

which are vital to ensuring continued health insurance coverage for all American families who want it, while also providing a fair and open marketplace that provides a strong, healthy, competitive market. This, in turn, will bring affordable, efficient health insurance with innovative products that will actually help to control the cost of care. That is what the GOP alternative, while still far from perfect, is seeking to do. One thing we do know is that the end result will be better than ObamaCare.

As a father and a grandfather, I understand how important it is to have access to affordable healthcare. No one should be priced out of healthcare coverage for one's family. But our current system is simply not working. After 7 years of ObamaCare, the American people are dealing with higher healthcare premiums, fewer options, more taxes, and reduced access to care. Health providers are struggling with more bureaucracy, with more time spent filling out paperwork instead of caring for patients, and being frustrated by ObamaCare's crippling new regulations.

As I have said from time to time, ObamaCare is a rapidly sinking ship, and there is simply no hope for a recovery. On its seventh anniversary, it is hurting more people than it is helping, and it must be repealed and replaced before it totally crumbles under its own weight.

I yield the floor.

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

Mr. CARDIN. Mr. President, I rise as the ranking Democrat on the Senate Foreign Relations Committee to comment on the nomination of Mr. Friedman to be the U.S. Ambassador to Israel. Shortly, we will be having that vote.

I consider the U.S.-Israel relationship to be a strategic anchor for the United States in the Middle East and one of our most important relationships with any country. Since the creation of the State of Israel, support for this relationship has been bipartisan, bicameral, and supported by successive U.S. administrations. This bilateral relationship is also sustained by the deep bonds of friendship between the people of our two countries. This relationship has benefited Israel and has benefited the United States.

Given the range of strategic challenges across the globe that our country faces and the unprecedented instability and violence embroiled in the Middle East today, it is critical that we take steps to unify support for the U.S.-Israel relationship across the political spectrum. Thus, I believe it is vital that the U.S. Ambassador to Israel be seen as a unifying figure in this enduring relationship.

I really do believe that there is broad understanding and support in the Senate and the House for the special relationship between the United States and Israel—Israel, the only true democracy

in the Middle East, a country that we can rely on for important intelligence information and that has an economy which is similar to ours. It is a country that has enjoyed a special relationship with the United States since 1948, when Harry Truman recognized Israel after the historic vote at the United Nations.

Following extensive consideration of Mr. Friedman's record and taking into account his statements during his nomination hearing, I have concluded that his past record would make it very difficult for him to serve as that unifying force. For that reason, I am unable to support his nomination as America's top diplomat in Israel.

I appreciate Mr. Friedman's efforts before the committee to express regret for his substantial record of divisive, inflammatory, and offensive statements. Unfortunately, I believe the body of Mr. Friedman's published works, not to mention his public statements, will compromise his effectiveness in representing the United States and all Americans, as well as the Government of Israel and all Israelis.

Taken together, Mr. Friedman's statements and affiliations make it clear that he does not believe a two-state solution is necessary for a just and lasting peace. I am concerned that Mr. Friedman's history on this issue, in which he calls the two-state solution a scam, will undermine his ability to represent the United States as a credible facilitator of the peace process. There is simply no realistic, sustainable prospect for lasting peace between the Israelis and the Palestinians other than as two states, living side by side, with security.

I thank Chairman CORKER for the manner in which this nomination was handled before the Senate Foreign Relations Committee. I think we had ample opportunity, and I thank Chairman CORKER for that, but I do urge my colleagues to reject this nominee.

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. DURBIN. 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. DURBIN. Mr. President, I ask unanimous consent that the Senate, notwithstanding the previous order, move to the rollcall vote now.

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

The question is, Will the Senate advise and consent to the Friedman nomination?

Mr. DURBIN. 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. CORNYN. The following Senators are necessarily absent: the Senator from Georgia (Mr. ISAKSON) and the Senator from Kentucky (Mr. PAUL).

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

The result was announced—yeas 52, nays 46, as follows:

[Rollcall Vote No. 96 Ex.]

YEAS—52

Alexander	Flake	Perdue
Barrasso	Gardner	Portman
Blunt	Graham	Risch
Boozman	Grassley	Roberts
Burr	Hatch	Rounds
Capito	Heller	Rubio
Cassidy	Hoeven	Sasse
Cochran	Inhofe	Scott
Collins	Johnson	Shelby
Corker	Kennedy	Strange
Cornyn	Lankford	Sullivan
Cotton	Lee	Thune
Crapo	Manchin	Tillis
Cruz	McCaïn	Toomey
Daines	McConnell	Wicker
Enzi	Menendez	Young
Ernst	Moran	
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	McCaskill	Warren
Duckworth	Merkley	Whitehouse
Durbin	Murphy	Wyden
Feinstein	Murray	
Franken	Nelson	

NOT VOTING—2

Isakson Paul

The nomination was confirmed.

The PRESIDING OFFICER. The majority leader.

LEGISLATIVE SESSION

Mr. MCCONNELL. Mr. President, I move to proceed to legislative session.

The PRESIDING OFFICER. The question is on agreeing to the motion. The motion was agreed to.

EXECUTIVE SESSION

PROTOCOL TO THE NORTH ATLANTIC TREATY OF 1949 ON THE ACCESSION OF MONTENEGRO

Mr. MCCONNELL. Mr. President, I move to proceed to executive session to consider Calendar No. 1, treaty document No. 114-12, Protocol to the North Atlantic Treaty of 1949 on the Accession of Montenegro.

The PRESIDING OFFICER. The question is on agreeing to the motion. The motion was agreed to.

The PRESIDING OFFICER. The treaty will be stated.

The senior assistant legislative clerk read as follows:

Treaty document No. 114-12, Protocol to the North Atlantic Treaty of 1949 on the Accession of Montenegro.

CLOTURE MOTION

Mr. McCONNELL. Mr. President, I send a cloture motion to the desk.

The PRESIDING OFFICER. The cloture motion having been presented under rule XXII, the Chair directs the clerk to read the motion.

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 Treaties Calendar No. 1, treaty document No. 114-12, Protocol to the North Atlantic Treaty of 1949 on the Accession of Montenegro.

Mitch McConnell, Cory Gardner, Steve Daines, John Barrasso, Joni Ernst, Bob Corker, John Cornyn, Lindsey Graham, Jeff Flake, James M. Inhofe, Roy Blunt, David Perdue, John McCain, Pat Roberts, Tom Cotton, Jerry Moran, Mike Rounds.

Mr. McCONNELL. Mr. President, for the information of Senators, we will have the cloture vote on this treaty on Monday night at 5:30 p.m.

The PRESIDING OFFICER. The Senator from Massachusetts.

(The remarks of Mr. MARKEY pertaining to the introduction of S. 708 are printed in today's RECORD under "Statements on Introduced Bills and Joint Resolutions.")

The PRESIDING OFFICER (Mr. CASIDY). The Senator from Connecticut.

AMERICAN HEALTH CARE ACT

Mr. MURPHY. Mr. President, at this hour, we still don't know what the House of Representatives is going to do. They are amending and changing and modifying the reform of one-sixth of America's economy under the cover of darkness, trying to secure the votes necessary to fulfill a political promise. We await their decision as to how much havoc they wreak.

I wanted to come down to the floor today to address for a moment the exceptional process that is occurring right now, as we speak, in the House of Representatives and to talk about one of the reported changes they are considering before sending the product over to the Senate.

Just to review for a minute, Speaker RYAN likes to talk about his approach to healthcare as a three-pronged approach. Well, the Congressional Budget Office, headed by a gentleman hand-picked by the Republican House conference, agrees that it is a three-pronged approach; they just have a little bit different interpretation of those three prongs.

First, they say higher costs—15 to 20 percent spikes in premiums for everybody right off the bat and then dramatically higher costs, especially for older people, sicker people, and poorer people. If you are young and if you are relatively affluent and healthy, you may make out a little bit better under this proposal, but if you are not in that category, you are going to pay a lot higher costs and get less care.

This is the headline from the CBO report: 24 million people lose health cov-

erage. That is catastrophic. That is the total population of 17 U.S. States. We just kick them off health insurance without anywhere to go other than our emergency rooms.

Remember, all of this is in order to finance a giant tax cut for the rich. I had a chart up here yesterday that showed that in this bill, if you make zero to \$200,000, you get no tax cut, but if you make over \$200,000, you get a nice, healthy tax cut. It could be up to \$7 million on average for some of the wealthiest taxpayers. So there will be higher costs for everybody, except for maybe a very small slice of the population, but with less care. I mean, it is a nightmare when it comes to the number of people who lose care under this bill, all in order to finance tax cuts for the wealthy.

That is the background on what TrumpCare is and what the American Health Care Act is. People hate it. I mean, people hate it. There is a new poll out by Quinnipiac University that shows stunning numbers. The approval numbers for this bill are under 20 percent.

Republicans kicked the living you know what out of the Affordable Care Act, and they never got its approval ratings down to under 20 percent, as has happened to the American Health Care Act in its third week of existence. That is pretty impressive, for 18 percent of Americans to approve of a bill that has only been out there for a few weeks. And it is not because they don't know anything about it; over 50 percent of Americans don't like it, 18 percent support it, and 56 percent don't support it. Across demographic groups, across age groups, everybody hates this thing because they get it. They are not dumb. They know that this is taking healthcare from them and passing along higher costs to them in order to finance a tax cut for the rich. It is pretty simple. People really didn't need a lot of time to understand it.

Republicans in the House know that as this thing hangs out there, it is getting less popular. It is hard to get less popular than 18 percent. Those are tough numbers to do worse than. The reason Republicans are racing this bill through the process is because they know how deeply unpopular it is because they know it is a scam. They know it is essentially just taking healthcare from Americans and forcing them to pay more in order to finance a tax cut for the rich.

What is happening today in the House is they are blowing up their rules in order to push a bill through that no one will have looked at. It is possible that they are going to file a gigantic reform to the entire American healthcare system and then call a vote on it within hours. Come on.

In 2009 and 2010, Republicans were blistering critics of Democrats, who they said were forcing the Affordable Care Act through the process too quickly. But in 2009 and 2010, the House held 79 bipartisan hearings and mark-

ups on the health reform bill over the period of an entire year. House Members spent nearly 100 hours in hearings, heard from 181 witnesses from both sides of the aisle, considered 239 amendments, and accepted 121 amendments.

This bill was introduced 2 weeks ago. The first time the American public ever looked at it was 2 weeks ago, and the House is rushing it through today. Two weeks. Fourteen days. Twenty days. Not a year. Not 79 hearings. Not 100 hours of hearings. And we are talking about bringing it up before the Senate for a vote next week, with 20 hours of debate on a reordering of one-sixth of the American economy.

It is really extraordinary how this bill is getting jammed through the process because Republicans know that every day it hangs out there, more people figure out what it is—a massive transfer of wealth from regular, ordinary Americans, through less care and higher costs, to the very rich and also insurance companies and drug companies, which get a big tax cut.

On today's modification of the bill, the talk today is that in order to make the bill a little bit meaner and a little bit crueler, the House is going to remove from the underlying law the requirement that insurance companies cover a basic set of what are called essential benefits. This change is being demanded by the very, very conservative wing of the House Republican conference. They call themselves the Freedom Caucus. This is a group of sort of the most radical Members in the House of Representatives. They are demanding that these essential healthcare benefits be stripped out of the law in order to get their votes.

Let's talk about what these essential healthcare benefits are. Basically the law now says that if you are offering an insurance plan and you want to call it health insurance, then you have to actually offer to cover healthcare. So the essential healthcare benefits—what every plan today has to offer in order to be able to call itself insurance in this country—are ambulatory patient care, which means outpatient care, emergency care, hospitalizations; pregnancy, maternity, and newborn care; mental health and substance abuse care; prescription drugs; rehabilitation if you get injured; lab services; tests; chronic disease management—management for diabetes or heart and liver conditions; and pediatric services, services for kids. That is it. Those are the essential healthcare benefits.

Frankly, if you are buying a health insurance plan, wouldn't you expect that it would cover your emergency care if you were to go to an emergency room? If you are buying healthcare in this country, what good is it if it doesn't cover a hospitalization when you get very sick? If you are buying an insurance plan in this country, don't you think it is going to cover your kids when they need basic pediatric services?

So what is happening now is something different from healthcare reform in the House of Representatives. What is happening now is a radical rethink of what healthcare insurance is. If all of a sudden health insurers don't need to cover the cost of your hospitalizations, don't need to cover mental illness at all, don't need to cover addiction coverage at all, then is it really insurance any longer? If it is not covering that list of things, what is it covering?

CBO has an answer for this. CBO says that if there is an insurance plan that doesn't cover this list of benefits, they won't count it as insurance. So when they are giving you the numbers of people who will have insurance or not have insurance after this bill, the non-partisan Congressional Budget Office says: We don't really count it as insurance if it doesn't cover basic stuff, such as hospitalizations, outpatient services, prescription drugs, and pediatric services.

So what is happening now in the House of Representatives is really a radical rethink of healthcare insurance. Under the law they are contemplating passing, healthcare insurance wouldn't need to cover anything. You could buy an insurance plan, pay your premium, and then be told that it doesn't cover your kid when he gets diagnosed with schizophrenia, that it doesn't cover your daughter when she gets in an accident and has to go to the emergency room, that it doesn't cover your spouse when they get really sick and are hospitalized for 3 days. What kind of coverage would that be any longer if it didn't cover that list of things?

Let's be honest. This would be a massive transfer of cost to individuals. The No. 1 prong of TrumpCare is higher costs. If insurance companies don't need to cover any of these things anymore but you still have to buy them, then it is just a massive shift of costs to individuals because, remember, TrumpCare penalizes you if you don't buy insurance.

The Affordable Care Act did the same thing, admittedly. The Affordable Care Act said: If you don't buy insurance, you are going to pay a penalty. But that is why the Affordable Care Act said that insurance has to really be insurance. It has to cover stuff because if we are going to require you to buy it or we are going to penalize you if you don't buy it, then insurance should really be insurance.

Well, TrumpCare penalizes you if you don't buy insurance. You would pay a massive penalty. For a lot of people, the penalty could be \$5,000 if they don't buy insurance. But now the change they are considering in the House of Representatives means the insurance product you will be forced to buy won't cover diddly.

By the way, when your insurance company doesn't cover it and you have to pick up the cost, it is going to cost you way more money. Everybody has probably seen a bill from a hospital.

Let's say you had to go in and get a colonoscopy. You get your bill, and you always sort of scratch your head because you see two numbers—you see the number the hospital bills and then you see the number your insurance company pays. Often, the number the insurance company pays is like one-third of what that hospital billed. Why is that? It is because the insurance company is negotiating with the hospital on behalf of thousands of patients, so they get that price way, way down. The insurance company only pays a fraction of the cost that is billed. If you don't have insurance coverage for it, if all of a sudden it is not a benefit in your plan because the American Health Care Act told insurance companies they didn't have to cover a hospitalization, then you will pay that higher price. You don't get the insurance company discount. You will pay that higher number. That is going to bankrupt people.

The families in my State, when their child gets hooked on heroin, they are going to find a way to pay for that care so that their child doesn't become another statistic, another one of the 900 who died in my State last year from overdoses. They are going to do everything possible to get that child care for that addiction. They will mortgage their house, they will sell their house, they will drain their savings account, they will sell off every possession they have to make sure their child does not die from an overdose and so that child gets the care they need. If their insurance company won't cover it, then they will do everything necessary to cover it, and you will have a rapid increase in the number of people whose lives are ruined, who go bankrupt because of their medical costs—something that doesn't happen right now because the Affordable Care Act gives you real subsidies to afford care. It gives you real help to be able to buy insurance, and it requires that insurance companies actually provide you with insurance.

This is an extraordinary thing that is happening in the U.S. House of Representatives right now. Nobody likes this bill. Healthcare experts think it is a joke. The American public has roundly rejected it. It is getting meaner and crueler every day in order to round up the votes necessary to get it passed. Why? Because this bill is not about solving any problem in the healthcare system. It doesn't solve a single problem. Again, except for this narrow group of younger, healthier, affluent people whose premiums will be a little bit less, everybody else is worse off. It only solves one problem, a political problem—the promise that the Republicans made to repeal the Affordable Care Act. But they didn't spend any time thinking about how to actually do it. So they are stuck now with an awful bill that nobody likes, that doesn't solve a single problem, and that is getting meaner and meaner every single day.

It was bad enough, and now this bill is frankly getting into some really rad-

ical territory—talking about totally rethinking insurance and letting insurance companies offer you a product that covers nothing and then it requires you to buy it. Think about that. We are going to require you to buy insurance, but the insurance isn't going to cover anything. TrumpCare, the American Health Care Act—whatever you want to call it—has three prongs: higher costs, less care, and tax cuts for the rich.

We will have an opportunity here in the Senate to get this right. As to the House of Representatives, I don't know if they are going to pass this. I don't know if it is going to fall apart. But we will have a chance to get this right. Republicans and Democrats coming together, we can admit together that there are still a lot of things that are wrong in our healthcare system.

In the Affordable Care Act, there are some good parts of it, but other parts need improvement. We can come together and decide to tackle this problem—the high drug costs, whatever it may be—together and reject this partisan, rushed approach in the House of Representatives. It does nothing except give us higher costs and less care in order to finance tax cuts for the wealthy.

I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

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

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

RUSSIA

Mr. REED. Mr. President, I rise today to discuss the deep and growing concerns about Russia's interference in the United States' 2016 Presidential election and the implications of Russia's broader malign activities for our national security.

On Monday, we learned from FBI Director Comey that there is an investigation into Russian interference in the 2016 Presidential election and whether associates of then-candidate and now-President Donald Trump were communicating with Moscow. It is absolutely essential that Congress and the American people get clear and comprehensive answers on, first, what happened; second, what are Russia's strategic goals and intentions for further interference in democratic processes here and in Europe; and third, what we need to do to counter this threat going forward. That is why I have repeatedly called for an independent, transparent, special counsel to investigate the legal aspects of Russian efforts to influence our election and a bipartisan select committee within the Senate to look at all aspects of Russia's destabilizing activities here and around the world.

I am concerned that the politicization of the issue of Russia's