

family to have to watch this bill proceed—either the House bill that was passed or the Senate bill which is in formation right now. For any family who has the benefit of Medicaid and has a child with a disability to in any way be anxious or uncertain because of what might happen here, I think is an insult to them and to our values as Americans.

We are a great country. We can make sure children with disabilities have the benefit that comes from the early periodic screening and diagnosis, preventive care, the quality care that comes from services provided by Medicaid for kids with disabilities. We are a great country. We can pay for that and still be a growing economy, still have the greatest military in the world, still have the strongest GDP in the world. We can do all of that and still take care of the children.

I guess some believe the only way to prosperity is to say we have to substantially cut back on Medicaid, to the point where 14 million Americans lose their coverage over 10 years, but we still, at the same time, have to give tax cuts to the very wealthy. One estimate showed the original House bill—the one that didn't get a vote but was substantially similar to the one that did get a vote—the first bill gave to 400 Americans a tax cut of some \$7 million each. How does that make the country stronger when you are cutting back on Medicaid and giving gross substantial tax cuts to people who already are worth hundreds of millions of dollars or maybe even billions of dollars? I don't see how that moves the country forward to shortchange folks on Medicaid, especially if it were to adversely impact a child with a disability.

We mentioned all of those impacts, but I think it is especially devastating when it gets down to an individual family. I talked earlier about Rowan Simpson whose mom wrote to me months ago. I had the chance to meet Rowan and his mom and dad just last week for the first time in person, but the idea that Pam Simpson—or any parent—would be at all uncertain or worried about what would happen here in the next couple of days or weeks is really an insult to who we are as a people.

I hope those who are behind closed doors making decisions as we speak—maybe they are done for the day now, but I hope they will be thinking about Rowan and his mom and their family.

I mentioned the overall impact of Medicaid on children. In particular, we know the Medicaid Program, of course, in addition to covering children with disabilities, covers adults with disabilities as well. In my State, by one estimate, it is over 720,000 people. Across the country, in 2015, there were 15 million people with disabilities who were Medicaid beneficiaries. Through Medicaid, those 15 million people receive assistance with their healthcare. They get the benefit of durable medical equipment, such as wheelchairs or as-

sistive speaking devices. They get long-term supports for daily living, such as personal care attendance because of their disability. So Medicaid is now the primary payer for healthcare services for those with disabilities. It is also the primary payer for long-term supports and services that help people with disabilities live independent lives.

In many cases, these long-term care supports and services also make it possible for a person with a disability to hold down a job because of the support they get from Medicaid.

We know that in 2014, across the country, the average spending for a person with a disability enrolled in Medicaid was a little more than \$19,000. In Pennsylvania, it was a little more than 18,300. The average annual growth in enrollee spending for persons with a disability between 2000 and 2011 was 4.5 percent. In my State, it is a little more than that almost. It is almost 5.7 percent, and we have seen the outline of a proposal that would limit that annual growth to about 2.4 percent. I would hope those who are working on the Medicaid provisions would take into account the reality of what it costs to provide help to someone with a disability and not come up with some arbitrary number to cap or limit what an individual with a disability would have available to them, especially by way of Medicaid or otherwise. They are dependent upon and have a right to expect that kind of healthcare would continue to be provided.

We will see what happens. I know those who are behind closed doors have a sense of those numbers. I hope they would be very determined to make sure no one with a disability is worse off as a result of their efforts, but that is the reality people with disabilities live with. I think when we consider what some families are up against right now, many families have just barely come out of the last recession. Some families lost their home, some families lost their home and their job or even if they lost a job and have since recovered because they are employed or partially recovered, sometimes the job they have isn't the job they had prior to the recession.

I can only imagine what it is like to have the kind of economic stress some live with because they have lost a job or the job they have now doesn't pay what their old job paid. On top of all that, if your son or daughter or someone in your family has a disability and the only thing that has kept you above water or allowed you to get from one day to the next to make ends meet is the availability of Medicaid for that individual and the family who needs that kind of help—we will see what the bill drafters come up with. Every indication so far has been very negative and very much adverse to the interests of those families—those millions of families who depend upon Medicaid for basic healthcare, especially the basic healthcare that would be connected to a disability, whether that disability is

a physical disability of one kind or another or whether it is a disability because that child or adult is on the autism spectrum or whether it is a child with Down syndrome who is dependent upon Medicaid or is dependent upon some other healthcare program that would be adversely affected.

We can debate the outlines and the broad numbers of this legislation, but what I hope would not be up for debate is that those who now have the benefit of Medicaid because of a substantial burden in their life—meaning a disability because of circumstances that require one individual to have the benefit of long-term care, where the family has spent down their assets to such an extent that only Medicaid can allow that loved one to get into a nursing home—I would hope that it would not be much of a debate that we should continue to help those families and those individuals.

At a minimum, I think we can agree between the two parties that vulnerable Americans who depend upon Medicaid and other healthcare programs will be protected. I think that is something on which both parties should be able to agree. Unfortunately, the House bill in no way agreed with that assertion. That is why it was particularly objectionable, and that is why you have an array of organizations across the country that came out against the bill, those who have experience delivering healthcare to the vulnerable, those who have experience making sure people with disabilities are given that kind of help and that kind of care. If the Senate bill is substantially similar to the House bill, those with disabilities will be substantially and adversely and, I am afraid, irreversibly impacted to such an extent that we wouldn't be the same country we are today if those individuals lost their healthcare and lost the benefit of those healthcare services.

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

#### ADJOURNMENT UNTIL 10 A.M. TODAY

The PRESIDING OFFICER. Under the previous order, the Senate stands adjourned until 10 a.m.

Thereupon, the Senate, at 12:03 a.m., adjourned until Tuesday, June 20, 2017, at 10 a.m.

#### NOMINATIONS

Executive nominations received by the Senate:

##### DEPARTMENT OF DEFENSE

JOHN H. GIBSON II, OF TEXAS, TO BE DEPUTY CHIEF MANAGEMENT OFFICER OF THE DEPARTMENT OF DEFENSE, VICE PETER LEVINE.

##### EXPORT-IMPORT BANK OF THE UNITED STATES

SPENCER BACHUS III, OF ALABAMA, TO BE A MEMBER OF THE BOARD OF DIRECTORS OF THE EXPORT-IMPORT BANK OF THE UNITED STATES FOR A TERM EXPIRING JANUARY 20, 2021, VICE LARRY W. WALTHER, TERM EXPIRED.

##### FEDERAL DEPOSIT INSURANCE CORPORATION

JAMES CLINGER, OF PENNSYLVANIA, TO BE A MEMBER OF THE BOARD OF DIRECTORS OF THE FEDERAL DEPOSIT INSURANCE CORPORATION FOR A TERM OF SIX YEARS, VICE JEREMIAH O'HEAR NORTON, RESIGNED.

JAMES CLINGER, OF PENNSYLVANIA, TO BE CHAIRPERSON OF THE BOARD OF DIRECTORS OF THE FEDERAL DEPOSIT INSURANCE CORPORATION FOR A TERM OF FIVE YEARS, VICE MARTIN J. GRUENBERG, TERM EXPIRING.

EXPORT-IMPORT BANK OF THE UNITED STATES

SCOTT GARRETT, OF NEW JERSEY, TO BE PRESIDENT OF THE EXPORT-IMPORT BANK OF THE UNITED STATES FOR A TERM EXPIRING JANUARY 20, 2021, VICE FRED P. HOCHBERG, RESIGNED.

DEPARTMENT OF COMMERCE

MICHAEL PLATT, JR., OF ARKANSAS, TO BE AN ASSISTANT SECRETARY OF COMMERCE, VICE STEVEN MICHAEL HARO, RESIGNED.

EXECUTIVE OFFICE OF THE PRESIDENT

GREGORY DOUD, OF KANSAS, TO BE CHIEF AGRICULTURAL NEGOTIATOR, OFFICE OF THE UNITED STATES TRADE REPRESENTATIVE, WITH THE RANK OF AMBASSADOR, VICE DARCI L. VETTER.

DEPARTMENT OF STATE

GEORGE EDWARD GLASS, OF OREGON, TO BE AMBASSADOR EXTRAORDINARY AND PLENIPOTENTIARY OF THE UNITED STATES OF AMERICA TO THE PORTUGUESE REPUBLIC.

DEPARTMENT OF THE TREASURY

ISABEL MARIE KEENAN PATELUNAS, OF PENNSYLVANIA, TO BE ASSISTANT SECRETARY FOR INTEL-

LIGENCE AND ANALYSIS, DEPARTMENT OF THE TREASURY, VICE S. LESLIE IRELAND.

DEPARTMENT OF DEFENSE

ROBERT P. STORCH, OF THE DISTRICT OF COLUMBIA, TO BE INSPECTOR GENERAL OF THE NATIONAL SECURITY AGENCY. (NEW POSITION)

THE JUDICIARY

STEPHANOS BIBAS, OF PENNSYLVANIA, TO BE UNITED STATES CIRCUIT JUDGE FOR THE THIRD CIRCUIT, VICE MARJORIE O. RENDELL, RETIRED.