

NOMINATION OF NEIL GORSUCH

Mr. McCONNELL. Mr. President, since his nomination to the Supreme Court was announced, Judge Neil Gorsuch has received extensive praise from former colleagues, the legal community, and editorial boards, among many others. It is praise that has come from across the political spectrum. Even many on the left can't help but compliment Judge Gorsuch's credentials, including former President Obama's own legal mentor, who called him "brilliant," and his former acting solicitor general, who applauded Gorsuch's "fairness and decency."

This week we add to that lengthy list of supporters more than 150 of Judge Gorsuch's former classmates at Columbia University. As they note, these alumni have followed an array of postgraduate pursuits: They are CEOs and stay-at-home parents, professors and lawyers, entrepreneurs and scientists. They come from different socioeconomic and ethnic backgrounds, practice different faiths, reside in different parts of our country, and hold very diverse political views.

Even so, each of these Columbia grads can agree on at least one thing: Neil Gorsuch's fitness to serve on the Supreme Court. Let me share the letter they just sent to the Judiciary Committee:

At Columbia, Neil Gorsuch notably distinguished himself among his peers. He was a serious and brilliant student who earned deep respect from teachers and students alike. With an encyclopedic knowledge on a staggering array of subjects, he could be counted on for his insightful, logical and well-reasoned comments. He carried a full and challenging course-load, finishing in three years and graduating Phi Beta Kappa.

The letter continues:

The hallmark of Neil Gorsuch's tenure at Columbia was his unflinching commitment to respectful and open dialogue on campus.

Despite an often contentious environment, Neil was a steadfast believer that we could disagree without being disagreeable. To be sure, he could deliver a devastating argument, laden with carefully researched facts and presented in a crisp and organized manner. Yet he was always a thoughtful and fair-minded listener who would not hesitate to re-evaluate his own beliefs when presented with persuasive arguments. His amiable nature, good humor and respect for differing viewpoints was admired and appreciated by all.

So it was clear even years ago that the "intellect, academic record, and character" of their classmate Neil Gorsuch was "so special"—"so special" that "there was a shared sense that he was poised for a meaningful and purposeful future."

How right they were. Neil Gorsuch is exceptionally qualified to serve on the Supreme Court. He has, as I just noted, an "encyclopedic knowledge on a staggering array of subjects . . . with insightful, logical and well-reasoned comments." He is a "humble man with no appetite for self-promotion." Let me say that again: a "humble man with no appetite for self-promotion." He is "an upstanding person" with "unyielding

integrity, faith in our institutions and unfailing politeness." These are the words of his former classmates, and they are the qualities we expect in a Supreme Court Justice.

Regardless of political leanings, we all should understand the importance of confirming Justices who will interpret the law as written, not misuse their office to impose their own views as to what, in their mind, should have been written instead. We should understand the importance of confirming Justices who will apply the law equally to all Americans, not rule based on their empathy—empathy—for certain groups over others.

I am confident that Judge Gorsuch is more than prepared to meet these critical standards. It is the type of judge he has been on the Federal court of appeals. It is the type of Justice he will be on the high Court as well. That is why we continue to see recommendations for Gorsuch flooding in from people of all backgrounds and all political views.

In the coming weeks, I am sure the support for Judge Gorsuch will continue to grow, and I know we are all eager to hear from the judge himself when he goes before the Judiciary Committee later this month. When he does, I hope colleagues on both sides will show him the fair—fair—consideration that he deserves, the same fair consideration we showed to all four of the Supreme Court nominees of President Obama and President Clinton after they were first elected—a respectful hearing followed by an up-or-down vote.

RESERVATION OF LEADER TIME

The ACTING PRESIDENT pro tempore. Under the previous order, the leadership time is reserved.

CONCLUSION OF MORNING BUSINESS

The ACTING PRESIDENT pro tempore. Morning business is closed.

PROVIDING FOR CONGRESSIONAL DISAPPROVAL OF A RULE SUBMITTED BY THE DEPARTMENT OF EDUCATION

The ACTING PRESIDENT pro tempore. Under the previous order, the Senate will resume consideration of H.J. Res. 57, which the clerk will report.

The senior assistant legislative clerk read as follows:

A joint resolution (H.J. Res. 57) providing for congressional disapproval under chapter 8 of title 5, United States Code, of the rule submitted by the Department of Education relating to accountability and State plans under the Elementary and Secondary Education Act of 1965.

The ACTING PRESIDENT pro tempore. Under the previous order, the time until 12 noon will be equally divided in the usual form, and 30 minutes

of the majority time will be under the control of Senator BLUNT or his designee.

The Senator from Illinois.

Mr. DURBIN. Mr. President, if I could speak for 5 minutes—

Mr. BLUNT. Mr. President, I am glad to yield my friend 5 minutes to start the day.

The ACTING PRESIDENT pro tempore. The Senator from Illinois is recognized.

FILLING THE SUPREME COURT VACANCY

Mr. DURBIN. Mr. President, I just want to comment very briefly on the comments of the Republican leader.

It was interesting when he said the courtesies that were extended to President Clinton and President Obama when it came to Supreme Court nominees; he left out 1 year—last year.

Last year, when there was a vacancy on the Supreme Court when Antonin Scalia passed away and President Obama sent the nomination of Merrick Garland to the floor of the Senate, it was refused by the Republican leader to even give him a hearing, let alone a vote. So there was an omission in his call for courtesy when it comes to Nominee Gorsuch, a very grievous omission from the point of American history.

For the first time in the history of the U.S. Senate—for the first time—Republican leaders in the Senate refused to give a hearing and a vote to a Supreme Court nominee sent by President Obama. Many of us came to this floor pleading that we follow tradition and the Constitution. I am going to stand by that. Even though I think Merrick Garland was treated poorly by the Republican majority, I believe that Neil Gorsuch is entitled to a hearing and a vote. I made that argument before; I will make it again.

REPUBLICAN HEALTHCARE BILL

Mr. President, the second point I want to make, and very briefly, is that we now have seen the Affordable Care Act repeal that has been brought forward by the Republicans in the House. We still do not know its fiscal impact. The Congressional Budget Office, which traditionally scores legislation, tells us the impact it will have both on the deficit as well as on the American economy. In this case, we believe we will learn as early as next week what that impact will be. There are several things we know for certain. The Republican approach to changing the Affordable Care Act is going to reduce health insurance coverage in America, and it is going to raise the cost.

The cost, incidentally, will be especially hurtful to those over the age of 55. If you are a senior citizen or over the age of 55, this Republican bill says that your health insurance premiums can be substantially increased. There is a limit in the current law that you can't have a disparity of more than 3 to 1 in premiums between people of different age groups. That is changed by the Republican bill to say that older people can be charged up to five times

the premiums that are being paid by those in younger groups. That is substantial.

Secondly, it is painful and hurtful to Medicare. Don't take my word for it; the American Association of Retired Persons has come out against the Republican healthcare plan, saying that it is going to reduce the number of years of solvency for the Medicare trust fund. That is not a positive thing; it is a negative thing for the tens of millions of Americans who count on Medicare.

We also know that when it comes to this bill, there are provisions in here which are inconsistent with our goal to increase coverage across America. My Republican Governor in Illinois, who has been very careful to be critical of Republicans in Washington, came out this week and said that the elimination of Medicaid coverage and reduction in Medicaid coverage would create a budget hardship in our State.

I might add that it will be a hardship on the thousands of people in Illinois who rely on Medicaid to provide for their medical expenses. That includes not only the children and mothers in lower income groups but, substantially, seniors who are in nursing homes who have no place to turn. They are living on Social Security, Medicare, and Medicaid. That is how they survive. Reducing the Medicaid coverage is a danger to them when it comes to continuing on in a safe and healthy environment.

In addition to that, we know that Medicaid for many low-income Illinoisans and low-income Americans is the only health insurance they have. Many who work hard every day don't make enough money to buy health insurance, and their employer doesn't provide it. Medicaid came to their rescue under the Affordable Care Act, and it is going to be severely restricted. That is why my Republican Governor has come out against this Republican healthcare bill, and many others feel the same.

When we take a look at this bill when it comes over here—first, I plead with my colleagues, don't rush it through. Let's take the time to look at it carefully. It will affect the healthcare of millions of Americans. Second, let's hold to the standard that whatever changes we make will provide more healthcare protection in America and make a serious effort at reducing cost. We can only do that if we have the time to honestly debate it on a bipartisan basis.

Mr. President, I thank my colleague from Missouri for giving me this opportunity.

I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from Missouri.

AMERICAN HEALTH CARE ACT

Mr. BLUNT. Mr. President, I want to talk about the Affordable Care Act and its failures, as well as the American Health Care Act and what differences I think it makes. I am going to be joined

on the floor by at least one of my colleagues soon, and we may even, with permission, have a colloquy. I know Senator BARRASSO is on a limited time schedule and has been one of our great leaders on this issue. I think I will turn to him first and then come back when he has had a chance to make his comments.

The ACTING PRESIDENT pro tempore. The Senator from Wyoming.

Mr. BARRASSO. Mr. President, thank you for allowing me to engage in this colloquy with my friend and colleague, Senator BLUNT from Missouri, who has been a real leader not just in the Senate but when he was in the House, traveling to all of the hospitals in Missouri and talking about the issues that concern the people there, as I do in Wyoming every weekend, going home and talking to people at home.

You may not know this, but I was the president of the Wyoming Medical Society and worked with something as the medical director called the Wyoming Health Fairs, where we brought low-cost health screening to people all around the Cowboy State. I had been going to these health fairs for years—when I was a doctor practicing medicine, when I was an orthopedic surgeon, and then when I was in the State senate and now as a U.S. Senator, to the point that I was at a health fair last Saturday in Buffalo, WY.

People come to the fairs. They get their blood tested ahead of time so they can come and pick up the results and find out about their cholesterol and thyroid conditions and other issues. There are booths from the Heart Association and the Diabetes Society, depression screenings, all sorts of things. People there are very interested in their health.

When they see me as a doctor and knowing I am also a Senator, they want to talk about how the healthcare laws affected their lives. What I hear, story after story, is, you have to repeal this ObamaCare. Many of them are people who had insurance that worked for them before the healthcare law was passed. When the healthcare law was passed, they were basically told that what they had, which worked for them and which they could afford, wasn't good enough for the government. The government said: No, you have to buy something else, something more expensive and not what you really need or want—which is getting into the fundamental problem here.

ObamaCare is collapsing all around the country. In Wyoming, as in many places—and I know Senator BLUNT is in a situation where he has people whom he works with—there is not really a marketplace out there. It is a monopoly. There is only one choice.

We see our colleagues—Senator ALEXANDER in his home State and Senator CORKER—in some counties, there are no choices. Nobody is going to sell on the exchange. Even with the ObamaCare government subsidies, there is nothing to be bought.

We have to act now. The House is in the process of doing that. I think they have made an incredible effort, a fundamental change, a big step away from ObamaCare. It is a monumental shift. What it does is it eliminates the things I hear about every weekend in Wyoming that people don't like about the healthcare law. It is the mandates. It is the taxes. It is the penalties they have to pay. People don't like that. They don't like the government saying: You have to buy a government-approved product, pay for it, whether or not you want it, whether or not it works for you.

We eliminate all of those things in what the House is debating now. What do we preserve? We preserve things that people know are important for them. People with preexisting conditions will still be protected. My wife Bobbi is a breast cancer survivor. She has been through operations. She has been through chemotherapy, radiation. As a doctor and as a husband, I know how important it is to protect people with preexisting conditions. There is also a limit on lifetime payments for people who get sick. Finally, we do want to keep and we do preserve for families—they can keep younger members of their family on their insurance, to the age of 26.

We eliminate the things people don't like. We preserve the things that are still so important for families all around the country. We work to get to the point where people can afford health insurance again.

It is interesting listening to the Democrats talking about how many people have been covered under ObamaCare. What you find out is that coverage is empty. They may have an insurance card, but if the copays are so high and the deductibles are so high—\$5,000, \$6,000, \$7,000—it is unusable. They say: I have ObamaCare, but I don't have the ability to get the care.

The issue of Medicaid, which was a failed system for a long time—it has been 50 years since Medicaid came into existence. There is a lot we need to do to modernize, update, streamline, strengthen, improve Medicaid in ways that actually help people.

I was in the State senate. Mr. President, I know you have a long history of involvement in your home State. Senator BLUNT does as well with the activities there. What we have seen with Medicaid—and I saw it in the State legislature—if we had the freedom and the flexibility in the State to make the decisions about how that money was spent rather than dealing with all of these rules and regulations and one-size-fits-all that comes out of Washington, we always felt we could do a much better job of providing for the people of our State. Let the State make involved decisions for people on Medicaid, and we could help a lot more people for the same amount of money. It seemed there was so much waste and abuse in the whole Medicaid system.

So much of what the House is doing is to try to get the power out of Washington. The question is, Whom do you want in control? Do you want the government in control or the people, and their care and the decisions being made at home?

I come to the floor today to thank my colleague from Missouri for his leadership on this from the days before he was even in the U.S. Senate, from his days in the House, and for his involvement. He was really one of the leaders in the House before coming to the Senate on this whole topic. He knows it well. He visits with people at home in his home State, as I do at home in mine.

I will be at home in Wyoming again this weekend, traveling around the State with different activities. I think one of the things we all do when we go home is visit with people and find out where they are going to be and what is on their minds, and that is the best way to do it.

I will be at a pancake breakfast. I will be at a Boy Scout event. I will be at a dinner at the Rocky Mountain Elk Foundation. I will visit with a number of high school students. You hear people. You want to be there and listen to what they have to say. So I am looking forward to being there again this weekend, as I was last weekend—in Buffalo last weekend for the health fair in Rawlins—for an event to hear how what Washington does impacts their lives.

What we have seen over the past 6 or 7 years since ObamaCare became law is that decisions being made in Washington hurt a lot of people in Wyoming, hurt people who were patients of mine when I was actively practicing as a surgeon. The regulations, the one-size-fits-all in terms of the impact on the hospitals, the healthcare providers, and the patients—we know these people need relief. They need to be rescued from this collapsing ObamaCare healthcare law. And we want to repair the damage. We can't get it all done overnight. It is not possible. It took us about 6½, 7 years to get to this point. President Trump has only been in office for about 7 weeks. You can't get it done overnight. We are making definite strides in the direction that is important for the country.

I wish to ask my friend and colleague Senator BLUNT if he is seeing the same things in Missouri and hearing the same sorts of stories as we work to repeal and replace this healthcare law.

Mr. BLUNT. I thank the Senator from Wyoming for his efforts on this topic from the time we were both explaining why we thought President Obama's plan wouldn't work. What I see and I think what you mentioned you see is that people who have coverage often don't have access. It doesn't matter if you have coverage if there is nowhere to go or you feel like there is nowhere to go. I continually hear that from people who have the high-deductible policies. That means

they are discouraged from spending the first \$6,000 or \$8,000 that is out-of-pocket spending.

Many people I talk to say they have not only more expensive coverage than they had before but less coverage than they had before and are reluctant to spend the out-of-pocket dollars that used to be covered by the insurance that didn't meet the new standards but met their family needs. I am wondering if the Senator is seeing that same thing.

Mr. BARRASSO. I am hearing the exact same thing at home. The premiums in our State for people having to buy on the exchange have gone up double digits. I think we had the same thing happen in your State year after year, to the point where if you only have one company selling on the exchange in rural communities—for us, it is our whole State. That is a big problem.

The other thing we certainly are concerned about—and I know this is the case with both Senator BLUNT and me—ours is a rural State, and huge areas of your State are rural.

The architect of ObamaCare, Dr. Ezekiel Emanuel from the University of Pennsylvania, said that we have too many hospitals in the United States. He said there are 5,000 hospitals, and he said there are about 1,000 too many. He actually wrote a book about this after they wrote the healthcare law, and he said that there are about 1,000 too many and they need to close.

Well, if you are in rural Wyoming or rural Missouri, those hospitals are a long way from other places. The first I think 80 hospitals have closed, and they were rural hospitals. Fortunately not in my State, but in a number of States, you have seen that—numbers of rural hospitals closing. When a rural hospital closes as a result of the Obama healthcare law, the impact on a community is dramatic in terms of it being able to recruit nurses, doctors, and businesses to the community, if there is not a hospital, and to recruit teachers to the schools. I don't know if that is an experience and concern the Senator is seeing around rural Missouri.

Mr. BLUNT. It is.

Mr. President, I think you are seeing that too. The critical needs hospitals, the critical access hospitals—the only hospitals available—are often also hospitals that disproportionately have people who are not insured or people who are of low income who aren't on any government program. What has happened in those hospitals and in the ones that have been able to stay open is that they have often had to go outside the traditional community support they had and associate with a bigger hospital.

That may turn out to have been a good thing, but one of the basics of the President's healthcare plan was—which we now know is a highly unlikely result—that everybody will have coverage. In a world where everybody has coverage, you don't have the dispropor-

tionate share of problems that inner-city hospitals, like the Truman Hospital in Kansas City, MO, have, or rural hospitals, like the dozen-plus that we have in our State that are critical needs hospitals. Those things don't happen. If this had worked the way the President thought it would work—and Democrats, when they, all on their own, passed this bill 7 years ago—we wouldn't be having the problems we see now: the havoc in our healthcare system—leaving Missourians, people from Alabama, people from Wyoming, people from all over the country with higher costs, with fewer options, and with more uncertainty.

How many times did the President say, when he was supporting this just after the election and during his election 8 years ago—President Obama kept making the case—that Americans would be able to keep the plans they like. They would be able to keep the doctors they like. Now we act as if those pledges—well, everybody knows—couldn't happen.

When the bill was passed, everybody said that was what would happen. Remember this: If you have a doctor you like, you will be able to keep the doctor you like, period. If you have an insurance plan you like, you will be able to keep the insurance plan you like, period. The period should have at least been a question mark.

As it turned out, it was not true. People didn't get to do that. According to the advocates of the law we have now, there would be more choices, there would be more competition, and there would be lower costs, and none of those things happened. Those things just did not happen.

In Missouri, several insurers have totally pulled out of the individual market. We have 115 counties. Last year, they all had at least two companies willing to offer insurance. This year, we have 97 counties where only one company is willing to offer insurance. I have always thought we needed to expand that insurance marketplace, not reduce it—and buying across State lines and buying an insurance product you thought met the needs of you and your family, rather than the needs somebody at the Department of Health and Human Services thought they knew was better for your family, rather than what you would know was better for your family. But instead, we have done just the opposite. Instead of expanding the marketplace, expanding choices—somehow ObamaCare was designed in a way that actually prevents this—instead of being able to buy across State lines, now you can't buy across county lines. We have 97 of our 115 counties where only one insurance company is willing to be part of the process on the individual market. That one insurance company, rightly, was able to go and say: Here is what we are going to charge. If you don't want to accept that, State insurance regulator, we won't offer the product.

Families one year to the next are often facing 40 percent increases. I

think the average is a 25-percent increase year over year. Many people are paying more than 100 percent, double what they paid when this started. The rate hikes have gone up and the coverage has gone down.

The average deductible in the bronze plan, the third plan down, is \$6,000 for an individual and \$12,000 for a family. That is before anybody helps you at all. So you have insurance that you are paying for every month, but if you get sick, you have to pay \$6,000 for each individual and more than twice that if two people in your family have healthcare problems before anybody does anything. For most families in our country, and certainly most families in Missouri, that is like not having insurance at all.

Even in the silver plan, the average deductible is \$3,500. That is an increase of 15 percent of the deductible over last year. Every year, the price goes up and the deductible goes up. All of us hear from families, individuals, and businesses who say: We can't continue to do this. Mark from Blue Springs told me: "There is nothing affordable" about the Affordable Care Act. When it comes to what he and his family are facing, he said that before ObamaCare, they paid \$246 a month to cover five people with coverage they thought met their needs. Now the premium is \$800 a month. There are only three people. Only one child and he and his wife are still at home. For five people, they were paying \$246 a month. Now they are paying \$800 a month. He says:

These days, when we go to the doctor, nothing is covered. We still have to pay for that visit 100 percent out of pocket. In other words, we pay \$800 per month only to be told that none of the office visit or procedure is covered until the \$8,000 deductible is met.

He says: Really, what are we going to do? They have taken insurance away from us, and the promise that was made over and over was never kept.

Dave, a small business owner in Columbia, says his premiums have more than doubled at the same time that his business has been forced to continually raise deductibles and seriously reduce benefits so that people could continue to have insurance at work. As he puts it, President Obama's healthcare plan "is far from affordable."

Let's see. That is exactly what Mark said: There is nothing affordable about the Affordable Care Act. And Dave's increase this year over last year was 40 percent. At some point, Dave and lots of other employers are deciding that this isn't working.

We have a group in our State that many other States have, the Older Adults Transportation Service. It is a nonprofit that provides transportation services for older adults. The title is actually pretty descriptive of what they do. The cost has gone up over half a million dollars. The paperwork is "so complex and so cumbersome," the executive director told me, that they have to spend additional money to hire a consultant just to fill out the forms

to have the insurance they used to have. Then the insurance doesn't keep up with what they need and what their drivers need. They have to begin to cut services back to have insurance that even begins to resemble what they had before the Affordable Care Act. Talk about people being left out. There are older adults in Missouri who don't have the same access to transportation they had before the Affordable Care Act.

President Trump, in his address to the Congress just a few days ago, reiterated his commitment to step-by-step healthcare reforms "that expand choice, increase access, lower costs, and, at the same time, provide better healthcare."

I was encouraged that he decided to back the expansion of health savings accounts. That allows everybody in the country to put more of their pretax dollars into portable health savings accounts that go with them wherever they go from job to job. You still have that health savings account. The plan that the House of Representatives is debating right now expands the way you can use that health savings account, as well as expands how much money you can put into that account.

Most importantly, the President reaffirmed the need to ensure coverage for all preexisting conditions. I have always supported providing insurance options for people who have preexisting conditions. I sponsored the legislation that allowed young people to stay on their parents' healthcare until they were 25. The people drafting the Affordable Care Act put exactly that language in the bill and raised the age to 26. Three million people every year have access to insurance because of a simple choice like that. I think that bill was four pages, with lots of white space, and 3 million people get insurance every year who wouldn't have insurance otherwise, or at least traditionally hadn't had insurance otherwise at no cost to taxpayers. Frankly, there is not much cost to anybody because those young, healthy people are just establishing themselves, just leaving home, just going off mom and dad's insurance, and they thought they could get by without it for a while. In all likelihood, they were right. They are not a hard group to insure.

That is the kind of thing we ought to think about, where we figure out how to increase access to coverage without taxpayers having to bear the load for somebody else's healthcare, if there is another way to do it. We want to be sure that, whether it is keeping them on your family insurance, staying on your family insurance longer, or having no lifetime cap—that was a legitimate problem that many people faced—they would have their insurance. They would pay for it forever, and then when they faced a catastrophic situation, at some point the insurance companies in earlier times were able to say: You reached your lifetime cap; so we are now canceling your policy. That wouldn't happen under the plan we are discussing.

The landscape for healthcare—and what families and individuals have to deal with—has dramatically changed. Because of that, it is going to be more challenging to go forward than it would have if we had done the same half-dozen commonsense things just a few years ago. This is no 2,700-page response or substitute for the 2,700-page ObamaCare bill.

This is an easily understood way to go forward that eliminates taxes that everybody is now paying on their healthcare. There is a medical device tax. There is an over-the-counter medication tax for things you don't have a prescription for. There is a special tax on those over-the-counter medicines in the current law. Those will be repealed. The medical device tax would be gone, would be phased out. The over-the-counter tax on medicines would be phased out and the tax on prescription drugs. If you buy over the counter, you pay a tax, but if you get a prescription, you also pay a tax. There may be a place in here where you pay a tax for just paying a tax. But the medical device tax is gone. The over-the-counter medication tax is gone. The tax on prescription drugs would be gone. The tax on health insurance policies would be gone. When you get health insurance, there is a tax to be paid under ObamaCare on that, as well. The Medicare tax increase would be gone. The tanning bed tax would be gone. The net investment tax would be gone. The health insurance tax would be gone. It is about a trillion dollars in taxes that were added back into the system. By the way, if you have some kind of coverage for a medical device, you are paying for the coverage. You are paying a tax on the coverage, if you are lucky enough that the medical device is covered, if your insurance company pays that. Of course, they pay the tax on that, and, then, you have paid it in the premium that you had to pay to cover the tax. We have to step back here and try to do the right thing.

My friend from Illinois earlier mentioned that there traditionally were five different community ratings of people of different ages based on the healthcare costs that they might have, but the ObamaCare bill said: No, you can only have three ratings. The oldest, sickest, most likely to use health coverage can't pay more than three times what the youngest, healthiest people pay, which is another reason, if you are young and healthy, not to get insurance.

Things that were put into this raised costs for so many people. Then what happens? Then people say: Well, why is it that we don't have enough people covered? They say: The real problem with ObamaCare is that there weren't enough young, healthy people who bought coverage on their own. It was designed into the plan to make it very unattractive, if you are young and healthy, to buy coverage because suddenly coverage for that population was in relationship to all other people

being covered, higher than it had ever been before.

With the bill the House is debating now, we would restore the disproportionate share payments to inner-city hospitals, to rural hospitals, where you have to treat more people who are either on a government program that doesn't pay very well or more people who don't have any coverage at all. That was eliminated in ObamaCare.

We now realize that world is a world that doesn't exist, a world in which everybody who goes to the hospital, everybody who goes to see the doctor, everybody who seeks healthcare has insurance coverage.

Who takes care of that?

This bill, being debated right now in the House, looks at that again and says: Let's get back to where we are actually helping those institutions that are particularly focused on underserved populations, that are particularly focused on doing that.

We have an opportunity here, basically in three different steps, to do what needs to be done. The first two steps are critical. One is to set an end date for the chaotic situation we are in now, to do as much as we can with budget tools to set a framework for how we move on and get out of these incredibly devastating budget situations for both the Federal Government and for families. The second is to let the Secretary of Health and Human Services, who was confirmed by the Senate just a few weeks ago, look at the over 1,400 times in ObamaCare where that Department can create regulations that either make it harder or make it easier for people to comply with the law. One of the most important decisions, if you are an insurance company and you are offering a healthcare product, is deciding what classifies as an acceptable product, what is the basic criteria you can offer people and still be offering healthcare insurance. So we are at an important moment.

There is no doubt that the current situation is collapsing, that healthcare providers are providing healthcare to people who don't have coverage, who are not protected by programs they were previously protected by. The people who used to have a lot of choices in insurance, in many cases, now have only one choice, and it is not a choice they can afford, and when they do pay for it, they feel like they are living without insurance at all.

So we are doing what needs to be done. We have to do what we can to get back to where people can buy the insurance they think meets their needs, insurance they can afford and enables them to see the doctor they want to see. A patient-centered system, instead of a government-centered system, is the answer here. We have to get this job done, and I believe we will.

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

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

RECOGNITION OF THE MINORITY LEADER

The PRESIDING OFFICER. The Democratic leader is recognized.

TRUMP CARE

Mr. SCHUMER. Mr. President, I just came from speaking with several Americans about how TrumpCare would affect them. Universally, these folks were scared. They are worried their costs will go up. They are worried their benefits will go down. One of the concerns that came up, an issue that is on the minds of many Americans, was the high cost of drug prices.

During the campaign, the President talked the talk on drug prices. As President-elect, he said in December he would "bring down drug prices." In January, he said pharmaceutical companies were "getting away with murder." He repeated the refrain in his joint address to Congress last week. "We should," he said, "work to bring down the artificially high price of drugs and bring them down immediately." Immediately.

Well, the immediate is here. TrumpCare, the repeal and replacement of the ACA, has been introduced. TrumpCare does absolutely nothing to address the high cost of drugs. In fact, drug prices might start going up faster. Once again, the President is talking the talk, talking like a populist, but not walking the walk, not helping average Americans. He is helping the wealthy, special interests but not the average folks he was talking to during the campaign.

The President met with a couple of Congressmen yesterday and talked about drug prices. Why not put something in TrumpCare? Why not let them negotiate, bring down costs? Instead, TrumpCare does the opposite. TrumpCare eliminates a current requirement that insurers actually give patients the value of the health insurance they are paying for. Under the ACA, insurers had to pay at least 60 percent of the cost of care provided—for some plans, more. That requirement would be gone. So that, again, hurts average folks.

That provision in TrumpCare is a blank check to insurers to cover less and charge more out-of-pocket for a whole host of services. Most experts agree that insurers could charge much more for its prescription drugs or even rationed care.

TrumpCare takes the shackles off the insurance companies and lets them decide how or if they are going to cover your prescription drug costs. Letting the insurance companies decide what to charge and cover has never been, and never will be, a recipe to bring down prices. So on drugs as well as other issues, TrumpCare: higher costs, less care.

What is particularly galling, of course, is the fact that the President talks about reducing the cost of drug prices and negotiating but does nothing.

He said he would do it immediately. The immediate is here. TrumpCare is here. TrumpCare makes it very likely that the cost of drugs could go up for average Americans. It is just another example of this President doing one thing but saying another. He promises the Moon and the stars, but his policies make them even further out of reach.

He says: "I'll bring drug prices down." His bill does the opposite, and it is just another way in which this is a healthcare handout for the insurance companies and the wealthy but a raw deal for average Americans.

TrumpCare is really just a tax break for the rich. It is not really a healthcare program. Its No. 1 motivation is to reduce taxes on the top 0.01 percent. If you make above \$250,000, your prices are going to come down. If you are in that 0.01 percent, your average reduction in taxes is \$200,000—more than most Americans make. So this bill is not going to help average Americans; it is going to hurt them, unless you are in the top 0.01 percent.

As more and more people read the bill, the louder the chorus of opposition grows. The AARP, a very cautious organization—usually they don't like to take political stands—a few weeks ago, they had ads on TV praising President Trump for saying he will not cut Social Security or Medicare. They came out strongly against the bill yesterday. Why? Because it would hurt seniors. They believe seniors—many average seniors whose income is \$15,000—could pay up to \$8,400 more. The people who might be hurt the most with this bill are average Americans between 50 years old and 65 whose costs inevitably will go up, whose healthcare will not be as good.

The AMA, another cautious organization, not known to be a big Democratic organization, came out against the bill. Doctors know how bad this will be for their patients and for America.

The Club for Growth, on the other side, has also opposed the bill. Hospitals, doctors, senior citizen groups have all come out against the bill. The hard right comes out against the bill, as do more moderate and liberal groups. That is because this bill is one big mess, done quickly in the dark of night. It is no wonder Speaker RYAN and Leader MCCONNELL don't want a lot of debate. They are embarrassed. This bill is an embarrassment to those who put it in because it doesn't do what it is supposed to do. That has led even Republican Governors such as John Kasich of Ohio and Brian Sandoval of Nevada to express concern over the destruction of the Medicaid Program. As we know, it is shifting the costs to the States.

Governor Kasich said that TrumpCare "puts at risk our ability to treat the drug addicted, the mentally

ill, and the working poor.” It is almost certain that under this bill, treatment for opioids will be less available because Medicaid is going to be cut and Medicaid helps pay for it. It is almost certain that if you are a young person, a young family—say you are 30 or 40 years old, but you have mom or dad in a nursing home; Medicaid has been paying for most of that, and it is going to be cut. What are you going to do? Maybe they will have to move in with you. That is not so easy in a growing family with kids. Maybe you will have to pay a lot of money out of your pocket. So this bill hurts Americans up and down the line.

The ideological fervor of “TrumpCare must cut back the role of government, whether it hurts people or not” is motivating this bill. That in the abstract would be fine, but it hurts Americans. It hurts middle-class Americans who are young, it hurts middle-class Americans who are middle-aged, and it hurts maybe most of all middle-class Americans who are 50 to 65 years old. As people learn about this bill over the next few weeks, there will be rebellion in the land of Adam.

So I tell my friends on the other side of the aisle to listen to the voices of the average Americans whom I met today, who care about bringing down the unreasonable cost of drugs. They should listen to the voices of experts who say just about the only winners in this bill are the very wealthy, and they should listen to the voices coming from their own party who say this bill will hurt their States and hurt the country.

TrumpCare is a mess. If this Congress, if this House, if this Senate is smart, they will defeat TrumpCare, keep the ACA, and then we can work together on making it better—plain and simple.

CHINA AND TRUMP TRADEMARKS

Mr. President, on another matter, I am concerned about a recent report that the Trump business interests have been granted approval on a number of trademarks in China.

The President spent most of his campaign talking tough on China. He said China was “ripping us off . . . and killing our companies.” He promised to label them a currency manipulator, a cause near and dear to my heart, on day one. The President promised many times over, saying: We are going to label China a currency manipulator. There is nothing stopping him from doing it. He could have done it with a stroke of a pen.

My views on trade, particularly with respect to China, might be closer to the views President Trump expressed in his campaign than those of either President Obama or President Bush. But since the election, President Trump has been remarkably soft on China.

As the Acting President pro tempore knows, I was the original person—Senator GRAHAM and I—who came up with the idea that China was manipulating its currency. We discovered it. I did, when I went to Crucible Steel near Syr-

acuse and they told me how their business was being hurt by China manipulating its currency. At first, when Lindsey and I talked about it, people said: Oh, no, it is not happening. I was sort of proud of the fact that in those days both the New York Times, liberal, and the Wall Street Journal, conservative—their editorial pages both stated that China doesn’t manipulate its currency; Schumer is off base. Now, of course, everyone knows they do. President Trump in his campaign said over and over again he was going to label them a currency manipulator which would have consequences to them on day one, the first day he took office. Now he has backed off his threats. He has been in office more than a month. He has not labeled China a currency manipulator.

Amazingly enough, in his first week he said he was no longer going to honor the One China policy. He was sending a shot over the bow to Beijing, that they can’t keep getting away with what they have been getting away with in trade, in geodiplomacy, in cyber security, stealing our intellectual property, and everything else. When he did that, I was pretty pleased. Now he has backed off.

On the two issues where the President could have been really tough with China, currency manipulation and backing off on One China, he reversed himself within the last few weeks. Now, all of a sudden, we learn that China has granted preliminary approval to 38 new trademarks, allowing the Trump brand to market several different business ventures there, including hotels and golf clubs. Before he assumed public office, Donald Trump had been working to get trademarks from China for a decade without success. These particular trademark applications, filed during the campaign, just sailed through earlier this week.

It raises troubling specific questions: Did the Chinese Government and the Communist Party, who likely had a hand in granting these approvals, see some type of benefit from doing so now that Donald Trump is President? Did the President and his network of businesses personally gain from his office, and will that incline the President to make policy decisions that benefit China and hurt American workers?

We don’t know if there is a link between the two. We don’t know what was in the minds of the Chinese Government or the Communist Party when they all of a sudden granted these 38 licenses. It surely raises troubling questions.

It raises a bigger question. The wisdom of our Founding Fathers proves true day in and day out. Over 220 years after they wrote the Constitution, their wisdom is coming through now with President Trump because they wrote in the Constitution that anything of value—any emolument—to U.S. officials from foreign governments should be prohibited. U.S. officials should not be allowed to accept any-

thing of value from any foreign government. In those days, one of the greatest worries of the Founding Fathers was that they wanted to prevent foreign governments from trying to curry favor with the United States by offering potential financial gain to our officials. This issue has been largely forgotten for a century or so, but the wisdom of the Founding Fathers is shining through now because President Trump, unlike just about any other President I can remember in recent history, has failed to completely separate himself from huge financial interests.

Now the questions arise. Is there a relationship? Are foreign governments seeking to curry favor? Is it affecting Donald Trump’s decisionmaking? No one knows the answers to these questions, but the fact that the questions can be asked is extremely troubling.

The President has flouted all tradition and precedent, and I worry if the spirit, if not the letter, of the Constitution has been broken when President Trump retains a financial interest in his business empire. It leads to troubling questions like the ones raised by these trademarks.

As my colleague from Connecticut, who is an expert on this issue, a brilliant lawyer, Senator BLUMENTHAL, said yesterday: I think the circumstances surrounding the approval of these trademarks ought to be looked into by this Congress for a potential emoluments clause violation. He is right, and I am glad he is going forward.

Thank you, Mr. President.

Mr. President, I ask unanimous consent that time consumed during a quorum call be charged equally to both sides.

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

Mr. SCHUMER. I suggest the absence of a quorum.

The ACTING PRESIDENT pro tempore. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

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

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

Mr. BENNET. Thank you, Mr. President.

Last week, in his address to Congress, President Trump called education “the civil rights issue of our time.” I completely agree with that.

Millions of American kids are trapped in underperforming schools with little hope of gaining the skills needed for good-paying jobs in the 21st century economy. In America, poor kids hear 30 million fewer words than their more affluent peers by the time they get to kindergarten. If you don’t think that makes a difference, you ought to talk to any kindergarten teacher in America.

By the fourth grade, only one in four kids in the United States can do math

at grade level, and even fewer than that can read at grade level in this country. About 9 in 100 are going to receive a college degree or its equivalent by the time they get to the age of 25.

As a Nation, we are falling behind the rest of the world. American 15-year-olds rank 15th in reading in the world, 19th in science in the world, and 37th in math in the world. These numbers are shameful. They are a national disgrace. Because these results fall mainly on communities of color in this country, this is a civil rights crisis in the United States—as the President said, the civil rights issue of our time.

It is for those reasons and other reasons that Congress passed No Child Left Behind in 2001, so as to strengthen the accountability and transparency for public education all over this country. Despite its good intentions, the law came with onerous requirements that did not work for many communities, including my own.

When I was the superintendent of the Denver Public Schools, there were few experiences more miserable than dealing with the Federal bureaucracy and their auditors, who would make judgments that were driven more by compliance than by the needs of our children. Somebody who understood that well was Margaret Spellings, who was, at that time, the Secretary of Education for this country. We owe her a debt of gratitude for the work that she did as Secretary. I, personally, owe her a debt of gratitude for the waivers she granted to the Denver Public Schools, when I was superintendent, to allow us to focus not on the compliance of rules that made no sense but to focus on the kids in this school district.

I know that was the experience of educators all over America, which is why, in 2015, the Senate came together—and I am a member of the Health, Education, Labor, and Pensions Committee—to replace No Child Left Behind. Finally, 8 years too late—8 years after it was supposed to be reauthorized—under the leadership of Chairman ALEXANDER and Senator MURRAY, we were able to pass the Every Student Succeeds Act. The bill earned overwhelming support. The country was ready for a change.

The law brought much needed reform to the Federal Government's role in education by giving States far more flexibility for innovation, while preserving important, core accountability protections, which are critical for those of us who are interested in the civil rights mission of the Federal Government. It was a rare example of bipartisan cooperation and smart policymaking in Washington, DC. In fact, I cannot think of another case in which we received that much bipartisan support on such a difficult issue in the time that I have been here.

The way I see it—and I say this as a parent of three children in the public schools in Denver and as a former school superintendent—the only reason for Washington to be involved at all in

public education is with regard to civil rights, and that is an important reason for us to be involved. All kids should have access to great schools regardless of where they live, what ZIP Codes they are born into, or who their parents are.

With Every Student Succeeds, the new bill, States will design their own accountability systems and interventions when schools struggle. That is a big change from No Child Left Behind. It is a welcome change. The law shifts enormous responsibility from the Federal Government to States and transforms over 15 years of education policy. The law is not perfect, but it represents one of the most significant changes and, I would say, importantly, one of the most significant retrenchments of the Federal Government in domestic policy in modern American history. That should be acknowledged. It should be welcomed.

As States shift to the new model, many are asking for clarification about how to implement the law and make the most of greater State control over education. That is why the Department of Education issued rules last year to provide much needed clarity, stability, and flexibility to States, making it easier for them to transition from the broken system that we had under No Child Left Behind to the newer and more State-driven approach that we now have.

Now some in Congress have targeted this regulation. They have invoked the Congressional Review Act to repeal the rules wholesale. That would be so foolish after the progress we have made and the direction in which we have headed. It would tie the hands of the Department of Education from properly implementing the law and delay much needed flexibility and accountability for the States. It would be a disservice to students, to educators, to teachers, and to principals all across the country, and it would undermine the implementation of the entire law.

As I have said many times—and I have learned this the hard way—when it comes to education policy in particular, bad implementation can be just as harmful—even more harmful—than bad policy.

Repealing the rules would also sow confusion among States about when they must comply with this new law. The Every Student Succeeds Act includes a timeline for transition so that States have time to plan, but many specifics of that transition are unclear. The Department of Education's rules clarify that timeline and give States the flexibility with which to implement some parts of the law later than others.

Why would we want to take that away? Repealing the regulation would throw all of that away. Will schools have to fully comply with all aspects of the law by 2018, or is there some flexibility to stagger its implementation?

Beyond the timeline, striking the regulation wholesale would also throw

States into limbo by creating uncertainty over other important parts of the law. For example, the act includes a major change in how the law applies to English learners, which is one of the fastest growing populations in our schools throughout the country and now represents nearly 1 out of 10 students nationwide. In the new law, many provisions concerning English learners moved from title III to title I.

As States undertake this shift, they need clarity on how to design accountability systems that include English learners in order to ensure kids do not fall through the cracks. For example, the rules make it clear that States can create proficiency goals for different groups of English learners rather than creating a uniform goal for all students.

Striking the rules would also undermine core elements of the law, like the requirement for States to report on school spending and resources. The regulation clarifies that States must create a uniform procedure for this reporting, which is vital for transparency around funding and investments and, I would say, is vital with respect to the civil rights mission of this law.

It is easy to publish numbers. Believe me; I have seen it. It is a lot harder to publish numbers that are accurate and meaningful by which parents and kids can make informed decisions.

Right now, as we sit here, States are developing accountability plans under the Every Student Succeeds Act, and they are drawing on the current rules to guide that process. A change now could delay the submission and approval process for these plans. States will not know whether to use different templates or the ones they already have. They do not know if they have to restart public comment periods, delaying submissions and throwing the entire timeline into uncertainty. There is no reason we should be doing this to our schools, our teachers, and our principals.

Repealing the rules would also suppress innovation and limit flexibility. I know that is the clarion call on this floor a lot of the time. In this case, people are going to get the opposite of what they expect. Flexibility is central to the Every Student Succeeds Act. I fought for many aspects of the law in order to give States the ability to design their own accountability systems, and I believe in that. Yet, in the absence of express, legally binding guidance from the Department of Education about where and how they can experiment, States will respond to that uncertainty by embracing the safest course. I saw that all the time when I was superintendent.

States stand to lose a lot of money if they are not in compliance, particularly \$15 billion in annual title I funds for students who live in poverty. They do not want to risk it. It may seem odd, but we need these rules in order to ensure flexibility and innovation for States. Nonbinding guidance is not enough.

Finally, if we use the Congressional Review Act to repeal this rule—a very, very blunt instrument—the Department of Education will not be able to publish any rule that is “substantially the same” unless the Congress passes a new law—the Congress that took 8 years longer than it was supposed to in order to reauthorize No Child Left Behind the last time. This could mean that the Department of Education—and this is something people here need to pay attention to if they care about civil rights—would not be able to issue any new regulation to provide clarity for States as they transition to the new law. They would be left completely in the lurch, potentially hamstringing education policy across the country for a decade.

What is a shame about it is that there is absolutely no reason to do this. If the rules need to be changed, we should work together to improve them, but a CRA is not the correct policy tool. That is especially true when passing it would prevent all future regulation on core aspects of the Every Student Succeeds Act.

There has to be a better way for us to come together than this. I agree with the President that education is the civil rights issue of our time, and we should defeat this vote on this CRA.

I yield the floor.

Mr. DURBIN. Mr. President, today I come to the floor in opposition to the resolution to repeal regulations that help States and districts implement important provisions of the Every Student Succeeds Act.

In the last Congress, Members of Congress did what seems nearly unimaginable today. We passed a bipartisan bill, the Every Student Succeeds Act, or ESSA, to fix No Child Left Behind. After 14 years, Democrats and Republicans in both Chambers came together on compromise legislation to reauthorization of the Elementary and Secondary Education Act (ESEA). It gave States and districts flexibility to develop their own plans for holding schools accountable and encouraging improvements. At the same time, it included important Federal guardrails—including through regulatory authority—to fulfill the civil rights legacy of the original ESEA, ensuring that all students have equal access to high-quality public education.

Today, we should be focusing on the implementation of ESSA and providing critical resources to students, teachers, and schools. But, instead, we are on the Senate floor debating a Congressional Review Act resolution of disapproval that would gut the regulations that help maintain the important balance that ESSA strikes between local control and making sure that States are held accountable for educating our students.

After listening to teachers, parents, principals, and superintendents, the Obama Administration issued the final accountability regulation last November. Among other things, this regula-

tion provides important information to help States draft their State plans and develop accountability systems to determine whether children are actually learning. It gives more flexibility to States to develop academic standards, to measure student achievement, and to determine intervention strategies when subgroups of students are consistently underperforming. It also lays out how States should comply with important provisions of the law, including identifying low-performing schools for improvement.

Eliminating this regulation would roll back the Federal role in education that has been in place for more than 50 years. In 1965, when President Lyndon B. Johnson signed the Elementary and Secondary Education Act, it created an extraordinary opportunity for our Nation to make an even deeper commitment to civil rights. It ensured that all children, regardless of their ZIP Code, background, disability, or family wealth, would have a right to a quality education. Repealing this regulation would overturn 52 years of progress. We should be committing ourselves to advancing equity in education, but instead Republicans are using a political tool—the Congressional Review Act—to remove important Federal protections for students. I believe it is a betrayal of the bipartisan framework that underpins ESSA.

Striking this rule could also send States into chaos. Many States, including my home State of Illinois, have prepared their State plans to align with this regulation. Without the guidance and clarity that this regulation provides, states will not have the support they need to successfully implement ESSA. It could ultimately lead to greater liability for States and districts that are responsible for complying with the law but are left to interpret how to implement the law for themselves. If this partisan CRA effort is successful, the Education Department will not be able to promulgate new rules related to these issues. Instead of policy that is subject to the public scrutiny and review of the formal Federal rulemaking process, repealing this rule gives incredible latitude to an administration that wants to dismantle public education.

When I voted for ESSA, it was with the understanding that the law allowed the Secretary of Education to promulgate rules to implement the bill's accountability provisions. Gutting these regulations swings the pendulum way too far in the direction of local control. Giving States more control with a blank check from the Federal Government is not responsible Federal policy. We should maintain critical Federal guardrails to hold States accountable for educating our children. We should uphold our vital role in protecting the civil rights of all children. Anything less says to our children that they don't matter. I urge my colleagues to join me in voting against this resolution.

Mr. VAN HOLLEN. Mr. President, one of the most significant bipartisan accomplishments of the last Congress was the Every Student Succeeds Act, the long-overdue reauthorization of K-12 education law. The Every Student Succeeds Act returned more flexibility to States while ensuring accountability to ensure that every child gets a quality education.

Today, however, the majority has brought before the Senate a measure that would take a step backward. This Congressional Review Act resolution would repeal Department of Education regulations that the Department put in place to give States and school districts clarity about their responsibilities under the law and guidance to ensure that students receive their guaranteed civil rights protections. The regulations resulted from a year of stakeholder feedback. States are already using this guidance to write their State plans.

If we pass this resolution today, we would pull the rug out from under the very local stakeholders that we promised to empower with the Every Student Succeeds Act. Passing this resolution would disrupt their planning process and interfere with their operations. This resolution would also hurt our most vulnerable students by weakening accountability and protections for students with disabilities and students of color.

As the National Disability Rights Center has said, “To rescind these regulations would not only be a disservice to the spirit of ESSA and diminish the efficacy of the law, but would also serve to undermine the equity of educational opportunity for all students, including students with disabilities.”

The Leadership Conference on Civil and Human Rights concurred, arguing: “The underlying accountability and state plan regulation will help states, districts, and schools to faithfully implement the law and meet their legal obligations to historically marginalized groups of students. . . .”

The U.S. Chamber of Commerce also opposes repealing this regulation, saying: “Just as we believe the Every Student Succeeds Act incorporates our principles, we believe the [accountability] regulations do as well. And they provide states with the clarity they need to move forward.”

The Every Student Succeeds Act was the result of years of painstaking work and bipartisan compromise. The implementing regulation was the product of stakeholder input. We should not undermine that important progress and throw our education system into chaos with this resolution. I urge a “no” vote.

The PRESIDING OFFICER. The Senator from Iowa.

REPEALING AND REPLACING OBAMACARE

Mr. GRASSLEY. Mr. President, the other body spent yesterday and well into the night to vote out bills that would repeal and reform ObamaCare. I do not know exactly what is going to

happen in the other body on that issue, but I would like to add some thoughts on the issue of repeal and replace.

ObamaCare has been a case of overpromise and underdelivery. People were told that their premiums would go down by \$2,500. They have actually gone up by an average of \$3,500. They were also promised that if they liked their doctors, they would be able to keep their doctors. Millions of people have had to change doctors. Then they were told that they could keep their healthcare plans, and millions of people have had to change their healthcare plans. In fact, ObamaCare has been a case of overpromise and underdelivery. The reality is much different.

ObamaCare is hurting more people than it is helping. I have heard from many Iowans about the tremendous premium increases and, most importantly, all about high deductibles and high copays that make ObamaCare not worth its consideration.

One farmer said his health insurance premium went from \$20,000 to \$30,000 in one year. Another family said their ObamaCare premium increased 144 percent over 3 years. The 2017 premium for three people was over \$24,000, and families who did manage to purchase ObamaCare insurance found that they could no longer afford to use it because of sky-high deductibles and copays. Another Iowan said that his policy for his family of three increased from \$15,000 a year to \$23,000 in 1 year, with, more importantly, the policy's value being less because the deductible for that plan is nearly \$6,000.

It is quite obvious, as you think of these situations, that very few people can afford some of the prices or afford the deductibles that we hear about. So I think it is a very clear summation to say that ObamaCare is not working.

According to Avalere, one-third of the country will have only one insurance carrier that offers ObamaCare plans next year. Since that analysis by Avalere, another insurance company has pulled out of ObamaCare and has left some parts of the country without any insurance companies whatsoever for the folks to choose from. So many insurance companies have dropped out of ObamaCare that there are places in the country where people have a subsidy, but no insurance plans to buy. That is like having a bus ticket and there is no bus to take you anywhere.

Even those who were strong supporters of the healthcare law, like, as an example, the Democratic Governor of Minnesota, have said—or he said—the ACA “is no longer affordable to many Americans.”

The problem with ObamaCare is it did nothing to address the underlying causes of the high cost of healthcare; that is, what it costs for a hospital or doctor to purchase and maintain medical equipment, to purchase medicines, to carry malpractice insurance, and things like that. Rather than address the actual cost of care, President Obama chose to bypass real healthcare

reform for an unsustainable entitlement and, of course, bureaucratic mandates, which have priced people out of the healthcare insurance market, rather than provide them with affordable and quality coverage.

It is time, then, as the House was working throughout the night, to deliver more accessible, more affordable healthcare to even more Americans. ObamaCare has failed on both of these points, with, I believe, 29 million people still not having health insurance.

It is time to reduce the role of the Federal Government in the healthcare system because I think that expanded role is one of the very basic problems we have with ObamaCare. It is time to spend less and get better quality care.

I urge my colleagues on the other side of the aisle to work across the aisle in a bipartisan way. They know the Affordable Care Act is not serving the purposes that it was intended to serve and is falling apart and, in a short period of time, it may collapse. I think the other side is trying to distract attention from the Affordable Care Act collapse, and they are doing it by using the usual scare tactics. It used to be those scare tactics were applied just to Medicare improvements, but now they are applied across the board of healthcare delivery in America.

It is time for the other party to step up instead of doubling down because it was their plan passed in March of 2010 that put us in this spiral we are in. It is time for statesmanship, not gamesmanship. It is time for the people who are responsible for ObamaCare to stop defending the un-Affordable Care Act and deliver Americans what was promised.

I look forward to working with all of my colleagues and, of course, our new President to deliver affordable healthcare to more Americans.

Mr. President, I ask unanimous consent that Senator ALEXANDER control 10 minutes of the remaining debate time on H.J. Res. 57.

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

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

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

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

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

Mrs. MURRAY. Mr. President, I ask unanimous consent to speak for 7 minutes.

The PRESIDING OFFICER. Is there objection?

Without objection, it is so ordered.

Mrs. MURRAY. Mr. President, I come to the floor to once again urge my fellow Senators to vote against this resolution, which will weaken our bipartisan Every Student Succeeds Act and will hurt students and schools across

the country. I wish to quickly run through the reasons why passing this resolution will hurt our students.

First, voting for this resolution will throw States and school districts into chaos just as they are beginning to implement this law. Secretary DeVos has already sent a letter to State chiefs suggesting that a new State template for plan submission would be coming, less than a month before approximately 18 States and the District of Columbia intend to submit their plans. This timeline will not allow enough time for the stakeholder review process that is required in the law and may force States to reopen their plans and delay implementation of the law.

Secondly, the Every Student Succeeds Act is a civil rights law at its core. We know from experience that without strong accountability, kids from low-income neighborhoods, students of color, kids with disabilities, and students learning English too often fall through the cracks, and now it is up to all of us to uphold the civil rights legacy of the law and its promise for students by voting against this resolution.

I wish to spend a little more time on the third reason. It should concern all of us that if this resolution passes, it will give Secretary DeVos a blank check to promote her anti-public school agenda. During her confirmation process, my colleagues and millions of Americans saw that Secretary DeVos lacks a basic understanding of key concepts in public education policy, and even more concerning, she has openly questioned the role of the Federal Government in protecting our most vulnerable students.

After her hearings, millions of people across the country stood up, made their voices heard, and called on the Senate to reject her confirmation. Although she squeaked through with an unprecedented tie—the breaking vote from Vice President PENCE—it was clear that Democrats, Republicans, and people across the country rejected her anti-public school agenda. Instead, they want the Department of Education to stand with students and with schools. We cannot in good conscience, through this rule, give Secretary DeVos another tool to promote her anti-public school agenda in ESSA implementation, and that is exactly what passing this resolution will do.

My colleagues across the aisle—the senior Senator from Tennessee made a number of claims in his remarks yesterday about this rule, and I want to go through a few of them because I believe they were off base on a number of levels.

First, the way my friend talked about what the law allows, or doesn't allow, in terms of rulemaking is absolutely wrong. Major laws like the Every Student Succeeds Act allow for and depend on Federal agencies to issue rules that help implement and clarify said laws. The Every Student Succeeds Act maintains the Secretary's overall authority to issue

rules and clarifications that are consistent with the law. This rule before us today is consistent with ESSA, and it provides important clarity to our States, our school districts, and our schools.

Secondly, the senior Senator from Tennessee misrepresented how this rule requires States to rate schools. While the Department's initial rule did require States to provide schools with a "summative rating," my colleague across the aisle, as well as a number of education stakeholder groups, requested that the Department provide States more flexibility. The Department listened and took this out of the final rule which we are talking about today. In fact, the Council of Chief State School Officers, one of the groups who was concerned with the summative rating, said in a statement in response to this rule: "It is clear the U.S. Department of Education listened to the feedback from state education chiefs across the country and made several important changes to ensure the accountability provisions in the Every Student Succeeds Act can be implemented in all States." And now the final rule only requires States to comply with ESSA in this area.

Finally, I want to say that my colleague was simply wrong in the way he talked about the impact of this rule on schools that are struggling. ESSA provides guardrails to make sure that grant sizes are sufficient to meet the needs of students, but it provides States with the flexibility to allot smaller grants to smaller sized districts and schools if that is what works best for them. But this rule in no way limits State decisionmaking in this area.

Those are just a few of the ways this rule was mischaracterized over the course of the debate. There were many others. I just have to say that it is disappointing because Democrats and Republicans worked together on this law. I thought there was a clear understanding of what the law intended. I assumed my colleagues understood what the Department was doing to implement our law in an open and collaborative way, and it is very concerning to me to hear such partisanship and false representations of our bipartisan law.

This rule does not dictate what States have to do in struggling schools. Instead, it balances the goals of ESSA—flexibility with Federal guardrails—and provides important clarity for our States.

A vote for this resolution is a vote to run away from the bipartisan nature of the Every Student Succeeds Act. It is a blunt instrument and a significant step in the wrong direction, and it will have a serious impact on our students, our schools, and our districts across the country.

I am disheartened to see that my Republican colleagues are jamming this partisan play through in the same fashion they did with Secretary DeVos's nomination.

Over the past few months, millions of students, parents, and teachers have made their voices heard about the importance of public education to them. They want us to work together, and they want us to build on the bipartisan law. This resolution does exactly the opposite.

I urge our colleagues to vote against this resolution and vote for our schools and our students and to vote for the bipartisan ESSA law.

Mr. President, I yield the floor.

The PRESIDING OFFICER. The Senator from Tennessee.

Mr. ALEXANDER. Mr. President, in 2015, 85 U.S. Senators voted to fix the No Child Left Behind Act. We reversed the trend to a national school board and began to restore decisions to classroom teachers, local school boards, and States. The Wall Street Journal said that it was "the largest devolution of federal control to the States" in 25 years.

The Department of Education regulation that we seek to overturn today does exactly the reverse. It begins to restore the national school board, and it begins to take away responsibility from classroom teachers, local school boards, and States. It does that in direct violation of the law we passed with 85 Senators voting for it 15 months ago.

The question before us today is not only whether we believe in a national school board or local school board, the question is whether we believe Congress ought to write the law or the U.S. Department of Education ought to write the law. Article I of the U.S. Constitution says that the U.S. Congress—we—should write the law.

The purpose of this resolution is to overturn a Department of Education regulation that in seven specific cases directly violates the Every Student Succeeds Act passed 15 months ago, and in 16 additional cases exceeds the authority allowed by the law. I spoke on this floor yesterday in detail of each of those 23 instances.

It is very unusual for the Congress to actually prohibit a department from regulating on an issue, but that is exactly what Congress did. The regulation we are seeking to overturn says to States: Ignore the law that 85 Senators passed 15 months ago. Ignore the law President Obama called a "Christmas miracle." Ignore the law Governors, teachers, school boards, and superintendents all supported, and even ignore why they supported it, and listen instead to unelected bureaucrats at the U.S. Department of Education.

This regulation issued by the Department of Education specifically does things or requires States to do things Congress said in our law that the Department cannot do; therefore, it violates the law.

For example, Congress said to the Department: You cannot tell States what to do about fixing low-performing schools in Alaska or Tennessee or your State; that is a State decision. But this regulation does that anyway.

Congress said to the Department: You cannot tell States exactly how to rate the public schools. But this regulation does that anyway.

This isn't a trivial matter. The remarkable consensus that developed in 2015 in support of the bill fixing No Child Left Behind was, as I said earlier, to reverse the trend toward a national school board and restore to States, classrooms, teachers, and communities decisions about what to do about schools. People are fed up with Washington telling teachers and schools and superintendents and States so much about what to do about their children in 100,000 public schools. So this regulation, which contravenes the law, goes to the heart of that consensus.

This resolution ensures that the law is implemented the way Congress wrote it. This resolution restores flexibility. This resolution preserves local decision making. This resolution scuttles new and burdensome reporting requirements that are in the Department regulation. This resolution ensures strong accountability for our schools, but it is State accountability. That is what we decided in our law.

Chaos? My distinguished friend from Washington said "chaos." The Secretary of Education has announced that States may continue to follow the exact same timeline that the former Secretary, Secretary King, announced for sending in their State plans. If they have questions about how to do that, they can read the law, they can read the guidance, they can read frequently asked questions, or they can make a telephone call.

This resolution does not in any way give the Secretary new authority. In fact, it limits her authority and the authority of the next Secretary. If we stand up and say we are not going to allow any Secretary of Education, whether it is Secretary King or Secretary DeVos, to, in 23 different instances in a regulation, contravene the authority granted in a law, that means we won't have Secretaries imposing their own policies. We will have Congress writing the law. This regulation—the one we are overturning is not required by the law. It is allowed by the law, but it is not required by the law. School districts can read the law.

Future Secretaries will be able to write regulations on this subject. Of course they will. When you overturn a regulation, it does mean the Secretary can't issue a new regulation that is substantially the same, but that simply means, in a commonsense way, the Secretary can't turn right around and do the same thing we just overturned.

This is a question of whether we are going to restore the national school board that 85 Senators voted to reverse. This is a question of whether you believe Congress writes the law or the U.S. Department of Education writes the law. This resolution upholds the law that received 85 votes from U.S. Senators.

I urge my colleagues to vote aye. An "aye" vote preserves the bipartisan

consensus. A “nay” vote undermines the bipartisan consensus.

I yield the floor.

I yield back any remaining time.

The PRESIDING OFFICER (Mrs. FISCHER). All time is yielded back.

The joint resolution was ordered to a third reading and was read the third time.

The PRESIDING OFFICER. The joint resolution having been read the third time, the question is, Shall the joint resolution pass?

Mr. PERDUE. 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 bill clerk called the roll.

Mr. CORNYN. The following Senator is necessarily absent: the Senator from Georgia (Mr. ISAKSON).

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

The result was announced—yeas 50, nays 49, as follows:

[Rollcall Vote No. 84 Leg.]

YEAS—50

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

NAYS—49

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

NOT VOTING—1

Isakson

The joint resolution (H.J. Res. 57) was passed.

EXECUTIVE SESSION

EXECUTIVE CALENDAR

The PRESIDING OFFICER. Under the previous order, the Senate will proceed to executive session to consider the following nomination, which the clerk will report.

The bill clerk read the nomination of Seema Verma, of Indiana, to be Admin-

istrator of the Centers for Medicare and Medicaid Services.

The PRESIDING OFFICER. The Senator from Florida.

FREEDOM FOR BOB LEVINSON

Mr. NELSON. Madam President, I come to the floor with a heavy heart because 10 years ago today, Robert Levinson, a former FBI agent, was detained in Iran on the tourist island of Kish Island in the Persian Gulf.

Bob is a very respected, long-time FBI agent who had served his country for 28 years and had since retired. He is the longest held civilian in our Nation's history. He is a husband, a father of seven, and now a grandfather of six, and he deserves to be reunited with his family.

Since Bob's detention, American officials have sought Iran's cooperation in locating and returning Bob to his family. Of course, Iranian officials have promised over and over their assistance, but after 10 long years, those promises have amounted to nothing. Bob still is not home.

The bottom line is, Iran is responsible for returning Bob to his family. If Iranian officials don't have Bob, then they sure know where to find him. So today we renew our call on Iran to make good on those promises and return Bob, return him to where he ought to be, with his family.

Iran's continued delay in returning him, in addition to the very serious disagreements the United States has with the Government of Iran about its missile program, its sponsorship of terrorism, and its human rights abuses, is just another obstacle Iran must overcome if it wants to improve relations with the United States.

We also urge the President and our allies to keep pressing Iran to make clear that the United States has not forgotten Bob and will not forget him until he is home. Obviously, we owe this to Bob, a servant of America, and we certainly owe it to his family.

To Bob's family, we recognize your tireless efforts over those 10 long years to bring your dad home, and we offer our sympathies.

Madam President, I yield the floor.

The PRESIDING OFFICER. The majority whip.

AMERICAN HEALTH CARE ACT

Mr. CORNYN. Madam President, this week the Senate continues to press forward on a number of congressional review actions; in this case, a disapproval that will roll back and repeal many Obama-era regulations that have hurt people across the country and strangled our economic growth.

By doing away with excessively burdensome rules and regulations, we are delivering on our promise to the American people to actually do what we can to help the economy, to grow the economy, to create jobs and not hurt it with unnecessary, expensive, and burdensome redtape.

Earlier this year, we began the legislative process to deliver on our biggest promise: repealing and replacing

ObamaCare with more affordable and more accessible healthcare options, options that will work for all American families. The American Health Care Act, introduced in the House on Monday, is the first step in fulfilling that promise.

ObamaCare is collapsing. It has already failed countless families across the country, and it has forced people off good insurance plans they liked and strong-armed them to sign up for plans that were more expensive, offered less care, and didn't even let them use the doctor of their choice. So we would be revisiting healthcare even if Hillary Clinton had been elected President of the United States because ObamaCare is in a meltdown mode.

ObamaCare has also saddled our economy with more than a trillion dollars in new taxes. Most of those taxes are so hidden that most Americans are probably not aware of the fact that there is even a tax charged on the premium for their health insurance policy, for example. Well, all of these taxes end up being absorbed and have to be paid by American families.

At its very core, the individual mandate of ObamaCare was a major power play and overreach by the Federal Government. Basically, what it said was, if you don't buy the government-prescribed health insurance plan, we are going to fine you; we are going to penalize you.

The government should not be able to force anyone to spend their own hard-earned money for something they don't want but have to buy under a threat of financial penalty. The American people have spoken up loudly and clearly and rightfully demanded that Congress do better, and we will.

Since the 2010 timeframe—when our colleagues on the other side of the aisle passed ObamaCare with 60 votes in the Senate, a majority in the House, and with the White House—they have lost the majority in the Senate, they have lost the majority in the House, and they have lost the White House. I think ObamaCare has been one of the major reasons why, because people, the more they learn about it, the less they like it, and they don't appreciate Washington forcing them to do things they don't want to do with their own money.

About 2 months ago, one of my constituents in Texas wrote me about her skyrocketing healthcare costs. Before last year, her premium was about \$325 a month. A short time later, that was revised to \$436 a month. This same Texan later moved from one city to another and, because of her change of address, her premium jumped to \$625 a month. It started at \$325 and is now \$625. In 2017, thanks to ObamaCare, her premium went up again to an astronomical \$820 a month. It started at \$325 before ObamaCare and is now \$820 a month. I don't know many people who could absorb that kind of increase in their healthcare insurance premium.

In about a year, her monthly healthcare payment jumped by more