

so they have more flexibility to provide more Americans with the kind of affordable insurance options they actually want.

We agree on the need to stabilize the insurance markets that are collapsing under ObamaCare as well, and policies contained in the discussion draft will implement stabilization policies, so we can bring financial certainty to insurance markets and hope to Americans who face the possibility of limited or zero options next year under ObamaCare and ultimately transition away from ObamaCare's collapsing system entirely, so more Americans will not be hurt.

We also agree on the need to strengthen Medicaid, preserve access to care for patients with preexisting conditions, and allow children to stay on their parents' health insurance through the age of 26.

I am pleased we were able to arrive at a draft that incorporates input from so many different Members, who represent so many different constituents who are facing so many different challenges.

The draft containing the solutions I mentioned, along with many others, is posted online, and I encourage everyone to carefully review it. There will be ample time to analyze, discuss, and provide thoughts before legislation comes to the floor. I hope every Senator takes that opportunity.

Next week we expect the Congressional Budget Office to release a score. After that, we will proceed with a robust debate and an open amendment process on the Senate floor—a process I would encourage each of our 100 Senators to participate in.

When legislation does come to the floor, it will present Senate Democrats with another opportunity to do what is right for the American people. They can choose to keep standing by as their failing law continues to collapse and hurt more Americans, but I hope they will join us, instead, to bring relief to the families who have struggled under ObamaCare for far too long. Either way—either way, it is time to act because ObamaCare is a direct attack on the middle class, and American families deserve better than its failing status quo. They deserve better care, and that is just what we are going to continue to work to bring.

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.

EXECUTIVE SESSION

EXECUTIVE CALENDAR

The ACTING PRESIDENT pro tempore. Under the previous order, the Senate will proceed to executive session to resume consideration of the Billingslea nomination, which the clerk will report.

The legislative clerk read the nomination of Marshall Billingslea, of Virginia, to be Assistant Secretary for Terrorist Financing, Department of the Treasury.

RECOGNITION OF THE MINORITY LEADER

The ACTING PRESIDENT pro tempore. The Democratic leader is recognized.

HEALTHCARE LEGISLATION

Mr. SCHUMER. Mr. President, we are beginning to receive the first bits of information about the Senate Republican healthcare bill, which has until now been shrouded in absolute secrecy.

I can see why. Even as we continue to get more details, the broad outlines are clear. This is a bill designed to strip away healthcare benefits and protections from Americans who need it most in order to give a tax break to the folks who need it least.

This is a bill that would end Medicaid as we know it, rolling back Medicaid expansion, cutting Federal support for the program even more than the House bill, which cut Medicaid by \$800 billion.

Let me remind everyone in this Chamber, Medicaid is not just a health insurance program for Americans struggling in poverty, though that is an important and necessary part of it. Medicaid is increasingly a middle-class program. Medicaid is how many Americans are able to access opioid abuse treatment, Medicaid foots the bill for two-thirds of all Americans living in nursing homes, and Medicaid provides the cushion, particularly in rural areas, so hospitals can survive and give topnotch healthcare to all of us.

From what is reported, in just 3 short years under the Senate bill, Republicans will take millions off their Medicaid coverage, and then, starting in 2025, the plan will institute even more Medicaid cuts, and each year those cuts get deeper than the year before. Within 10 years of this new funding system, the cuts to Medicaid could total hundreds of billions of dollars above the more than \$800 billion the House bill already cuts from the program.

Every senior in America should read the fine print of this bill. It looks as if American seniors could be paying way more. Why do this? Looking at the bill, the answer is, because the Republicans want to give a tax break to the wealthiest Americans—those making over \$200,000 a year—and set themselves up to give these folks another, even larger tax cut in their tax bill.

Even though much of the early reporting says that the bill will keep certain protections for Americans with

preexisting conditions, the truth is, it may well not guarantee them the coverage they need by allowing States to waive essential health benefits. What the bill is saying to those Americans is that insurance still has to cover you, but it doesn't have to cover what you may actually need. It doesn't have to cover all or even most of your costs.

If you need treatment for opioid addiction, your plan may no longer cover it. If you are pregnant and need maternity care, your plan may have decided that is too expensive. The coverage that Americans with preexisting conditions actually need may well become either unaffordable or even nonexistent under this bill.

Simply put, this bill will result—

Mr. CORNYN. Mr. President, will the Democratic leader yield for a question?

Mr. SCHUMER. Not right now—at the end of my remarks.

Simply put, this bill will result in higher costs, less care, and millions of Americans will lose their health insurance, particularly through Medicaid. It is every bit as bad as the House bill. In some ways, it is even worse.

The President said the Senate bill needed heart. The way this bill cuts healthcare is heartless. The President said the House bill was mean. The Senate bill may be meaner.

The Senate Republican healthcare bill is a wolf in sheep's clothing, but this wolf has even sharper teeth than the House bill.

It is clear that Republicans know that cutting Medicaid will hurt so many people in the middle class, so many in my home State of New York. Republicans know that people want essential health benefits, so they have created a disguise by saying that these changes will not occur for a year. But, in reality, the Senate Republican bill is a wolf in sheep's clothing, only this wolf has even sharper teeth than the House bill.

We are potentially voting on it in a week—with no committee hearings, no amendments in committee, no debate on the floor, save for 10 measly hours, on one of the most important bills we are dealing with in decades. That brings shame on this body. We won't even know the full cost or consequence of the bill until CBO scores it, and that could take a few days more.

How can my friend the majority leader expect this body to fairly consider this legislation, prepare amendments, and debate it in 1 week with only 10 hours of debate? How can he expect his own Members to do the same? Many of them on the Republican side are learning the details of the bill the same way we Democrats are: They are reading it today.

Now, listen to what the majority leader had to say in 2009 when we were debating healthcare—his words:

This is a very important issue. . . . We shouldn't try to do it in the dark. And whatever final bill is produced should be available to the American public and to Members of the Senate, certainly, for enough time to

come to grips with it. . . . And we are going to insist—and the American people are going to insist—that it be done in a transparent, fair, and open way.

Is 5 or 6 days enough time for the American people and the Members of the Senate to come to grips with a bill that affects one-sixth of the economy and the lives of every American in this country? I don't think so, neither do the American people and neither do a whole bunch of Republican Senators.

Senator CASSIDY: Would I have preferred a more open process? The answer is yes.

Senator COLLINS: I don't think it gives enough time to thoroughly analyze the bill, but we will see when it comes out.

Member after Member—RAND PAUL, LINDSEY GRAHAM, JERRY MORAN, MARCO RUBIO, BOB CORKER—has repeatedly said that this process—in their words and now in mine—is unfair, it is truncated, and it is rushed.

For my dear friend the majority leader to say we are going to have an open amendment process is turning truth upside down. I would ask our leader, rhetorically, because I know the answer: Can we allow at least 1 hour on each amendment, not 2 minutes? Will we have more time than 10 hours to debate the bill? I hope so. But, if not, please don't call this an open and fair process. If you want to rush it through, admit the consequences.

The debate over healthcare has been fierce. We know that Republicans and Democrats had differences when we debated the Affordable Care Act. At least we had a debate. At least we had committee hearings and a process. More broadly than that, at least we Democrats were trying to pass a healthcare bill that helped more Americans afford insurance and tried to bring costs down and end some of the most egregious practices of the healthcare industry.

What is this bill—TrumpCare—trying to achieve? It seems designed to slash support for healthcare programs in order to give tax breaks to the very wealthy.

When the CBO score comes out, I believe it will verify that millions of Americans in this great country will be unable to afford insurance or the insurance they can afford won't cover the services they need.

Somewhere in America there is a family who takes a trip each Friday to visit grandma or grandpa at a nursing home, who sacrificed all of their savings to pay for their healthcare until they had no more savings and now rely on Medicaid to help pay the cost of long-term care in a nursing home.

Somewhere in America there is a father who is eaten up inside watching his son struggle with opioid addiction, who knows in his heart that his son will be able to go on and live a healthy and fulfilling life if he could only afford treatment to get him out from under this devastating addiction.

Somewhere in America there is a parent whose child has cancer, a mother

and father who stay up late at night worried that their insurance will either not be available or run out when the family needs it most.

In the America that my Republican friends envision with this healthcare bill, those Americans, and many more besides, might not get the coverage and care they need.

We live in the wealthiest country on Earth. Surely, surely, we can do better than what the Republican healthcare bill promises.

UNANIMOUS CONSENT REQUESTS—H.R. 1628

Now I have a unanimous consent request. I am going to have to delay my friend from asking questions until we finish our unanimous consent requests.

I ask unanimous consent that any substitute or perfecting amendment offered to Calendar No. 120, H.R. 1628, not be in order if the text of the amendment has not been filed at the desk and made available on a public website for at least 72 hours, along with an analysis by the Congressional Budget Office of the bill's budgetary, coverage, and cost implications.

The ACTING PRESIDENT pro tempore. Is there objection?

Mr. McCONNELL. Mr. President, reserving the right to object, my colleague Senator CORNYN was going to ask a question, which I will answer, which was that the minority leader is referring to a bill that he hasn't seen a copy of because it hasn't yet been released. So the speech we just heard was about a bill that he hasn't seen.

With regard to his unanimous consent request, I object.

The ACTING PRESIDENT pro tempore. Objection is heard.

Mr. SCHUMER. Mr. President, leader time.

The ACTING PRESIDENT pro tempore. The Senator has the floor.

Mr. SCHUMER. Mr. President, 142 pages thus far of this supposed bill have been printed online, and that is what I have used.

The ACTING PRESIDENT pro tempore. The minority whip.

Mr. DURBIN. Mr. President, several weeks ago the House of Representatives passed a bill to repeal the Affordable Care Act and to replace it. It was passed without hearings. It was passed without an amendment process, and it was passed before the Congressional Budget Office provided the traditional analysis that we count on before we take up a measure of such magnitude.

The measure passed with a party-line vote—all Republicans. Had two Republicans voted the other way, it would not have moved forward.

After it passed, the President of the United States decided to have a celebration at the White House. We saw him on television, gathering the Republican Members of the House of Representatives and celebrating the fact that this measure had passed and that, finally, they were going to repeal the Affordable Care Act.

But then the American people took a close look and the Congressional Budg-

et Office issued its analysis, and it turns out that 23 million Americans would lose their health insurance because of this Republican measure that passed the House of Representatives.

It turns out as well that there would be a dramatic increase in health insurance premiums for people between the ages of 50 and 64.

It turns out that in my State and many other States hospitals were in danger. The Illinois Health and Hospital Association says they would lose 60,000 jobs in Illinois with the dramatic cutbacks in Medicaid, endangering hospitals in rural areas and inner-city areas.

The facts started coming out about this repeal bill passed by the House of Representatives, and the President of the United States had a change of heart and announced to the American people that it was a mean bill—a mean bill. The President was right. It was mean legislation—mean to the millions who lost their healthcare, mean to seniors who would find their premiums going up dramatically, and mean to the people living in rural areas and small towns who count on those hospitals.

The President was right. It was mean.

Then, the responsibility shifts to the Senate. The majority leader, Senator McCONNELL, and his Republican followers had a chance to do a bill that was not mean. They had a chance to sit down on a bipartisan basis and to have the same process we used to create the Affordable Care Act.

That would have involved public hearings. We had 50 public hearings on the Affordable Care Act. It would have involved a real amendment process. The Affordable Care Act had 300 amendments. How many were offered by the Republicans? There were over 150 offered and adopted in a bipartisan process when we passed the Affordable Care Act. The American people got a good look at the bill. The Congressional Budget Office issued their analysis before we voted on it. We passed it, and I am glad we did, and I am proud of that vote.

But what happened in the Senate when it came to the Republicans? They went into secrecy. Thirteen chosen Republican Senators all sat in a room and wrote the alternative, or so we are told. They met in secret and never once had a public hearing, never once disclosed to the American people what was being debated, never once gave an opportunity for real bipartisan cooperation to strengthen our existing healthcare system—not at all.

So all we have at this moment is truly press accounts of what has been announced to the Republican Senate caucus, what they are going to get a chance to read and see. But it is enough to see that when it comes down to the basics, there is not much of a change between the House of Representatives' effort and the Senate effort.

You can put a lace collar on a pit bull, and it is still a mean dog.