only because Congressman COLLINS made a mistake that everybody who uses email for work has seen made at least once: He mistakenly hit "reply all" when responding to an email from the company's CEO, Simon Wilkinson. Instead of a private note to Mr. Wilkinson, the note wound up going to a CNN reporter covering the story.

In the email, Congressman COLLINS, the company's top shareholder, said the Wall Street Journal was "yellow journalism," and he thanked Innate's chief executive, Mr. Wilkinson, for defending Congressman PRICE and the company. According to CNN, Congressman COLLINS acknowledged the email to be authentic.

The Finance Committee's own experience with Innate only adds to the sense that there is a coverup as Repub-

licans seek to race Congressman PRICE across the confirmation finish line.

The day after the Wall Street Journal story ran, I wrote my own letter to Innate's CEO, Mr. Wilkinson. I asked the company to respond to the article and the inconsistencies in Mr. PRICE's explanations and for documentation of details of the private stock sales. The company refused to answer my letter.

This looks to me like a coverup, and it ought to shake this body's confidence in Congressman PRICE's nomination. This situation, in my view, demands that further questions be asked and answered. Instead of taking time to explore these issues, Republicans took the unprecedented step of suspending the Finance Committee's rules to rush this nomination to the floor before any more questions could be asked, let alone answered.

In years past, as with the nominations of Senator Daschle, Secretary Geithner, and Ambassador Kirk, the Finance Committee left no stone unturned in the vetting process. Not this time. The majority party, in my view, is on its way to an ethical double standard to cut off the vetting process. That leaves me with a question for Congressman PRICE and my Republican colleagues in the Senate: What is there to hide?

Mr. President, before I continue, I ask unanimous consent to have printed in the RECORD the letter that I sent to Simon Wilkinson, chief executive of Innate, on January 31, 2017.

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

UNITED STATES SENATE,
COMMITTEE ON FINANCE,
Washington, DC, January 31, 2017.

MR. SIMON WILKINSON,
Chief Executive Officer,
Innate Immunotherapeutics Limited,
Sydney, Australia.

DEAR MR. WILKINSON: As part of the U.S. Senate's constitutional duty to confirm presidential appointments, I have been reviewing the record of U.S. Representative Thomas Edmunds Price, who has been nominated to be the Secretary of the U.S. Department of Health and Human Services.

To that end, I am writing to you seeking prompt assistance in providing information and documents related to Congressman Price's investment in Innate. Please provide the requested information and documents:

1. The New York Times reported that "Mr. Wilkinson and Michael Quinn, Innate's chairman, said they had never heard of many of the company's more prominent investors, and said they first learned that Mr. Price had invested in the company from an article in The Wall Street Journal [published online December 22, 2016], which first reported his investment."

In written response to questions from the Committee, Congressman Price said "I communicated with Representative Collins, who is a director of Innate. As noted above, I learned about Innate through a general conversation with him in the fall of 2014. I also communicated with Simon Wilkinson of Innate regarding my interest in participating in the 2016 private placement of company stock." In addition, the Wall Street Journal reported that "Mr. Collins said he told Mr. Price of the additional private placement. He

said Mr. Price asked if he could participate in it. 'Could you have someone send me the documents?' Mr. Collins recalled Mr. Price asking him."

a. Please identify any meeting or communication between you, the company, its officers, employees, directors, consultants or affiliated personnel, and Congressman Price. In so doing, please include the person or persons involved in such communication or meeting, the date, method, location of the communication, and the subject of the communication.

b. Please provide any e-mail or other written communications between you, the company, its officers, employees, directors, consultants or other affiliated personnel, and Congressman Price. In addition, please provide any documents transmitted by Innate to Congressman Price, and any document Congressman Price transmitted to the company.

2. Regarding the August 2016 private stock placements reference in the company's Notice of Annual General Meeting and Explanatory ("Notice") on July 25, 2016:

a. Please describe how Innate found and solicited potential buyers for the private stock sale in August 2016. In so doing, please provide all dates that solicitations or other communications regarding the stock sale was sent to investors. Please also note any differences between how U.S. and non-U.S. investors were solicited. Please provide the number of U.S. investors at the time of the solicitation, the number of U.S. investors who were solicited, the number who agreed to participate, and the number who were considered accredited, "friends and family," or met some other classification or category. Please provide any and all solicitation materials, offering documents, or other information related to the sale that were sent to participants in the placement.

b. Please describe the criteria by which the company determined who could participate in the sale both within the U.S. and outside the U.S. Please provide supporting documentation regarding the company's criteria for participants in the sale, if the not contained in the offering documents described in Question 2(a).

c. It has been reported that these private offerings were made available—in the U.S.—only to shareholders who had previously participated in private stock placements. Is it correct that shareholders had to have previously participated in Innate's private stock placements?

i. Please provide any documents that describe eligibility for the August 2016 private placements, if not already provided in response to Questions 2(a) or 2(b).

ii. Did Congressman Price participate in any private stock placements prior to the August 2016 private placement?

d. Based on interviews with you and Congressman Collins, the Wall Street Journal reported that Congressman Price qualified for the August 2016 private placements in the U.S. as one of six "friends and family" solicited for the sale.

i. Was Congressman Price one the "friends and family" participants described by the Wall Street Journal?

ii. What were the requirements for "friends and family" participation?

iii. Please provide any and all offering documents that were provided to this class of participants for the August 2016 sale. Please provide any and all documents that show the company's eligibility criteria for determining this class of participant in the August 2016 sale. Please provide any and all documents that describe eligibility for this class of participant in the August 2016 private placements.

e. Did the names of individual participants or criteria for participation in the August

2016 sale come before Innate's officers or its board of directors for consideration, including Congressman Price? If so, please describe what actions or consideration officers or directors took. Please provide any supporting documentation of the selection decisions.

f. Did the company use an investment banker or other agent for the August 2016 private placements? If so, please provide the name of the bank or agent and its employees who were involved in the sale.

g. What role did Congressman Collins—a director and Innate's largest stockholder—play in the U.S. 2016 private placements?

Please provide the requested information and documents via email on a rolling basis as they become available. Please contact my staff at +1 (202) 224-4515. Thank you to your prompt attention to this matter and your timely response.

Sincerely,

RON WYDEN,
Ranking Member.

Mr. WYDEN. I would also refer my colleagues to the following news articles: "Trump's HHS Nominee Got A Sweetheart Deal from A Foreign Biotech Firm," a story published by Kaiser Health News on January 13, 2017; "Representative Tom Price Got Privileged, Discounted Offer on Biomedical Stock, Company Says," a story published by the Wall Street Journal on January 30, 2017; and "In accidental 'reply all' to reporter, Collins thanks CEO for defending HHS nominee," a story published by CNN on January 31, 2017.

Mr. President, I wish to now discuss what is known about the facts and timing of Congressman PRICE's investment in Innate. This is a timeline that is based on public documents, press reports, and information the nominee provided the Finance Committee.

If you have never heard of Innate until the last few weeks, you would be forgiven. The New York Times described it as a "tiny pharmaceutical company from Australia that has no approved drugs and no backing from flashy venture capital firms." Innate has fewer than a dozen full-time employees. The company's stock was first listed on the Australian Stock Exchange in 2013, and until recently its market capitalization was well below \$100 million. Innate has never generated revenue from drug sales. It has repeatedly teetered on the brink of running out of cash. It has just 2,500 shareholders. By way of comparison, a major American pharmaceutical company could have hundreds of thousands of shareholders.

Innate is planning to submit an investigational drug application to the Food and Drug Administration, and its ultimate goal is to one day sell itself to a large pharmaceutical manufacturer, which would take its early-stage experimental therapy to market.

What I am describing is, this company is the poster child for obscure companies. It is so small and so obscure, it doesn't even have a Wikipedia page. So the question is, How did Congressman PRICE come to learn about this company, and how did he decide to make it the single largest investment

in his sprawling portfolio of health care stocks? The answer is, the Congressman learned about Innate in 2014 during a conversation with his colleague, Congressman COLLINS of New York. As I indicated, Congressman COLLINS sits on Innate's board of directors. Congressman COLLINS is also the company's largest shareholder, holding 38 million shares. Congressman COLLINS' adult children, his chief of staff, and many of his political backers are also heavily invested in the company. I am going to touch on those issues in a few minutes.

According to disclosures with the House Ethics Committee, Congressman PRICE bought some 61,000 shares of Innate stock in 3 separate purchases during January of 2015. At the time, the stock was trading at roughly 10 cents a share. Congressman PRICE testified to the Health, Education, Labor, and Pensions Committee that he directed his broker to make the January 2015 purchases.

Fast-forward to August 2016. Congressman PRICE bought another 400,000 shares of Innate as part of a private stock sale for U.S. investors. When the private sale took place, Innate's shares were trading on the Australian Stock Exchange for the equivalent of 31 American cents. Participants in the private sale got the shares at a deep discount.

In written testimony to the Finance Committee, Congressman PRICE said he paid 84,000 American dollars to buy the 400,000 shares. He bought 250,000 of those shares for 18 American cents per share in one private stock placement. He bought another 150,000 shares for 26 American cents each in a second private stock placement. Congressman PRICE's House Ethics Committee disclosures showed that he acquired the stock on August 31. On that day, Innate's stock was trading for the U.S. equivalent of 31 cents a share on the Australian Stock Exchange. In my book, that is a special deal.

The bottom line is that Congressman PRICE bought these shares for \$40,000 less than an average investor would have paid to buy the same amount of stock off the open market. That is nearly 33 percent off the price on the Australian Stock Exchange at the time. Since that time, Innate's stock has more than doubled. These facts are not in dispute.

Mr. President, I ask unanimous consent to have printed in the RECORD Congressman PRICE's written testimony in response to my questions for the record as part of his nomination hearings.

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

QUESTIONS FOR THE RECORD

"THE HONORABLE THOMAS E. PRICE NOMINATION HEARING FOR HHS SECRETARY" HEARING DATE: JANUARY 24, 2017

QUESTIONS FOR THE RECORD FROM RANKING MEMBER RON WYDEN

Innate Immunotherapeutics purchases

5. The nominee owns 461,238 shares of Innate Immunotherapeutics Ltd. ("Innate"), a small Australian biopharmaceutical firm developing a multiple sclerosis therapy. The nominee acquired the stock in four separate purchases on January 8, 9 and 23 of 2015 ("2015 tranche"), and in a pair of private stock placements on August 31, 2016 ("2016 tranche"). Regarding Innate:

a. Question: Please describe how and when the nominee first learned about Innate.

Answer: I previously answered this question for the SFC. I learned about Innate during the course of a conversation in the fall of 2014 with Representative Chris Collins regarding their respective personal backgrounds. I cannot recall the specific date of that conversation. During that exchange, Representative Collins told me that he sat on a number of public company boards including Innate, which was developing a treatment for multiple sclerosis (MS).

b. Question: Did the nominee or his staff ever meet or otherwise communicate with current or former employees, directors, consultants or other officials affiliated with Innate. If so, please describe the communication, including who it involved, the date, subject, place and form (e.g. in person, by phone or communication).

Answer: I previously answered this question for the SFC.

I communicated with Representative Collins, who is a director of Innate. As noted above, I learned about Innate through a general conversation with him in the fall of 2014. I also communicated with Simon Wilkinson of Innate regarding my interest in participating in the 2016 private placement of company stock. According to Innate's website, Mr. Wilkinson is currently the Managing Director and CEO of Innate.

My Congressional staff has not met or otherwise communicated with current or former employees, directors, consultants or other officials affiliated with Innate.

c. Question: Please describe any communication between the nominee and Congressman Collins regarding Innate Immunotherapy, including the date, subject, place and form.

Answer: I previously answered this question for the SFC.

I had a conversation with Representative Collins in the fall of 2014 that brought Innate, as a company, to my attention. The nature of that conversation did not, however, influence my decision to invest in the company in either 2015 or 2016.

I believe I had subsequent general communications with Representative Collins regarding Innate. I do not have a specific recollection of when those conversations occurred or their substance. Any such communications did not impact my investment decisions, however, because my purchases of Innate stock were based solely on my own research.

d. Question: The nominee bought 400,316 shares in the 2016 tranche in a private stock sale that included two placements at two prices. Please provide the number of shares bought in each placement, and the price at which the shares were bought.

Answer: I previously answered this question for the SFC. I purchased 250,000 shares of Innate in Private Placement 1 at US\$0.18/share—the same price offered all participants in this private placement. I purchased 150,613 shares of Innate in Private Placement

2 at US\$0.26/share—the same price offered all participants in this private placement.

Mr. WYDEN. I also refer my colleagues to the following news articles and documents: “Australian Drug Maker has Low Profile but Powerful Backers in Washington,” printed in the New York Times on January 13 of this year; “Aussie shareholding puts heat on President’s Ally,” published in the Australian on February 6 of this year; the 2016 Annual Report to Shareholders of Innate; a periodic transaction report that Congressman PRICE filed with the House Ethics Committee on September 12, 2016; a list of the 20 largest investors in Innate dated January 17, 2017; and a stock price history of Innate.

I wish to turn to the issue of misleading testimony. What remains unresolved are major inconsistencies between Congressman PRICE’s testimony to the Finance Committee, statements by Congressman COLLINS, and statements by Innate’s CEO Simon Wilkinson published last week in the Wall Street Journal.

Simply put, Innate’s chief executive and Congressman COLLINS, the company’s top shareholder, provided one version of events to one of the world’s most respected newspapers. Congressman PRICE provided a different version of events to the Finance Committee and the Health committee. These inconsistencies are among the reasons that Democrats boycotted last week’s Finance Committee markup. The Senate has an obligation to know the truth about these transactions in order to protect the integrity of this body and its constitutional duty to consider executive branch nominees.

Now, with respect to exclusivity of the sale, Congressman PRICE told the Finance Committee that the August sale was available to all Innate shareholders, which contradicts what Innate’s management told the Wall Street Journal. Congressman PRICE was definitive in his response to my question during the hearing.

Reading back the transcript, I said: “Well, you purchased stock in an Australian company through private offerings at discounts not available to the public.”

Here is Congressman PRICE’s response: “Well, if I may, those—they were available to every single individual that was an investor at the time.”

That is not what Innate executives told the Wall Street Journal. Here is an extended passage from the Wall Street Journal:

Rep. Tom Price got a privileged offer to buy a biomedical stock at a discount, the company’s officials said, contrary to his congressional testimony this month. . . .

The cabinet nominee is 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 fellow Congressman. . . .

At Mr. Collins’ invitation, Mr. Price in June ordered shares discounted in the private placement at 18 cents apiece, and then

more in July at 26 cents a share, Mr. Collins said in an interview. Those orders went through in August, after board approval. Mr. Price invested between \$50,000 and \$100,000 according to his disclosure form. . . .

Mr. Wilkinson said investors who had bought in a previous private placement were called to “make friends and family aware of the opportunity. . . . We are always looking to increase our shareholder base. But those new parties have to meet the definition of sophisticated financial investor.” Only six U.S. investors, including Mr. Price, fell into the friends-and-family category, Mr. Collins said. About 10 more U.S. investors were offered discounted shares by the company because they previously had been invited to partake in private placement offerings.

In other words, Congressman PRICE not only got a deal that wasn’t publicly available, he was in a special group of six investors in a special category called “friends-and-family,” whereas other American investors got in on the private deal because they previously participated in the company’s private placements. Congressman PRICE bypassed that requirement. He got in as what could only be called a special guest—a “friends-and-family” guest of his House colleague, Congressman COLLINS.

As I mentioned earlier, when I asked the company how Congressman PRICE was able to get this special status, the company refused to provide an explanation. The Wall Street Journal also reported a key distinction between U.S. investors and the company’s shareholders in Australia and New Zealand. The paper reported:

The discounted stock offered in Innate Immuno, as the company is known, was made to all shareholders in Australia and New Zealand—but not in the United States, according to Mr. Collins and confirmed in a separate interview with Innate Immuno CEO Simon Wilkinson.

The Wall Street Journal’s account is supported by company documents, specifically a “Rights Issue Booklet” that Innate published on June 10, 2016. The booklet noted that the shareholders would buy one new share for every nine shares they already own. The booklet noted that the shareholders would have “the option to pay for their new shares in either Australian dollars or New Zealand dollars.” The booklet goes on to describe the private stock sale in which Congressman PRICE participated. I will read briefly from the book:

In conjunction with this rights issue, Innate announced that it also completed a private placement at an issue price of U.S. 18 cents, raising U.S. \$1.8 million.

The booklet states clearly that the private placement was announced on the June 10, 2016, the same day Innate announced the rights issue for investors in Australia and in New Zealand.

Our staff has reviewed all of the company’s publicly available documents and found no similar advertisements for the private placement to American investors. So this paper trail pokes more holes in Congressman PRICE’s argument that the private stock sale was open to all the company investors.

First off, the company didn’t announce the existence of the private sale

until after it already had been completed. So unless an investor was on the company’s short list of go-to people, they were just excluded.

Second, the company’s documents clearly show that Congressman PRICE and other participants in the private stock sale were able to buy far more discounted shares than the company’s typical investors. Innate documents showed that the company restricted the number of shares the typical investor could buy in the rights issue to just one new share for every nine they already owned. No such limit appears to have been imposed on Congressman PRICE and the other American participants in the private stock sale. In fact, Congressman PRICE owned just over 60,000 shares at the time of the sale. His participation in the private stock sales allowed Congressman PRICE to buy 400,000 more shares. If Congressman PRICE had been held to the same rules as everyday investors, he would have been restricted to buying less than 7,000 shares.

The bottom line to me is what Congressman PRICE said was untrue. The deal Congressman PRICE got was not open to every other shareholder. And again, when I sent a letter last week to the Innate CEO, asking him to explain all of this, he declined. He told my staff that as an Australian firm, the company had no obligation to cooperate.

So to recap, Congressman PRICE told the Finance Committee and the Health Committee that the stock sales he participated in were open to all shareholders. That is not true. The private sale does not appear to have been widely marketed to American investors and was certainly not advertised in the company’s public documents. The private sale reportedly included less than 20 American investors. Congressman PRICE was part of an even smaller subgroup known as friends and family, invited by other investors—in this case, by his House colleague, Congressman COLLINS. How many people were eligible to be in the friends and family group? Just six.

That brings me to the next issue, which is, How did Congressman PRICE learn about the special sale in the first place? Congressman PRICE told the Finance Committee his conversations with Congressman COLLINS had no influence on his investment decisions.

I am going to again quote from his written response to questions for the record asking Congressman PRICE to describe the communications with Congressman COLLINS regarding Innate. Congressman PRICE said:

I had a conversation with Representative Collins in the fall of 2014 that brought Innate as a company to my attention. The nature of the conversation did not, however, influence my decision to invest in the company in either 2015 or 2016. I believe I had subsequent general communications with Representative Collins regarding Innate. I do not have a specific recollection of when those conversations occurred or their substance. Any such communications did not impact my investment decisions, however, because my

purchases of Innate were based solely on my own research.

I am going to quote again from the Wall Street Journal:

Mr. Price got in on the discounted sale after Mr. Collins filled him in on the company's drug trial, according to Mr. Collins. Mr. Collins said he told Mr. Price of the additional private placement. He said Mr. Price asked if he could participate in it. "Could you have someone send me the documents," Mr. Collins recalled Mr. Price asking him. Congressman Price wants us to believe that Congressman Collins had no influence on the decision to buy Innate stock. But Congressman Price would not have known about the company in the first place if he hadn't talked to Congressman Collins, and he wouldn't have known about the private placements without hearing about them from Congressman Collins.

Congressman PRICE characterizes his conversation with Congressman COLLINS in 2015 and 2016 as being general in nature. But again, according to the Wall Street Journal, Congressman COLLINS, one, told Congressman PRICE about the upcoming drug trial; two, alerted him to the private stock sale; and three, arranged to ensure that he could participate. To me, this seems like more than "subsequent general communications with Congressman COLLINS regarding Innate" as Congressman PRICE put it in his written response to the committee.

With respect to reporting to the committee and the Office of Government Ethics, I would just say that I think I described issues—ethical issues—that are serious enough on their own. However, it took no small amount of effort to unravel Congressman PRICE's holdings in the company because he failed to fully disclose them to Federal ethics officials, the American people, and the Finance Committee. I don't believe this issue would have ever come to light if it were not for the work of the committee's minority investigations team.

On February 7, 2 days ago, Congressman PRICE sent a letter to the independent Federal ethics officials at the Office of Government Ethics that amended his original public ethics disclosure. This letter confirmed the suspicions of Finance Committee Democrats that Congressman PRICE's original ethics disclosure to the public understated the value of his Innate stock holding by roughly a quarter of a million dollars. Put another way, his stake in Innate was more than five times the figure initially reported to the American people.

Congressman PRICE's original disclosure reported that he owned less than \$50,000 in Innate stock. At the time the disclosure was filed, by my calculation, his shares had a value of more than \$250,000. Today his stake is valued at more than \$300,000. Quite simply, it appears the shares he bought in the private stock sale in 2016 were excluded entirely from the Congressman's financial disclosure to the Office of Government Ethics. And because it is the Office of Government Ethics disclosure

that is posted on a public Web site so the public can see the investment ties and investments the President's nominees hold, the American people, too, were kept in the dark about how much stock Congressman PRICE held in this company.

In addition, the Congressman was also less than forthcoming in his disclosure of the value of Innate holdings to the Finance Committee. In his response to the committee questionnaire, Congressman PRICE valued Innate stock he bought in the private sale between \$50,000 to \$100,000. However, that amount was based on the \$84,000 discounted price the Congressman paid to buy his stocks in the August private stock sale. It was not based on the actual value of the stock on the Australian stock exchange—the true value of his holdings.

By December, when he made his disclosure to the Finance Committee, the stock price had nearly tripled and the shares he bought in those private sales were worth nearly \$230,000. In other words, he told the committee that his private purchases were less than half the value they really were.

Mr. President, I ask unanimous consent that the following items be printed in the RECORD: a memo from Finance Committee Staff to the Finance Committee, dated January 23 of this year, and a letter from Congressman PRICE to the Office of Government Ethics dated February 7, 2017, amending his public ethics disclosure.

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

MEMORANDUM FOR FINANCE COMMITTEE MEMBERS

From: Senate Finance Committee Staff
Date: January 23, 2017
Re: Nomination of Dr. Thomas E. Price

This memo describes the Senate Finance Committee staff review of the 2013, 2014, and 2015 tax returns, and other documentation of Dr. Thomas E. Price in connection with his nomination to be the Secretary of the Department of Health and Human Services (HHS).

BACKGROUND

Finance Committee staff conducted a review of Dr. Price's Senate Finance Committee (Committee) Questionnaire, tax returns for 2013, 2014, and 2015, and financial disclosure statements. As part of this review, a due diligence meeting was held with the nominee and his legal representation on January 16, 2017. His accountant participated via telephone. In addition to the due diligence meeting, staff submitted multiple rounds of written questions to the nominee.

At the conclusion of this process, three issues have been identified that have been deemed appropriate to bring to the attention of Committee Members.

SENATE FINANCE COMMITTEE QUESTIONNAIRE—ETHICS INVESTIGATION AND LATE PROPERTY TAX PAYMENTS OMITTED

All nominees referred to the Committee are required to submit the Senate Finance Committee Statement of Information Requested of Nominee ("Questionnaire").

Part D. Legal and Other Matters, Question 1, asks nominees: "Have you ever been the subject of a complaint or been investigated,

disciplined, or otherwise cited for a breach of ethics for unprofessional conduct before any court, administrative agency, professional association, disciplinary committee, or other professional group?"

In his response, submitted December 21, 2017, Dr. Price responded, "No." However, in 2010, the Office of Congressional Ethics (OCE), an independent office of the House of Representatives, conducted an investigation into Dr. Price's 2009 fundraising activities. OCE voted 4-0-1 to refer the case to the House Ethics Committee, which, after conducting a second investigation, ultimately found no wrongdoing in 2011.

In written questions submitted to Dr. Price on January 6, 2017, Committee staff requested an explanation for the omission of the ethics investigation. Dr. Price stated it was an inadvertent omission and that the majority of activities investigated related to his authorized campaign committee, rather than him personally. The information pertaining to this investigation has been and continues to be available on the webpage of the House Ethics Committee.

Part F. Financial Data, Question 10, asks nominees: "Have you paid all Federal, State, local, and other taxes when due for each of the past 10 years?" Dr. Price responded, "Yes." However, upon examining Washington, D.C. and Nashville, Tennessee real estate tax records, Committee staff determined late tax payments had been made in relation to rental properties owned by Dr. Price, totaling \$1,583.45 for late payments made over the past seven years.

In written questions submitted to Dr. Price on January 6, 2017, Committee staff requested an explanation for the omission of the late tax payments. Dr. Price stated that, regarding the DC property, he believed that "late fees and penalties derived from not receiving timely property tax notices." Regarding the Tennessee property, the nominee noted that "notices regarding property taxes for this rental property . . . were either not being received or being wrongly mailed to the tenant at the property and not reaching the nominee and his spouse."

DEPRECIATION OF LAND VALUE AND MISCELLANEOUS EMPLOYMENT DEDUCTIONS

Committee staff received 2013, 2014, and 2015 tax returns from Dr. Price on December 21, 2016. In addition to the written questions submitted on December 28, 2016 and January 6, 2017, Committee staff spoke with Dr. Price's accountant on January 9, 2017. Following the due diligence meeting with Dr. Price, Committee staff then submitted an additional round of written questions to the nominee on January 16, 2017.

Improper Inclusion of Land Value in Depreciation Calculations

Taxpayers who own rental property are generally allowed to deduct depreciation expenses associated with the wear and tear of those buildings. Taxpayers are not, however, allowed to include the value of land in the depreciable amount.

Dr. Price owns rental condominiums in Washington, D.C. and Nashville, Tennessee, and claimed depreciation expenses associated with those properties for years 2013, 2014, and 2015. It appears these values included depreciation for the value of the land. According to property tax records, the land value of Washington, D.C. condominium was listed as \$95,640, and the land value of his Nashville condominium was listed as \$30,000.

Under current tax rules, these values are not allowable for depreciation expenses. Committee staff asked for clarification on this issue in the due diligence meeting with Dr. Price and sent written follow-up questions on January 16, 2017.

In his response to the Committee, received on January 23, 2017, Dr. Price's accountant

stated he had taken the position that the land had a fair market value of zero. However, given the lack of another valuation besides the property tax assessments, Dr. Price has committed to address the discrepancy by filing a Form 3115 to adjust the depreciation and account for the improper deductions on his 2016 tax returns, though adjustments may be spread out over four years.

Absence of Documentation of Employment Deductions

In 2013, 2014, and 2015, Dr. Price claimed miscellaneous employment deductions, totaling \$19,034. Dr. Price, and his wife, also a medical doctor, both list their occupations as “PHYSICIAN” on the second page of their Form 1040s. Neither Dr. Price nor his wife actively works as a physician, though Dr. Price has noted he has maintained his medical license. Committee staff requested substantiation and further explanation of the deductions in written questions submitted December 28, 2016.

Committee staff spoke with Dr. Price’s accountant on this matter on January 9, 2017, and again during the due diligence meeting on January 16, 2017. In those discussions, Dr. Price’s accountant noted that Dr. Price and his wife, Elizabeth, would compile a variety of expenses, including vehicle expenses, and discuss with the accountant what portion of those expenses would be appropriate to deduct as employment expenses, frequently settling on an amount equal to roughly 60 percent. Though the Prices no longer actively work as physicians, their accountant

believed that the deductions were appropriate, and were reflective of expenses incurred by Mrs. Price. After the January 16, 2017, due diligence meeting, staff suggested that in the absence of full documentation of the deductions, that the returns be amended.

In a response, received January 23, 2017, Dr. Price’s accountant noted that proper documentation could not be located. Dr. Price’s 2013, 2014, and 2015 tax returns will be amended to remove the \$19,034 of deductions. Since Dr. Price was subject to the Alternative Minimum Tax (AMT) in each of those years, the changes will not result in any change to tax liability.

ASSET VALUES

In separate financial disclosure filings to the House of Representatives, to the Committee, and to the public through the Office of Government Ethics (OGE) Form 278, the nominee reported ownership of stock in an Australian pharmaceutical company—Innate Immunotherapeutics Ltd. The nominee purchased these shares in two tranches: one in 2015 valued at \$10,000 at the time of purchase, but was valued at between \$15,000 and \$50,000 on December 20, 2016, the date of filing. A second tranche was purchased in August 2016 of 400,613 shares, through a private placement offering, and was listed on the Committee questionnaire as being valued between \$50,000 to \$100,000, which was based upon the purchase price. An analysis done by multiplying the number of shares by the market price on December 20, 2016 demonstrates a value higher than that reported

by the nominee. The nominee noted that the amounts reported to the Committee were a good faith valuation. The nominee agreed to recalculate the value of the shares based on the market value at the time the Committee Questionnaire was completed. The revised value of the second tranche was between \$100,000 and \$250,000 when filed.

The nominee and Committee staff also agreed that the tranche of shares acquired in August 2016 was not accounted for on the OGE Form 278, and the nominee told staff that income attributable to his holding in the company reported on OGE Form 278 was incorrect. The nominee noted that it is unclear how information related to his holding in this stock was misstated on the published form. The nominee agreed to contact OGE to correct the form.

FEBRUARY 7, 2017.

Ms. ELIZABETH J. FISCHMANN,
Associate General Counsel for Ethics, Designated Agency Ethics Official,
Washington, DC.

DEAR MS. FISCHMANN: The purposes of this letter are to amend the financial disclosure report that I signed on December 15, 2016, and to supplement the ethics agreement that I signed on January 11, 2017.

A—FINANCIAL DISCLOSURE REPORT

To correct inadvertent errors in my December 15, 2016, financial disclosure report, the items identified below are amended, as follows:

Part I

#	Organization Name	City/State	Organization Type	Position Held	From	To
2	Chattahoochee Associates	Atlanta, Georgia	General Partnership	Managing and General Partner	11/1993	Present

Part 2

#	Description	EIF	Value	Income Type	Income Amount
1	Chattahoochee Associates	no	\$100,001–\$250,000	None (or less than \$201)	

Part 6

#	Description	EIF	Value	Income Type	Income Amount
14.55	Amazon Com Inc	n/a	None (or less than \$1,001)	Capital Gains	\$2,501–\$5,000
15.1	Innate Immunotherapeutics Ltd. (INNMF)	n/a	\$15,001–\$50,000	None (or less than \$201)	

To correct an inadvertent error in my December 15, 2016, financial disclosure report,

the following item is added to that financial disclosure report:

Part 6

#	Description	EIF	Value	Income Type	Income Amount
28	Innate Immunotherapeutics Ltd. (INNMF)	n/a	\$100,001–\$250,000	None (or less than \$201)	

With regard to the assets disclosed in my December 15, 2016, financial disclosure report other than those listed above, the U.S. Office of Government Ethics has asked me to confirm that I disclosed the current value at the time of reporting. By this letter, I am confirming that I used current value with regard to those assets. This letter makes no changes to the value categories disclosed in that financial disclosure report other than those indicated above.

B—SUPPLEMENT TO JANUARY 11, 2017, ETHICS AGREEMENT

The new item listed above (Innate Immunotherapeutics Ltd./\$100,001–\$250,000) is covered by the commitment I made in my January 11, 2017, ethics agreement to divest all interests in Innate Immunotherapeutics Ltd. within 90 days of confirmation. In addition, the following commitments supplement my ethics agreement dated January 11, 2017.

In February 2017, I resigned from my position as Managing and General Partner of Chattahoochee Associates and transferred my ownership interest to my spouse. I will not participate personally and substantially in any particular matter that to my knowledge has a direct and predictable effect on the financial interests of Chattahoochee Associates, unless I first obtain a written waiver, pursuant to 18 U.S.C. § 208(b)(1).

If I have a managed account or otherwise use the services of an investment professional during my appointment, I will ensure that the account manager or investment professional obtains my prior approval on a case-by-case basis for the purchase of any assets other than cash, cash equivalents, investment funds that qualify for the exemption at 5 C.F.R. § 2640.201(a), obligations of the United States, or municipal bonds.

I understand that as an appointee I will be required to sign the Ethics Pledge (Exec.

Order no. 13770) and that I will be bound by the requirements and restrictions therein in addition to the commitments I made in the ethics agreement I signed on January 11, 2017.

I have been advised that this supplement to my ethics agreement will be posted publicly, consistent with 5 U.S.C. § 552, on the website of the U.S. Office of Government Ethics with ethics agreements of other Presidential nominees who file public financial disclosure reports. I understand that this letter will also be released as an attachment to my public financial disclosure report.

Sincerely,
THOMAS E. PRICE, M.D.

Mr. WYDEN. I also refer my colleagues to the following documents: an announcement by Innate on June 10, 2016, entitled “Private Placements and

Rights Issue to Raise Additional Working Capital,” and the Public Financial Disclosure Report signed by Congressman PRICE on December 15, 2016, that was filed with the Office of Government Ethics.

I want to take a minute to return to the Innate company itself. I noted earlier that the company has put on a full court press to defend Congressman PRICE in recent weeks, as details of his special deal have come to light.

I am going to describe why that might be. Innate’s executives have sought to portray the company as being a small firm from Down Under that has been inadvertently caught in political crossfire on the other side of the world. But the fact is that Innate has longstanding connections to Congressman COLLINS and his inner circle, a circle that includes Congressman PRICE. As the Australian City Newspaper wrote this week, “Mr. COLLINS, his children and his ‘intimate political allies’ and donors controlled at least 27.25 percent” of Innate’s voting shares.

Then there is the baffling assertion mailed by Mr. Wilkinson, the CEO, that he only recently learned of Congressman PRICE’s existence through news articles. This is a stretch to believe and flies in the face of Congressman PRICE’s own testimony.

On January 13, the New York Times reported:

Mr. Wilkinson and Michael Quinn, Innate’s chairman, said they had never heard of many of the company’s more prominent investors, and said they first learned that Mr. Price had invested in the company from an article in the Wall Street Journal, which first reported his investment.

On February 5, Mr. Wilkinson, the CEO of Innate, told the Buffalo News, “I think the first time I heard that a gentleman named TOM PRICE had invested was after the U.S. media started reporting it.”

But Congressman PRICE was quite clear that he had communicated with Wilkinson. In written testimony, responding to questions for the record, he said: I also communicated with Simon Wilkinson of Innate regarding my interest in participating in the 2016 private placement of company stock. According to Innate’s Web site, Mr. Wilkinson is currently the managing director and CEO of the company.

Congressman PRICE’s name was also listed twice in the documents of the company, which reported the private stock sale participants to the Australian stock exchange last summer. Congressman PRICE also appeared to have bought nearly 5 percent of the discounted shares made available in the private stock sale. Given all that, it seems difficult to believe Mr. Wilkinson’s story that he had no idea who Congressman PRICE was.

Finally, The Australian, the Sydney paper I just mentioned, reported on Monday that Innate and Congressman COLLINS are facing questions about possible violations of Australia corpora-

tion law with regard to his holdings in the company. So why does this matter? It matters because a nominee to be a Cabinet Secretary, Congressman PRICE, was brought into this web of questionable stock transactions and obfuscations about just how special the special deal he really got was by a company insider, his friend, Congressman COLLINS.

As I get ready to close, I refer my colleagues to the following articles and documents: “Congressman Collins under fire for ‘suspicious’ stock trades,” published in the Buffalo News on January 17 of this year; “Collins shared biotech stock news with big Buffalo names,” again from the Buffalo News on January 19; “Collins’ controversial stock venture could be boom or bust,” from the Buffalo News on February 5 of this year; the Notice of Innate’s 2016 Annual Meeting and Explanatory Statement filed on July 29 of 2016; documents filed by Innate on September 12, 2016, and September 26, 2016, reporting results of the 2016 private stock placement.

As we close, I want to return to section 3 of the STOCK Act. It says:

Members of Congress . . . may not use non-public information derived from such person’s position . . . or gained from the performance of such person’s official responsibilities as a means for making a private profit.

So did Congressman PRICE have access to nonpublic information about Innate or its private stock sale because of his position as a Member of Congress? I believe the answer is yes.

Did he get special access to the discounted private sale because of his position? I believe the answer is yes.

Does he stand to profit because of the information or access he may have received? I believe the answer is yes.

Finally, did Congressman PRICE tell the Finance Committee and the HELP Committee the truth about how he learned about the private stock sale and the ability of average investors to participate? Congressman PRICE told the Finance Committee and the HELP Committee that the special stock deal he got in on was open to everyone.

According to the Wall Street Journal and company documents, that is not true. The deal he got was clearly different than what was offered to everyday investors. According to the Journal, his previous purchase of Innate stock did not qualify him to participate in the private placement without being a specially invited friends and family guest. This arrangement allowed Congressman PRICE to buy more shares than other investors were allowed to buy.

Congressman PRICE told the Finance Committee that his conversations with Congressman COLLINS, again, a director of the company, its largest shareholder, had no influence on his investment decisions. According to the Journal, this is not true. The Journal report made clear that Congressman COLLINS told him about the upcoming drug trial, alerted him to the private stock

sale, and arranged to ensure he could participate.

Now the majority party has shut down the vetting process, allowing Congressman PRICE’s nomination to reach the floor before all the facts have come into view. I believe the Senate can do better. It needs to do better. The American people are owed better.

I thank my colleagues, particularly Senator REED, for his patience and his courtesy.

I yield the floor.

The PRESIDING OFFICER (Mr. DAINES). The Senator from Rhode Island.

Mr. REED. Mr. President, I rise today in opposition to President Trump’s nomination of Congressman TOM PRICE for the Department of Health and Human Services. The Department he has been picked to lead is charged with protecting the health of all Americans, from safeguarding Medicare and nursing home care for seniors to investing in medical research and supporting public health programs, such as lead poisoning prevention and youth suicide prevention.

Unfortunately, Congressman PRICE has demonstrated over the last decade in Congress that he is unwilling or unfit or both to protect these critical health programs. In his role as chairman of the House Budget Committee, Congressman PRICE has offered plans to repeal the Affordable Care Act and turn Medicare into a privatized voucher program. This is the opposite of protecting the safety net programs for our most vulnerable citizens.

Time and again, Congressman PRICE has proved that he favors corporate interests over patients, which has raised ethics concerns. For these reasons, I will oppose his nomination.

First, I would like to talk about the Affordable Care Act. About a month ago, I was here talking to my colleagues on the floor about the impact of the ACA in my home State of Rhode Island and the consequences of repeal. In short, repeal of the ACA would be catastrophic in Rhode Island and across the country. Yet Congressman PRICE has led the efforts in the House of Representatives to repeal the ACA without any replacement. In fact, he is the architect of legislation to do just that.

The uninsured rate today is at its lowest point in recent history. That holds true in my State of Rhode Island. The uninsured rate there has fallen from nearly 12 percent to under 4.5 percent. That translates to over 100,000 Rhode Islanders who have gained coverage because of the ACA.

While it is not the case in every State, in Rhode Island insurance rates have dropped. In fact, consumers in Rhode Island have saved \$220 million since 2012.

We cannot go back to a system that allows private insurers to deny coverage for preexisting conditions or

charge more to those who need insurance the most. By contrast, Congressman PRICE opposes the preexisting conditions ban, one of the most popular provisions of the ACA.

His plan would allow insurance companies to deny coverage or to charge more to those with preexisting conditions, older Americans, and women. He has also proposed getting rid of the essential benefits package in the ACA. These protections require insurance companies to cover things like prescriptions drugs, maternity care, pediatric services, and mental health care. These are really things that any basic health coverage should include, yet Congressman PRICE has advocated taking away these consumer protections.

Stop and think about that. Congressman PRICE does not think that health insurance should cover pregnancy, for example. I mean, we are not really talking about extravagant services. These are the services that a reasonable person would expect their health insurance to cover. In fact, Congressman PRICE's plan, the Republican plan to repeal the ACA, would mean that nearly half a million Rhode Islanders with preexisting conditions—that is nearly half the population of my State—could be denied coverage or charged more. Those who might still be able to get coverage would quickly find that it does not cover that much.

These consumer protections that are embedded in the ACA affect everyone, not just those who have coverage because of the ACA. Before the ACA, the Affordable Care Act, insurance plans, including coverage through your employer, could impose annual or lifetime limits on coverage, meaning coverage could end just when you need it most. With Congressman PRICE in charge, if he has his way, we will see a return of these limits, even for employer-sponsored health plans.

The nominee's stance on the Affordable Care Act is not my only worry because when it comes to Medicare and Medicaid, benefits that Americans have worked hard to earn and to fund, Congressman PRICE's views are far outside the mainstream.

Medicare is one of the great success stories in expanding access to care and keeping seniors out of poverty. Since the passage of Medicare in 1965, we have seen significant decreases in the numbers of seniors living in poverty, and this is largely because of Medicare and, of course, Social Security, another critical safety net program for seniors. I believe that Medicare is essential for the quality of life of Rhode Island's seniors and for seniors across the country.

In fact, I supported the ACA because it made key improvements to Medicare that strengthened its long-time solvency and increased benefits, such as closing the prescription doughnut hole and eliminating cost sharing for preventive services, such as cancer screenings.

Over 15,000 Rhode Islanders saved \$14 million on prescriptions drugs in 2015,

an average of \$912 per beneficiary. In the same year, over 92,000 Rhode Islanders took advantage of free preventive services, representing over 76 percent of beneficiaries. We see these benefits because of the Affordable Care Act.

Repealing the Affordable Care Act, as advocated by the Congressman, means repealing these benefits for seniors and shortening the life of the Medicare trust fund by over a decade. What is worse is that Congressman PRICE not only wants to repeal the ACA and the Medicare benefits that come with it, but he has also advocated for privatizing Medicare, turning it into a voucher-based program, as well as raising the eligibility age.

Simply put, this would end Medicare as we know it. Millions of Americans, including over 200,000 Rhode Islanders, have paid into the system, counting on the benefits that they have earned and worked their entire life for. Under Congressman PRICE's plan, Republicans would shift more costs to seniors who have played by the rules and planned for retirement with quality Medicare coverage.

Congressman PRICE and Congressional Republicans will tell you that they are trying to cut costs under the banner of trying to save Medicare. If that is the Republican standard, then why do they oppose the ACA which actually improved Medicare services, cut costs, and extended Medicare solvency? That seems to be a pattern with many on the other side: Act very serious and concerned about Medicare's finances, but then make every effort to demonize and roll back these improvements.

In fact, Medicare spent \$453 billion less from 2009 to 2014 than it expected under growth trends prior to the ACA, all while increasing benefits like free preventive care and better prescription drug coverage and adding over a decade of solvency to the Medicare trust fund. The projected cost—the best projections were actually lowered by the ACA while benefits were increased. This talk of supposedly saving Medicare is really, in my view, a ruse to make draconian cuts to free up more Federal funding for things like tax breaks for the wealthy. We cannot allow Republicans under Congressman PRICE's leadership to go back on the Medicare guarantee we have made to seniors that we represent all across this country.

Congressman PRICE has also made a number of troubling statements about Medicaid and the Children's Health Insurance Program, CHIP. First, repeal of the ACA would have a disastrous effect on State Medicaid programs, kicking 11 million Americans off their health insurance, including 70,000 Rhode Islanders.

However, this is not enough for Congressman PRICE. He has offered legislation to cut Medicaid even further, to the tune of \$1 trillion, by turning Medicaid into a Block Grant Program.

I think my colleagues should really consider how this would impact their

States. Including those newly insured by the ACA, Medicaid covers 74 million Americans. Who makes up this population? Well, half of the Medicaid enrollees are children.

Medicaid also pays for half the births in this country.

These are staggering numbers. In Rhode Island, one in four children is covered by Medicaid or CHIP, and one in two people with disabilities is covered by Medicaid.

While Medicaid was initially designed to help low-income families, seniors now account for approximately half of Medicaid's spending nationwide. Nearly 60 percent of nursing home residents are covered by Medicaid across the country, and that holds true in my State of Rhode Island.

Many of these people are our neighbors, our friends. They have been working all their lives, and they have qualified for this coverage because they have been able to move some of their assets out of their ownership because our rules don't recognize retirement accounts. So these are our neighbors.

When Congressman PRICE talks about turning Medicaid into a block grant program, every Member of this Chamber has to stop to realize that there is no way to cut Medicaid by trillions of dollars without harming children and seniors and placing each of our States in a very difficult position because they, too, contribute to Medicaid; because they have a responsibility to children and seniors for health care; because they do also help support nursing home, nursing facilities for seniors and the disabled. And they would be in a disastrous situation.

Now, all of these are, I believe, reason enough to oppose Congressman PRICE's nomination. However—and I alluded to this earlier, and Senator WYDEN went into great detail—Congressman PRICE has a history of conflicts of interest, such as investments in the very issues and companies he worked on, as a Member of Congress.

Congressman PRICE traded hundreds of thousands of dollars in health care pharmaceutical stocks, all the while advocating for regulation legislation that would financially benefit these very companies. Again, Senator WYDEN has made a very detailed and very persuasive case in this regard.

In fact, as Senator WYDEN has pointed out, after receiving information from a fellow Congressman and now a member of President Trump's transition team, Congressman PRICE was one of a small group who was offered the chance to purchase stock in a biomedical group at a discounted price.

Now, Democrats are not going to have the opportunity to fully examine these issues. I find the examples we do have to be deeply concerning. The very articulate, eloquent, and detailed—exhaustively detailed—statement by Senator WYDEN adds further credence to this presumption.

This is a very disconcerting pattern of behavior. Indeed, I believe this pattern of behavior warrants further investigation, but those requests have been denied by the Republican majority. These allegations are now even more concerning because of the need for further investigation, but those requests have been denied by the Republican majority. These allegations are even now more concerning because Congressman PRICE is considered for the top role in this administration in charge of protecting the health of all Americans and, indeed, affecting the corporate situation of thousands of companies throughout this land that he may or may not have a financial interest in.

Now I have heard from hundreds of Rhode Islanders who have expressed these concerns to me, from his support for the efforts to repeal the ACA and cut Medicaid and Medicare to his questionable investments. I agree with them.

As such, I am unable to support Congressman PRICE's nomination for Secretary of the Department of Health and Human Services, and I would urge others to look very carefully at the record, carefully at the advocacy for the elimination, basically, of Medicare as we know it, of block-granting Medicaid, which would harm children and seniors and put excruciating financial pressure on every State in this country, and his own behavior with respect to personal investments.

With that, I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The bill clerk proceeded to call the roll.

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

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

Ms. HASSAN. Mr. President, I rise today to join my colleagues in opposing Congressman TOM PRICE's nomination to be the Secretary of the Department of Health and Human Services.

Every American deserves the opportunity to have quality, affordable health insurance coverage to help them live healthy and productive lives. Having health care is not just critical to the freedom, dignity, and well-being of our citizens but also to the strength of our economy.

As Governor, I worked with Democrats and Republicans in New Hampshire to expand health insurance coverage—including coverage for substance use disorder and behavioral health services—to tens of thousands of Granite Staters.

We need to bring this same bipartisan approach to the Senate. We know that there are serious challenges in our health care system that must be fixed, and we need to work across party lines to support commonsense improvements to move our Nation's health care system forward, not rip health insurance

coverage away from millions of Americans.

This is why I cannot support Congressman PRICE's nomination. Throughout his time in office, Congressman PRICE has promoted policies that would undermine the health care that so many in my State and across our Nation depend on. Congressman PRICE wants to repeal the Affordable Care Act, which would strip coverage away from millions of Americans. Those who seek to repeal the ACA, including Congressman PRICE, have not come up with a plan to replace it.

Repealing the ACA without a replacement would send insurance markets reeling. It would be devastating for millions of people who have coverage because of the law.

Repealing the ACA would eliminate New Hampshire's bipartisan Medicaid expansion plan, harming our State's efforts to combat the heroin, fentanyl, and opioid crisis. This crisis is the most pressing public health and public safety challenge facing our State, and thousands of Granite Staters have accessed substance misuse treatment because of Medicaid expansion.

Just a couple of weeks ago, I met a young man named Noah at Harbor Homes in Nashua. Noah is an active participant in the Nashua drug court and a former enrollee in our Medicaid expansion program.

Last month, after 14 years of struggling with addiction, Noah was celebrating 1 year sober. Because of legislation that expanded Medicaid, passed under bipartisan leadership, Noah received health insurance through Medicaid expansion, and he was able to quickly begin treatment.

Noah's recovery process required medication-assisted treatment which he would not have been able to afford had it not been covered under Medicaid. He is now 5 months off that treatment and hasn't had an instance of relapse.

Noah said the ACA and Medicaid expansion are "working miracles every single day in this recovery community." For Noah and so many others, we cannot afford to set back our efforts, but that is what the repeal of the ACA would do.

I also oppose Congressman PRICE because he is determined to turn back the clock on women's access to reproductive health care. He has fought against the woman's constitutionally protected right to make her own health care decisions and control her own destiny. He has voted 10 times to defund Planned Parenthood, and he has voted against a resolution to protect employees from being punished or fired by their employers for their reproductive health decisions.

And I oppose Congressman PRICE because he has pushed to turn Medicare into a voucher program, which will increase costs for seniors. Congressman PRICE's views and priorities are simply at odds and out of touch with the views and priorities of many, many Granite Staters.

Additionally, Mr. President, serious issues have been raised throughout this nomination process regarding Congressman PRICE's conflicts of interest and his potential violation of the STOCK Act, including recent reports suggesting that he received a private discount to purchase a health company stock while engaged in legislative efforts that would directly affect the company's financial interests. Congressman PRICE's insufficient responses concerning his stock purchases raise the question of whether, if confirmed, he will put corporate interests ahead of the American people. That is unacceptable. I believe we need a health care system that works for every American, and that is why I will vote against Congressman PRICE's confirmation.

I want to talk a little bit more about what Congressman PRICE's confirmation would do with respect to Medicaid expansion and particularly how it would affect the opioid crisis in New Hampshire. In New Hampshire, we proved that Democrats and Republicans can come together to move our health care system forward when we passed our Bipartisan Medicaid Expansion Program. Passing and reauthorizing this program included healthy debate, and at times some argument, but what matters of course is what we do after our argument, after those debates. We were able in New Hampshire to put our differences aside and take a critical step forward to continue strengthening our families, our businesses, and our economy. This is the approach we need to be taking in the United States Senate.

The benefits of Medicaid expansion are clear, over 50,000 Granite Staters are now covered in a population of 1.3 million people. We included in Medicaid expansion coverage of substance use disorder and behavioral health services. I have heard story after story of Granite Staters who are in recovery, thanks to Medicaid expansion. I told Noah's story just a few minutes ago.

At another round table I met a young woman named Ashley at the Farnum Center in Manchester, CT. Ashley told of suffering from addiction for over 10 years. One day she woke up to discover that her husband had died of an overdose. She lost custody of her young daughter, but because of Medicaid expansion, Ashley was able to get treatment. She has been in recovery now for a little bit over a year—recovery through medical treatment made possible by Medicaid expansion. Because she is in recovery, she was able to get a job. Because she began working again, she actually has now moved off Medicaid expansion onto private health insurance. So Medicaid expansion was there when she needed it to get healthy. Now she doesn't need it anymore, and she is participating in the private health insurance market. By the way, she is beginning to reestablish her relationship with her young son. That is the power of the Affordable Care Act. That is the power of Medicaid expansion.

Representative PRICE, on the other hand, has advocated for repeal of these very programs. Such a repeal would have such harmful impacts, pulling the rug out from those who have coverage right now for critical medical conditions. At his confirmation hearing, Representative PRICE declined to guarantee that Americans with substance use disorders who got on insurance through Medicaid expansion would still be covered for these services if the Affordable Care Act is repealed under Representative PRICE's leadership.

He also would not commit to continuing the requirement under the Affordable Care Act that health insurance companies must cover essential health benefits, including treatment for substance abuse.

Representative PRICE's support for the repeal of the Affordable Care Act also requires more discussion. The Affordable Care Act has helped families across our Nation access quality, affordable health insurance coverage. We need to come together now and find bipartisan areas in which we can agree to improve the law, but we should not be repealing it. We should not be taking coverage away from millions of people. I have joined a number of my colleagues in expressing our willingness to work across the aisle with our colleagues to improve the law, but unfortunately it seems our colleagues in the Senate are headed down a path to repeal the law without a plan to replace it. Repealing the ACA without any replacement is a recipe for upheaval and instability, a recipe for hurting our families, small businesses, and our economic progress. Representative PRICE and those who seek to repeal this law have not agreed on any path forward other than repealing and stripping coverage away from millions of Americans. Repealing would have major consequences for many Granite State families and small businesses.

My office has heard from constituents about the impact the Affordable Care Act has had on their lives. One resident from Keene, NH, wrote to say this law has helped fulfill his goal of starting a small business. He wrote:

I have had health insurance through the exchange under the ACA since late 2015, when I quit my job to start up a business. Before the ACA, I wouldn't have taken the risk to start a business, because I have a pre-existing condition and I wouldn't have been able to get an individual health insurance policy.

He continued:

Under the ACA, I am able to get good health insurance at an affordable premium. Since I left my job I built up a profitable business and expect to be in a position to hire employees within a year or two. None of this would have been possible without the ACA.

And he added:

If the ACA is repealed, I am concerned that I will need to put my business on hold in order to go back to a corporate job that I don't need, only to get the health care benefits. The ACA has flaws, but overall it has allowed me to take an entrepreneurial risk and start a small successful business.

It is clear that this law has truly made a difference not just for the health of our citizens but also for our economy, and we cannot undermine the progress we have made.

I am also deeply concerned about Representative PRICE's record and his statements concerning women's health care. Representative PRICE has consistently opposed women's reproductive freedom. I have always fought to protect a woman's right to make her own health care decisions and to chart her own course, and I always will. This is not just a matter of individual freedom, which of course is a good enough reason in its own right to support women's reproductive choice, but it is also a matter of economics. When women have to pay more for their health care than men do, it puts them at a financial disadvantage.

As Governor, I restored family planning funds and pushed to restore State funding to Planned Parenthood because I know how critical these services are for the women and families of my State. It is unacceptable that Washington Republicans continue to play games with women's health, and Representative PRICE has been at the forefront of that effort. Representative PRICE does not support a woman's constitutionally protected right to a safe and legal abortion. He has cosponsored and repeatedly voted for measures that would ban all medically appropriate abortions, without exceptions for rape, incest, or to protect a woman's health. He has voted to penalize small businesses that choose private health plans that include abortion coverage. Additionally, he has voted to allow employers to discriminate against employees based on their reproductive health decisions. He voted to eliminate the Title X Family Planning Program. He voted 10 times to defund Planned Parenthood.

Defunding Planned Parenthood, a critical health provider, would have devastating effects. A recent article in the Washington Post highlighted the impact of what can happen when legislatures attempt to defund Planned Parenthood.

This report in the post found:

In 2011, the Texas legislature cut the two-year budget for funding family planning from \$111 million to \$38 million in an effort to defund Planned Parenthood. After these cuts, 82 Texas family planning clinics, one out of every four in the state—closed or stopped providing family planning services. An unintended consequence of the law was that two-thirds of the clinics that closed were not even Planned Parenthood clinics. Organizations that remained open, many with reduced hours, were often unable to offer the most effective methods of contraception, such as IUDs and contraceptive implants, to women who wanted them. The closings and reduced hours also limited or cut back access to primary care providers for a significant number of women.

Women and their families deserve better than an HHS Secretary who would disregard their constitutional right and roll back their access to reproductive health care. They deserve

better than an HHS Secretary who appears to believe that women are neither capable nor trusted to make their own health care decisions. I believe women should be full and free citizens in the United States of America and can be trusted to make their own health care decisions.

Representative PRICE's nomination and his confirmation would be harmful to our seniors as well. Seniors deserve a high quality of life, high-quality care, and access to the benefits that they have earned throughout their life. I believe we must continue to strengthen and protect Medicare for years to come, not undermine it. Unfortunately, Representative PRICE has long sought to undermine Medicare and the important benefits it provides to seniors. His budget proposals have included extreme cuts to the program. He supports turning Medicare into a voucher program. In fact, he even said he wants to voucherize Medicare within the first 6 to 8 months of the Trump administration. This would increase costs for seniors.

He has also repeatedly opposed allowing Medicare to negotiate drug prices for seniors. He has argued that seniors have no drug cost problem. Imagine that, a Health and Human Services Secretary who believes that drug costs are not an issue for our seniors. He even said allowing Medicare to negotiate prices for prescription drugs would be "a solution in search of a problem."

I can tell Representative PRICE that there are certainly seniors in New Hampshire who have found that the cost of their prescription drugs are truly a problem, and as we talk about the need to shore up and strengthen the Medicare Program, one of the best ways to stabilize its finances would be to allow Medicare to negotiate for prescription drug prices to lower those prices, lower the cost of the program, while making the program even more affordable for our seniors.

That is not something that Representative PRICE has even expressed a willingness to consider because he doesn't even acknowledge there is a problem. Representative PRICE has also supported raising the Medicare age from 65 to 67. This amounts to a devastating benefit cut for seniors, shifting costs onto them, which is unacceptable.

Whenever I hear people suggesting raising the retirement age for Social Security or the age for Medicare eligibility, I am reminded of my father-in-law. My father-in-law was one of the hardest working people I ever knew. He worked as a wholesale meat cutter, and for anybody who has never seen what that means, it means standing on your feet for hours at a time in a cold meat locker as large carcasses come through, and with time pressures, the way any production facility has, cutting those carcasses into salable product.

My father-in-law left the house before dark. He often came home, having

been assigned overtime, after dark, having been standing on his feet in the cold, doing incredibly hard, physical labor.

When it came time for him to retire, when he became eligible for Medicare, he really couldn't have worked at that job much longer. And the fact that he had a dignified retirement after those years of hard work was in large part due to Medicare. Before the physical impacts of that job slowed him down, it was our great pleasure to watch a man who had provided for his family with such hard work know the dignity of playing with his grandchildren, sleeping in until 7:30 or 8 in the morning, and watching his family grow and strengthen and thrive.

That is the dignity of Medicare. It is the dignity of Social Security. And to have a Health and Human Services Secretary who believes we should just be raising that age, as Representative PRICE does, contradicts the very notion of what it means to earn a benefit and to know a dignified retirement.

I am proud of the progress we have made to help ensure that more Granite Staters and Americans have the quality health care they need at an affordable cost. There is much more work to do to move our health care system forward and to combat the heroin opioid and fentanyl crisis that has devastated far too many families in New Hampshire and across our Nation. I am ready and willing to work with anyone who is serious about making improvements to our health care system to improve affordability and access to care, but that does not start with pulling the rug out for millions of Americans. It does not start with rolling back women's access to critical health care services.

Congressman PRICE's record demonstrates that he puts a partisan agenda and corporate interests before the health and economic well-being of our families. The American people deserve a Secretary of Health and Human Services who will help more Americans receive quality, affordable health insurance coverage, not one who supports stripping it away by repealing the Affordable Care Act without a replacement.

For these reasons, I will be voting no on Congressman PRICE's nomination, and I urge my colleagues to do the same.

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

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

The bill clerk proceeded to call the roll.

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

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

Mr. WYDEN. Mr. President, the debate on Congressman PRICE's nomination, in my view, is a referendum on the future of health care in America.

On this side of the aisle, we think it is worth spending 30 hours talking

about a subject this important to our people. My view is that this is about whether the United States is going to go back to the dark days when health care worked only for the healthy and the wealthy.

Based on the public record, Medicare is a program Congressman PRICE does not believe in, and it offers a guarantee of services he doesn't believe seniors should have.

On the Affordable Care Act, he is the architect of repeal and run. He wrote the bill himself. He proposed weakening protections for Americans with preexisting conditions. He would shred the health care safety net—Medicaid—for the least fortunate among us. He would take away health care choices for women, particularly the opportunity to go to the physician that they trust.

As we wrap up and get ready to vote, think about the common thread among these proposals: They take away coverage from our people, make health care coverage more expensive for millions of people, or both. That is what Congressman PRICE stands for when it comes to health care. Every Senator who casts a vote for Congressman PRICE has to stand by that agenda.

Beyond what this means for the future of American health care policy, there is the lingering spectre, as I have discussed tonight in detail, of serious legal and ethical issues. Congressman PRICE got special access to a special deal on stock in an Australian biomedical company. He claimed multiple times before Senate committees that the deal he got on discounted company stock was open to all shareholders. All the evidence—all the evidence—says that this is untrue.

First, he had to go through the back door to get access to the discounted price. He got a special friends-and-family invite from his colleague in the House, Congressman CHRIS COLLINS, the company's top shareholder and a member of its board.

Second, rules that apply to other investors didn't apply to Congressman PRICE. Other shareholders were bound by a limit. They were able to buy one discounted share for every nine they already owned. That would have allowed Congressman PRICE to buy just 7,000 discounted shares. He bought 400,000 discounted shares. In my view, he can't get around that. That is the definition of a special stock deal.

The Congressman introduced legislation that would have lowered the tax bills of three major pharmaceutical companies in which he owns stock. He invested \$15,000 in a medical equipment company and then introduced legislation to increase the amount Medicare pays for that type of equipment. Parts of his bill went on to become law. He bought thousands of dollars' worth of stock in a company called Zimmer Biomet less than a week before introducing legislation that had the potential to drive up the value of those shares. Now he has argued that he

didn't purchase the stocks; his broker did. But at the very least, he would have known about those deals within days of the purchase when he filed the periodic transaction reports in the House. Under his brokerage agreement, he could have quickly resold the stock, but he did not. Furthermore, he didn't consult with the Ethics Committee regarding any of the trades I have spoken about as directed by the House Ethics Manual.

As I wrap up, I want to put a human face on why so many Senators on this side of the aisle have come to the Senate floor to speak so passionately about their grave concerns with this nomination. Nothing sums up our concerns more clearly than a line from an op-ed Congressman PRICE wrote in 2009 that discusses Medicare. His quote speaks volumes about his perspective on this program.

It is a lifeline. I first became acquainted with it back in the days when I was codirector of the Oregon Gray Panthers, ran the legal aid program for older people. I saw then that seniors were walking on an economic tightrope, balancing their food bill against their fuel bill, their fuel bill against the rent bill. They saw Medicare as one of the great achievements in American policymaking.

Here is what the Congressman wrote—his words, not mine: "Nothing has had a greater negative effect on the delivery of health care than the federal government's intrusion into medicine through Medicare." When I read that, I was reflecting on my Gray Panther days, and I think a lot of other Senators go back working with community organizations. We just heard a wonderful presentation from Senator KING, who was also a legal services advocate.

Before Medicare, before this program that Congressman PRICE thinks is such a negative intrusion into medicine, a lot of older people were warehoused in poor farms. I am absolutely certain that Congressman PRICE doesn't want to go back to those days, but when he speaks about the involvement of Medicare in American health care as though a plague has descended on the land, we just have to question his commitment to a program that has become a lifeline to millions of older people.

The fact is, Medicare has always been a promise. That is what we said back in the early days with the senior citizens. Medicare was a promise. It was a promise of guaranteed benefits. Again, based on the public record, Medicare is a program Congressman PRICE doesn't believe in, and it offers a guarantee of services he doesn't think seniors ought to have.

He has said he wants to voucherize the program within the first 6 to 8 months of the administration. What we are talking about when you want to do that is you are breaking the promise of Medicare. You are breaking the promise of guaranteed benefits, and you are going to sort of hand people a piece of paper and say here is your voucher, I

hope it works for you. If your medical expenses are greater than your vouchers, that is the way it goes, tough luck.

The price budget cut Medicare by nearly \$1 million. By the way, that is exactly the opposite of the Trump pledge, not to cut Medicare that the American people heard on the campaign trail. There is a big gap between what President Trump said about Medicare and the bills and legislative efforts of Congressman PRICE in the other body—big gap. That is why it sure looks to me like the promise of Medicare is one that Congressman PRICE would break.

By the way, we all ought to understand that if confirmed, Congressman PRICE would be the captain of the Trump health care team. What he says matters, and what he offered—legislatively, his positions and his votes. He voted again and again to repeal the Affordable Care Act.

It really matters what his past record is. If past is prologue, it is certainly relevant. It really matters. He was the architect of what amounted to repeal and run. He wrote legislation creating loopholes in the protection for those with preexisting conditions, and the big beneficiary there was clearly the major insurance companies.

Women would find it much harder to make the health care choices they want and see the doctors they trust if the price proposals were lost. Medicaid pays 65 percent of the nursing home bill in America. And on this side of the aisle, we are going to fight Congressman PRICE's block grant proposals that are going to put seniors at risk.

I am going to close with this. I always hope I am wrong when I raise the prospects of real threats to the welfare of the American people because the reason public service was important to me was because of those first days with the Gray Panthers. I never thought I would have that kind of wonderful opportunity; that I would have had this opportunity for public service. For me and so many on this side of the aisle—I see my colleagues who have been active in their communities—this has always been about the welfare of the American people. That is what it is about—all those faces we see when we are home, having community meetings and getting out with our people.

The public record in this case indicates that as Secretary of Health and Human Services, Congressman PRICE would, in fact, be an extraordinary threat to seniors on Medicare, vulnerable older people who need Medicaid for access to nursing homes, millions of kids for whom Medicaid is the key to a healthy future, and women across the country who have a right to see the doctors they trust.

I am going to oppose this nomination. I urge my colleagues to join me in opposition.

Mr. President, I wish to take a few minutes to address Congressman PRICE's stock purchases. At best, this is behavior that cuts ethical corners.

At worst it is dangerously close to outright insider trading. Congressman PRICE has a lot of questionable trading activity. He introduced legislation that would lower the tax bills of three major pharmaceutical companies he owned significant amounts of stock in. He invested \$15,000 dollars in a medical equipment company then introduced legislation to increase the amount Medicare pays for that type of equipment. Parts of his bill went on to become law.

But let's look at one investment in particular, Congressman PRICE's investment in Zimmer Biomet. Zimmer is a medical device company that specializes in joint replacements, including knee, hip, shoulder, and foot and ankle replacements.

Hip and knee replacements are high cost procedures, and they are two of the most common procedures performed on Medicare patients. According to CMS, more than 400,000 hip and knee replacement procedures were performed in 2014, costing more than \$7 billion for the hospitalizations alone. Despite the high frequency of these surgeries, costs vary widely across geographic areas, and complications like infections or implant failures after surgery can be three times higher at some facilities.

In November 2015, in an attempt to incentivize higher quality procedures for Medicare recipients and control the cost of these replacements, CMS finalized a new pricing model slated to be implemented in April 2016. This new pricing model was a cost-bundling payment model; instead of Medicare paying for each individual service, Medicare reimburses hospitals with a single lump-sum payment, allowing hospitals to coordinate overall care for the patient.

These changes were designed to incentivize improved care for patients, lowering costs and improving quality. However, according to independent analysts, medical device companies, especially those who specialize in orthopedic implants, could face "material headwinds" from the new pricing model since hospitals facing reimbursement pressures are likely to pass some of that burden onto those device companies.

In September 2015, Congressman PRICE led an effort to send a letter from members of the House of Representatives to CMS challenging many of the features of the CMS proposal. A copy of the letter, dated September 21, 2015, is available on the Congressman's website.

This is where Zimmer Biomet comes in. Zimmer is a medical device manufacturer with significant exposure to the new pricing model. According to analysts, over 60 percent of Zimmer's revenues come from hip and knee devices, and the CMS guidelines had the potential to significantly affect the company's profits.

On March 17, 2016, a few weeks before the CMS model was set to go into ef-

fect, Congressman PRICE bought thousands of dollars worth of Zimmer Biomet stock through his brokerage account. On March 23, 2016, less than a week later, Congressman PRICE introduced H.R. 4848, the "HIP Act," which would have delayed the implementation of CMS regulations for Medicare coverage of joint replacements.

Let's pause right here. In 2016, Congressman PRICE had a financial stake in one of the companies that stood to benefit most from the legislation he was promoting. Those basic facts are not in dispute. Congressman PRICE introduced legislation that had the potential to add to his personal fortune.

Now, various arguments have been made, by Congressman PRICE and others, to defend this activity. First is the argument that there wasn't much money at stake, just a few thousand dollars. But the truth is a few thousand dollars is a lot of money to a lot of Americans. An unexpected medical bill that size could have a serious effect on many Americans and the person in charge of our health care system should take that amount of money just as seriously.

Second, there is the argument that he didn't purchase the stock; his stockbroker purchased it. I am going to return to that issue in more detail in a moment, but one thing is clear. That is the fact that Congressman PRICE knew this stock had been purchased in his name, in his account, within a matter of days.

On April 15, 2016, Congressman PRICE filed what is called a Periodic Transaction Report which Members of Congress are required to do within 30 days of reportable stock purchase. Not only did Congressman PRICE file a report that he had purchased Zimmer Biomet along with dozens of other stocks, he initialed the entry for Zimmer Biomet in order to correct a mistake on the document; a correction making it clear that the Zimmer Biomet transaction was a stock purchase.

There is also the question of whether this activity violated House Ethics rules. Congressman PRICE also said, in answer to written questions, that "no conflict existed and no consultation was necessary." He also said, "Throughout my time as a Member of the [House], I have abided by and adhered to all ethics and conflict of interest rules applicable to me."

He gave the same answer regarding three other bills that appear to conflict with investments he held: H.R. 4185, the Protecting Access through Competitive-pricing Transition Act of 2015, the PACT Act; H.R. 5400, a bill pertaining to tax rates in Puerto Rico, which would have likely impacted drug manufacturers he owned Eli Lilly, Bristol Myers Squibb, and Amgen; H.R. 5210, the Patient Access to Durable Medical Equipment (PADME) Act of 2016.

Let's go through that in some detail. It is true that the House Ethics rules, like the Senate Ethics rules, allow a

member to cast a vote on a matter relating to a company in which he or she owns stock. However, that standard only applies to casting votes. If you do more, and become an active advocate of a bill that could benefit a company that you own stock in, a different standard applies.

On page 237 of the House Ethics Manual, it says that before undertaking active advocacy of legislation that will benefit a company in which a member owns stock, such as before introducing a bill, “the Member should first contact the [Ethics] Committee for guidance.”

The Ethics Manual is crystal clear. If you go beyond voting, and you are actively pushing a bill that would benefit a company in which you own stock, you should consult with the Ethics Committee.

Congressman PRICE did not consult with the Ethics Committee regarding any of these trades.

In a written question, I asked Congressman PRICE about this. I asked whether, in light of the House Ethics Manual’s recommendation, he had consulted with the Ethics Committee regarding his purchase of Zimmer Biomet and other stocks. He did not answer the question. Instead, he resorted to the same talking point—that the Zimmer Biomet stock was purchased by his broker and that there was no need to consult because there was no conflict.

By my reading, this interpretation is flat wrong. Under the House Manual, he should have consulted with the Ethics Committee.

To be clear, the Ethics Committee might have concluded that it was a relatively small purchase, and that Congressman PRICE’s advocacy was consistent with his longstanding position, and therefore that it was fine for him to go ahead and purchase the stock and then introduce the bill. On the other hand, the Ethics Committee might have reached a very different conclusion. It might have advised him to refrain from purchasing the stock.

The public will never know, because he didn’t ask. Despite the clear guidance in the House Ethics Manual, he didn’t even ask. And now the majority party is carrying his nomination toward the finish line.

Apart from conforming with House Ethics rules, there is also the question of whether Congressman PRICE’s activity violated insider trading laws. Lawmakers in both the House and the Senate have a duty of public trust. The STOCK Act, which Congressman PRICE and I both voted for in 2012, and longstanding SEC rules denote that Members of Congress have a fiduciary duty to the American people. What that means is that we will use the public power we’ve been granted to benefit the interests of all Americans. The SEC’s Rule 10b5, in particular, prohibits the purchase or sale of stock on the basis of material nonpublic information.

As a threshold matter, Congressman PRICE claims that insider trading laws don’t apply to him because the Zimmer Biomet stock was purchased by his broker without his knowledge. But as I’ve discussed at length, this argument is a red herring because Congressman PRICE did have knowledge of these trades. He submitted signed records of the trades shortly after they were made. Furthermore, the laws related to insider trading give clear guidance on how to trade through a broker without violating insider trading laws. And just as with the House Ethics rules, when faced with clear guidance on how to manage conflicts of interest, Congressman PRICE chose not to follow it.

Whether those stocks were purchased directly or through a broker is not, by itself, a defense to insider trading. According to SEC rules, Congressman PRICE and his broker needed to agree to a “written plan for trading securities” that does not “permit the person to exercise subsequent influence over when, how, or whether to effect purchases or sales of securities.” So, if Congressman PRICE had, in writing, given his broker complete control over his portfolio we wouldn’t be discussing this issue today. But he did not do so.

Congressman PRICE returned to the “my broker did it” defense for weeks before finally providing the Finance Committee with an excerpt of his brokerage agreement.

Here’s what it says:

In the Portfolio Management (“PM”) program, a Financial Advisor(s) who meets the program certification requirements manages your assets on a discretionary basis. In other words, your Financial Advisor, and not you, has the discretion to decide what securities to buy and sell in your account. This discretion is subject to the parameters described below and your ability to direct a sale of any security for tax or other reasons.

In the course of our investigation, committee staff spoke with experts, and they confirmed what seems obvious from the plain language of the text. This agreement does not hand over complete control of Congressman PRICE’s portfolio to his broker. His agreement with his broker simply does not shield him from insider trading laws, no matter how many times he tries to say it does.

This isn’t a question of whether Congressman PRICE followed the technical letter of the law, he didn’t follow it in spirit either. Congressman PRICE could direct his broker to make trades when he wanted to, and he did. Case in point, when Congressman PRICE wanted to act on a stock tip from Congressman COLLINS, he called up his broker and had her buy shares of an Australian biomedical firm called Innate Immunotherapeutics.

Another question raised by Congressman PRICE’s conflicts of interest is whether they go beyond a violation of the public’s trust and constitute an outright violation of insider trading laws. That question cannot be answered today. We have seen that time and time again that Congressman

PRICE purchased stocks then turned around and promoted legislation that would help those companies, and his investments in them. What is not clear is whether the introduction of this legislation meets the legal standards of being “material” and “nonpublic.” Neither case history, nor the legislative history of the STOCK Act provide clear guidance on when pending legislation is material and nonpublic.

The bottom line is that Congressman PRICE’s activities are in uncharted waters. That is why the public and members of this body ought to be outraged that the majority party has cut off the vetting process and rushed this nomination toward completion.

In my view, because of how this nomination was handled, the Senate Finance Committee has set a double standard. If you look to the recent past at the nominations of Senator Tom Daschle, Secretary Tim Geithner and Ambassador Ron Kirk at the outset of the Obama administration, the vetting process was extremely thorough and bipartisan. The committee turned over every stone, peered around every corner and followed every lead to its conclusion. Now, when a glaring issue comes up that undeniably deserves investigation, the party in power has shut down the vetting process. The Finance Committee and the Senate ought to do better.

I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

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

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

The PRESIDING OFFICER. The question is, Will the Senate advise and consent to the Price nomination?

Mr. COTTON. Mr. President, I ask for the yeas and nays.

The PRESIDING OFFICER. Is there a sufficient second?

There appears to be a sufficient second.

The clerk will call the roll.

The senior assistant legislative clerk called the roll.

Mr. DURBIN. I announce that the Senator from Missouri (Mrs. McCASKILL) is necessarily absent.

The PRESIDING OFFICER (Mr. CASSIDY). Are there any other Senators in the Chamber desiring to vote?

The result was announced—yeas 52, nays 47, as follows:

[Rollcall Vote No. 61 Ex.]

YEAS—52

Alexander	Cornyn	Graham
Barrasso	Cotton	Grassley
Blunt	Crapo	Hatch
Boozman	Cruz	Heller
Burr	Daines	Hooven
Capito	Enzi	Inhofe
Cassidy	Ernst	Isakson
Cochran	Fischer	Johnson
Collins	Flake	Kennedy
Corker	Gardner	Lankford

Lee	Risch	Sullivan
McCain	Roberts	Thune
McConnell	Rounds	Tillis
Moran	Rubio	Toomey
Murkowski	Sasse	Wicker
Paul	Scott	Young
Perdue	Shelby	
Portman	Strange	

NAYS—47

Baldwin	Gillibrand	Nelson
Bennet	Harris	Peters
Blumenthal	Hassan	Reed
Booker	Heinrich	Sanders
Brown	Heitkamp	Schatz
Cantwell	Hirono	Schumer
Cardin	Kaine	Shaheen
Carper	King	Stabenow
Casey	Klobuchar	Tester
Coons	Leahy	Udall
Cortez Masto	Manchin	Van Hollen
Donnelly	Markey	Warner
Duckworth	Menendez	Warren
Durbin	Merkley	Whitehouse
Feinstein	Murphy	Wyden
Franken	Murray	

NOT VOTING—1

McCaskill

The nomination was confirmed.

Mr. MCCONNELL. Mr. President, I move to reconsider the vote on the nomination.

The PRESIDING OFFICER. The question is on the motion to reconsider.

Mr. MCCONNELL. I move to table the motion to reconsider.

The PRESIDING OFFICER. The question is on agreeing to the motion to table.

The motion was agreed to.

ORDER OF PROCEDURE

Mr. MCCONNELL. Mr. President, I ask unanimous consent that the mandatory quorum call be waived.

The PRESIDING OFFICER. Is there objection?

Without objection, it is so ordered.

ORDER OF BUSINESS

Mr. MCCONNELL. Mr. President, for the information of all Senators, the Senate will debate the Mnuchin nomination tomorrow. The next series of votes will occur on Monday at around 7 p.m.

UNANIMOUS CONSENT AGREEMENT—EXECUTIVE CALENDAR

Mr. MCCONNELL. Mr. President, I ask unanimous consent that notwithstanding rule XXII, following leader remarks on Monday February 13, there be up to 7 hours of debate remaining on the Mnuchin nomination; and that following the disposition of the Mnuchin nomination, the Senate proceed to the consideration of the following nomination: Executive Calendar No. 17, David Shulkin to be Secretary of Veterans Affairs. I further ask unanimous consent that there be 10 minutes of debate on the nomination, equally divided in the usual form, and that following the use or yielding back of time, the Senate vote on the nomination with no intervening action or debate; that if confirmed, the motion to reconsider be

considered made and laid upon the table; the President be immediately notified of the Senate's action; that no further motions be in order; and that any statements relating to the nomination be printed in the RECORD; finally, that following leader remarks on Tuesday, February 14, the Senate proceed to the consideration of the following nomination: Executive Calendar No. 10, Linda McMahon to be Administrator of the Small Business Administration. I further ask unanimous consent that the time until 11 a.m. be equally divided in the usual form; and that following the use or yielding back of time, the Senate vote on the nomination with no intervening action or debate; that if confirmed, the motion to reconsider be considered made and laid upon the table; that the President be immediately notified of the Senate's action; that no further motions be in order; and that any statements relating to the nomination be printed in the RECORD.

The PRESIDING OFFICER. Is there objection?

Without objection, it is so ordered.

The majority leader.

Mr. MCCONNELL. Mr. President, the next vote will be the last vote of the evening, and we will be back voting Monday night.

CLOTURE MOTION

The PRESIDING OFFICER. Pursuant to rule XXII, the Chair lays before the Senate the pending cloture motion, which the clerk will state.

The senior assistant legislative clerk read as follows:

CLOTURE MOTION

We, the undersigned Senators, in accordance with the provisions of rule XXII of the Standing Rules of the Senate, do hereby move to bring to a close debate on the nomination of Steven T. Mnuchin, of California, to be Secretary of the Treasury.

Mitch McConnell, Roger F. Wicker, John Boozman, Orrin G. Hatch, Roy Blunt, John Cornyn, Steve Daines, Tim Scott, John Hoeven, Michael B. Enzi, John Barrasso, John Thune, Mike Rounds, Mike Crapo, James M. Inhofe, Joni Ernst, Chuck Grassley.

The PRESIDING OFFICER. By unanimous consent, the mandatory quorum call has been waived.

The question is, Is it the sense of the Senate that debate on the nomination of Steven T. Mnuchin, of California, to be Secretary of the Treasury shall be brought to a close?

The yeas and nays are mandatory under the rule.

The clerk will call the roll.

The bill clerk called the roll.

Mr. DURBIN. I announce that the Senator from Missouri (Mrs. MCCASKILL) is necessarily absent.

The PRESIDING OFFICER. Are there any other Senators in the Chamber desiring to vote?

The yeas and nays resulted—yeas 53, nays 46, as follows:

[Rollcall Vote No. 62 Ex.]

YEAS—53

Alexander	Flake	Paul
Barrasso	Gardner	Perdue
Blunt	Graham	Portman
Boozman	Grassley	Risch
Burr	Hatch	Roberts
Capito	Heller	Rounds
Cassidy	Hoeven	Rubio
Cochran	Inhofe	Sasse
Collins	Isakson	Scott
Corker	Johnson	Shelby
Cornyn	Kennedy	Strange
Cotton	Lankford	Sullivan
Crapo	Lee	Thune
Cruz	Manchin	Tillis
Daines	McCain	Toomey
Enzi	McConnell	Wicker
Ernst	Moran	Young
Fischer	Murkowski	

NAYS—46

Baldwin	Gillibrand	Peters
Bennet	Harris	Reed
Blumenthal	Hassan	Sanders
Booker	Heinrich	Schatz
Brown	Heitkamp	Schumer
Cantwell	Hirono	Shaheen
Cardin	Kaine	Stabenow
Carper	King	Tester
Casey	Klobuchar	Udall
Coons	Leahy	Van Hollen
Cortez Masto	Markey	Warner
Donnelly	Menendez	Warren
Duckworth	Merkley	Whitehouse
Durbin	Murphy	Wyden
Feinstein	Murray	
Franken	Nelson	

NOT VOTING—1

McCaskill

The PRESIDING OFFICER. On this vote, the yeas are 53, the nays are 46.

The motion is agreed to.

EXECUTIVE CALENDAR

The PRESIDING OFFICER. The clerk will report the nomination.

The senior assistant legislative clerk read the nomination of Steven T. Mnuchin, of California, to be Secretary of the Treasury.

The PRESIDING OFFICER. The Senator from Ohio.

MORNING BUSINESS

Mr. PORTMAN. Mr. President, I ask unanimous consent that the Senate be in a period of morning business, with Senators permitted to speak therein for up to 10 minutes each.

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

(At the request of Mr. DURBIN, the following statement was ordered to be printed in the RECORD.)

VOTE EXPLANATION

• Mrs. MCCASKILL. Mr. President, I was necessarily absent for today's vote on the confirmation of THOMAS PRICE to be Secretary of Health and Human Services. Had I been present, I would have voted nay.

(At the request of Mr. DURBIN, the following statement was ordered to be printed in the RECORD.)

VOTE EXPLANATION

• Mrs. MCCASKILL. Mr. President, I was necessarily absent for today's vote