

I commend the Senate and its leadership for working together to resolve their potential differences and creating this opportunity for us to have a debate, a discussion, both on public policy—that I think is important to the security of the world—and the safety of Americans here in the United States.

I am here, in part, to express my support for the Countering Iran's Destabilizing Activities Act, the legislation we addressed today. It permits our government to target those individuals and institutions responsible for a foreign policy that puts American lives at risk and undermines the security, particularly in the Middle East, but really of the globe.

The theocratic, autocratic regime's survival in Iran depends currently on the human rights abuses and political oppression. Eight years after the Green Movement's protests, the group's leaders remain under house arrest. Members of that movement were tortured. Still, today, Iranian Americans are unreasonably detained without hope for release in Iran. The Iranian regime's survival depends further on its control of its economy. When it was brokered, proponents of the Joint Comprehensive Plan of Action argued it would provide economic benefit to the Iranian people.

So when President Obama negotiated—and this Congress, this Senate, failed to reject the JCPOA—one of the arguments about its benefits is that everyday Iranians would enjoy greater economic opportunity. Instead, a recent Reuters study shows businesses directly tied to the Supreme Leader and the IRGC are the main beneficiaries of those changes in our relationship with Iran. Despite renewed economic growth, Iran's unemployment rate is estimated to be as high as 12 percent, and that figure could be as high as almost 30 percent among Iranian youth.

Survival of Khamenei's regime depends on stoking hatred of America as a way to whip up support. Iran uses small boats to swarm American Navy ships protecting the free navigation of the Strait of Hormuz in the Persian Gulf. This is disturbing for a number of reasons, but the importance of that Strait's role in global economy certainly is one of them. In addition, it is linked to scouting soft American targets for terrorism.

So we continue to see bad behavior, threatening behavior by the Iranian government toward the United States and our global interest in the Strait of Hormuz and the suggestion that Iran is preparing and looking for opportunities for terrorist attacks against the United States and its allies in the Middle East.

Last week, two Hezbollah operatives were arrested here in the United States. They were doing surveillance on targets in New York and on our embassies as well in Israel and Panama. Two terrorism specialists, Dan Byman of Georgetown and Scott Stewart of Stratfor, tweeted in reaction to this news that this could be a case of Iran

sending us an ominous message; that Iran can play the terror card if it wants to. If that is indeed the signal Tehran is sending to us, it is important—it is imperative, in fact, that we send a message of our own that no civilized country resorts to planning to kill innocent civilians. The legislation we passed today informs that regime that the JCPOA does not provide impunity for Iran to make such plans.

Iran threatens its neighbors with its ongoing ballistic missile development, which was not part of the JCPOA. Hezbollah is armed with tens of thousands of rockets, threatening Israel's security. This is the same group which has been instrumental in propping up the Assad regime in Syria and which is responsible for the deaths of hundreds of thousands. The head of the IRGC forces was seen on the Syria and Iraq border just this past weekend. We know Assad's regime would have not survived without Iran's continued financial and military support. Again, this legislation underscores the Senate's belief that the Iranian regime must not be allowed to continue conducting and destabilizing activities under the shield of the JCPOA.

I was an opponent to the JCPOA, but today's actions are unrelated to undermining that agreement, which is now in place. They are designed to hold back further activities by the Iranian regime against America and its interests. It is really a requirement that Iran act within the nation-states' Code of Conduct—the normal behavior of a country around the globe.

Previous administrations, in my view, failed to challenge Iran on way too many fronts. With this legislation, the Senate is intent on pushing back on Iran's adventurism in the Middle East and beyond. By imposing appropriate sanctions and requiring the Secretaries of State, Defense and Treasury, as well as Director of National Intelligence, to formulate a coherent strategy to counter Iran's influence in the region, we say to the regime that their activities will be countered every step of the way.

This legislation plays a part in doing what Dan Byman, the professor—the terrorism expert—testified to our House counterparts last month. His words were to "highlight the costs of Iran's adventurism to ordinary Iranians to raise domestic awareness of, and discontent with, the regime's foreign policy."

There remains more that can be done to challenge Iran and constrict its resources. Many amendments were filed to strengthen this legislation that were not ultimately considered. One of those was mine. Last year, the Obama administration announced it would pay \$1.7 billion to Iran in an effort to settle a longstanding financial dispute. Transferring cash to a leading state sponsor of terror was a bad idea when the Senate considered the 2015 nuclear agreement, and it remains a bad idea, a terrible idea today.

The amendment I offered to today's legislation would limit the President's ability to transfer funds to Iran. This amendment directs that the U.S. Government puts justice for American victims of Iranian terrorism ahead of the payments to the Iranian's regime. No administration should transfer funds related to the Iran-United States Claims Tribunal without first requiring settlement of all damages already awarded in judgments made in the U.S. courts against Iran for their terrorism crimes against our own citizens. Paying our own citizens from that fund before any money is transferred to the Iranian regime makes sense, common sense, and it is surrounded by the sense of justice and right.

While my amendment was not one of those considered by the Senate yet, we will be introducing this concept as freestanding legislation in the near future.

I know sanctions alone will not change Iran's regime's behavior. Incidentally, we need our allies and friends to join us in this sanction effort. Yet we know the Countering Iran's Destabilizing Activities Act remains an important bill to impose costs on the regime in Iran and, hopefully, to encourage more of the discontent we saw during the recent elections. Perhaps there will rise an equivalent to the 2009 Green Movement that offers Iranians one more opportunity to throw off the yoke of theocratic rule of tyranny and get the government they deserve—one that respects their rights and has the desire to coexist peacefully with its neighbors.

I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The bill clerk proceeded to call the roll.

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

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

HEALTHCARE LEGISLATION

Mr. WYDEN. Mr. President, I want to start my remarks on healthcare and what is ahead over the next couple of weeks in this way.

For almost 7 years before I got elected to the Congress, I was the director of the Oregon Gray Panthers, which is a senior citizens group, and I ran a legal aid office for the elderly. I made the judgment then that healthcare was and always would be the most important issue. I made that judgment because I have always felt that if you and your loved ones do not have their health, then pretty much everything else does not matter.

The Presiding Officer of the Senate, of course, is a skilled healthcare provider and knows a lot about these issues, and I am really going to use that as my reference point today in making the judgment that having quality, affordable healthcare for your families and yourselves is paramount to everything else.

My view is that the proposal being considered here in the Senate of cutting hundreds of billions of dollars in funds from the social safety net—the Medicaid Program, which is the lifeline for seniors and kids with special needs and for the disabled—is going to put at risk the health and well-being of millions of Americans if it is passed.

It is why I want to take some time to explain what it actually does so that people all across this country will be in a position to make their voices heard—to speak up, to do their part—so that when this debate comes to the floor of the U.S. Senate, as I believe it will in the next couple of weeks—and it moves very quickly—every Member of this body will have heard, loud and clear, what Americans think of this proposal, and I do not think that that assessment is going to be too kind.

Now, the House passed their version of TrumpCare by a razor's edge, and to put it in a pleasant way, over here, Senators looked at it and said: No way. No thanks. My colleagues in the Senate majority said: We are throwing this bill out, starting fresh, and we are going to do it right. So I am going to start with where that process got lost.

The majority convened a special working group made up of 13 Republican Senators, all of them men, and it turns out, based on comments that have been reported, the Senate bill isn't going to be all that different from what the House was talking about. So Republicans in the Senate are pretty much picking up where the House left off on TrumpCare, and the legislation that is being crafted stays hidden—stays behind closed doors and in a position where, for example, if you are a Democrat on the Finance Committee, you don't even know what is in it. It is not going before committees. It will not be put forward for amendment in a markup. With barely any public notice, the bill will hit this floor for 28 hours of debate—that is that.

I will just briefly describe a session we had in the Finance Committee this week where there was discussion from the other side of the aisle that maybe there was a big partisan divide with respect to healthcare. I listened a bit. Finally, I said: I don't know how you can have a partisan divide about a bill that you can't read.

I am the senior Democrat on the Finance Committee. The Finance Committee is the committee that has jurisdiction over hundreds of billions of dollars in payments for Medicare and Medicaid and the various tax credits that are part of the Affordable Care Act. This is the committee with the authority to address the management of hundreds of billions of dollars for those programs—Medicare, Medicaid, tax credits—and we see nothing. Not only have there been no hearings, we haven't seen anything. Something has been sent to the Congressional Budget Office. Who knows the answer to that. We haven't seen that either.

So that is the process that would dictate a radical transformation of one-

sixth of the American economy—the American healthcare system—affecting millions and millions of Americans.

That is what we are looking at right now for the next couple of weeks, and it is pretty different than what happened during the Affordable Care Act.

I want to focus on a few points just with respect to that. The first is especially important, as I have said, to the Finance Committee that deals with Medicare and Medicaid and these crucial aspects of healthcare in America. The Senate Finance Committee has been cut out of this process. The chairman, Senator HATCH, I, and 24 other committee members—there has been nothing for us to examine as a group to do what the Finance Committee tries to do best, which is to work in a bipartisan way. That is what we have done so often in the past, which is to sit down and try to take the good ideas that come from both sides, from the staff who knows healthcare inside and out, with years of experience working on healthcare matters.

I have a little bit of a special interest in this because I wrote something called the Healthy Americans Act before the Presiding Officer was here in this body. Eight Democratic Senators and eight Republican Senators joined together in comprehensive healthcare reform for the first time—for the first time ever before.

We have done a lot of good work on issues that represent the big challenges ahead. We know, for example, Medicare today isn't the Medicare of 1965, when it was about broken ankles, Part A or Part B, a bad case of the flu. Today Medicare is about chronic illness—diabetes and heart disease and strokes and cancer. We have worked on that in a bipartisan way. Bipartisanship is what the Finance Committee is all about.

So in the runup to the Affordable Care Act, we held more than 50 hearings, roundtables, walk-through sessions. It wasn't exactly exciting. We always used to say: If you are having trouble sleeping, come by for a while and you will be knocked out in a matter of minutes. But that is where you do the hard work of legislating.

When the Finance Committee finished the drafting process, the legislation sat online for 6 days before we went through the formal committee consideration—what we know up here as a markup. A total of 564 amendments were posted online before the markup began for all to read. The markup lasted 8 days. There were 130 amendments in the longest markup in 22 years. Two dozen Republican amendments were adopted, and the bill passed with a bipartisan vote.

We all got pretty sick of the hearing room by the time it was over. I will just read a quote from Senator GRASSLEY with respect to the Finance Committee markup of the Affordable Care Act. Senator GRASSLEY is the chairman, of course, of the Senate Judiciary Committee and the former committee chairman of the Finance Committee,

and a very careful, thoughtful legislator. He said: "This was the most open and inclusive process the committee has undertaken in its history. . . ."

He went on to say: ". . . I believe, since I have been on the committee."

So that is not a Democrat. That is Senator GRASSLEY, the chairman of the Senate Judiciary Committee. I am sure Senator MURRAY has similar accounts of the process under the late Senator KENNEDY. That legislation was online for days as well.

That is what the legislative process is supposed to look like. It is a process that starts from the bottom up, and it is out in the open. Sunlight has always been the best disinfectant. You get hearings. You get study. You get debate. You marry the best ideas of both sides.

I have always felt that bipartisanship is not about taking each other's lousy ideas; bipartisanship is about taking each other's good ideas, but because of the process the Republican leader is insisting on, that is not what the majority has on offer. What is in the works is hidden away so the public and Americans across this country who might be sitting in a coffee shop and would like to pull up a proposal on their laptop, they can't do it, and there aren't any hearings on what might be going in the bill as well. That, in my view, is the wrong way to build a sweeping, massive proposal like this, which, for so many of those who are walking on an economic tightrope, balancing their food against their fuel and their fuel against their medical care, this isn't some abstract issue for them. It is a matter of life and death.

This proposal is built around an attack on Medicaid. The last version of the bill that anybody has been allowed to see cut the program by more than \$800 billion, but there haven't been any hearings on what that would mean for the 74 million Americans who get their healthcare coverage through Medicaid. Nobody has been brought before the Finance Committee to talk about how you would not endanger the Medicaid nursing home benefit with this proposal, and that benefit pays for two out of three nursing home beds in America. There hasn't been a hearing examining the effect of the staggering implications of Medicaid cuts on 37 million kids enrolled in the program, particularly what it means for kids with disabilities and kids in special education classes.

At home in Oregon, when we had town meetings and roundtables on it, I just brought up—just raised the issue very gently—about the prospect of those special needs kids being hurt with this proposal, and the room just broke out in sobs.

There haven't been any hearings on how much worse the opioid epidemic will get in States across the country when people enrolled in Medicaid lose access to treatment for mental health and substance abuse disorders. Just this morning, I talked about a

brandnew idea that seems to be picking up some interest in the majority about basically coming up with kind of a separate way to fund the coverage for opioids. Instead of it being a guarantee of being able to get access to services, it would sort of be a separate program, which also is not in line with sensible healthcare policy. As the Presiding Officer knows, so often those addicted to opioids have multiple conditions. In other words, if you are a young person who is addicted to opioids, you might well need mental health services. If you are an older person who is addicted to opioids, you might need services relating to chronic illness.

So I want everybody in those States across the country—particularly in the Midwest and in the industrial Northeast—although opioid addiction has hit this country like a wrecking ball from Portland, OR, to Portland, ME. There are a lot of people paying attention to what is going to happen with respect to coverage for those addicted to opioids, and based on this proposal I have been reading about that is being floated, this is a prescription for trouble for those trying to come back from opioid addiction.

Then, I want to mention the bill's provisions on preexisting conditions. When the Affordable Care Act was written in committee, the bedrock guarantee of protection against discrimination for those who have preexisting conditions and protecting those who have preexisting conditions with airtight, loophole-free protection—that was at the heart of the Affordable Care Act. My view is TrumpCare takes a jackhammer to that bedrock protection, cracking open loopholes that benefit insurance companies. Americans are aghast that their elected representatives would support the idea. I know that because I have had 46 townhall meetings in my State this year, and I hear about it at nearly every one.

So one would think this would generate a lot of interest in the Senate Finance Committee—the committee with jurisdiction over Medicaid, for example—because there are a lot of those folks who have preexisting conditions. No discussion. Zero discussion—zero—of any proposal that the Senate could be considering over the next couple of weeks that rolls back protections on preexisting conditions.

I gather the House bill just basically takes the waiver process, which in the Affordable Care Act was designed to let States do better; in the House, they let States do worse—considerably worse—and one of the most objectionable features is the States can get a waiver and unravel some of those strong protections for people with preexisting conditions.

Now, if the healthcare changes I have mentioned aren't bad enough, TrumpCare also takes hundreds of billions of dollars of healthcare from needy and vulnerable people and, in effect, hands it in tax breaks to the most

fortunate. Nobody has come before the Senate Finance Committee with authority over taxes to explain why the Congress ought to raid healthcare programs for the vulnerable to fund tax cuts for the fortunate few.

Our committee—the chairman and I, along with all the Democrats and several of the Republicans—has been prevented from legislating out in the open on this proposal because the Senate TrumpCare plan has essentially been pushed out of view. It is clear that this isn't just sidestepping the Finance Committee. The public—the American people—have been cut out of the process when healthcare policy that will affect millions for years to come is being written here.

The majority leader has said he pretty much is not interested in input from Democrats. The Republican healthcare plan is going to move by reconciliation. That is a Washington word, folks—when you are at a coffee shop, nobody is talking about reconciliation, but it is basically our way or the highway. We are going to do it our way, and that is that. It is the most partisan road you can go down in the Senate. It relies on moving as quickly as possible with the least possible sunlight.

As far as I can tell, the Senate bill is going to be hidden until virtually the last minute, at which point it will come straight to the floor for a very short, abbreviated debate.

That is not what happened when the Affordable Care Act came up. The Senate spent 25 consecutive days in session on healthcare reform, the second longest consecutive session in history—week after week, spirited debate, mid-November into late December, vote after vote after vote. In total, the Senate debated the Affordable Care Act for nearly 220 hours. That kind of extended give-and-take from both political parties you just can't have under this partisan “our way or the highway” approach known as reconciliation.

When the Senate plan hits the floor, there will be 20 hours of debate before time expires and the final votes are cast. That is it. That is it. We won't have seen a bill until the last minute, and then one-sixth of our economy is going to be handled and framed for decades to come in a short and regrettably partisan debate.

I have said from day one that the Affordable Care Act is not perfect. No major piece of legislation ever is. For major legislation to work and for it to last, it has to be bipartisan. That is why I mentioned that I put in a bipartisan bill—eight Democrats and eight Republicans. But you don't get it exactly your way. So I was very glad when the Affordable Care Act took that portion of our bill—the portion of the bill that had airtight, guaranteed protection for Americans from discrimination when they had preexisting conditions.

The reason we felt it was so important—the 16 of us, eight Democrats and eight Republicans—is that if we open

up the opportunity for discriminating against people with preexisting conditions again, we take America back to the days when healthcare was for the healthy and the wealthy. That is what happens if you allow that discrimination. If you are healthy, there is no problem. If you are wealthy, there is no problem, either. You can just write out the checks if you have preexisting conditions.

The process the Senate is headed down now is as partisan as it gets. Unfortunately, what Senate Republicans are doing now makes what the House was up to almost transparent.

I am going to close here with just one last comment. Now is the time for the American people to get loud about healthcare—really loud—because the well-being and health of millions of Americans is at stake here in the Senate over the next 2 weeks. For older people who could need nursing home care, for seniors who aren't yet eligible for Medicare who are between 55 and 65 and who could face huge premium hikes, for the millions who work for employers who thought they were safe, the House bill removes the caps on the out-of-pocket expenses they have. If somebody gets cancer in America, they bust those caps in a hurry. Yet that is what the House is willing to do, and I don't see any evidence the Senate is willing to change.

This debate didn't end when the theatrical production on the South Lawn of the White House took place a few weeks after the vote in the House of Representatives. My hope is—and I sure heard about it from Oregonians last week when we had townhall meetings across the State; there is concern, there is fear, and there is frustration about why they can't be told what is in this bill—that there is still time for Americans to make a difference because political change doesn't start from the top and go down. It is bottom up. It is not top down. It is bottom up. There is still time for the American people to be heard and to make sure their Senator understands how they feel about this, what is at stake, and, in particular, to get an explanation about why they can't be told now what is in this bill.

I yield the floor.

The PRESIDING OFFICER (Mr. BLUNT). The Senator from Texas, the majority whip.

PROTECT OUR CHILDREN ACT OF 2017

Mr. CORNYN. Mr. President, I am glad to see my friend from Connecticut, Senator BLUMENTHAL, on the floor because last week the Senate Judiciary Committee reported the PROTECT Our Children Act, which helps protect children across the country from exploitation over the internet.

This is a bipartisan bill, not surprisingly so because last time this legislation passed, originally back in 2008, it