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## Senate

The Senate met at 12 noon and was called to order by the President pro tempore (Mr. HATCH).

### PRAYER

The Chaplain, Dr. Barry C. Black, offered the following prayer:

Let us pray.

Gracious God, Ruler of all nature, Your strong right hand continues to sustain us.

Lord, remind our lawmakers of their accountability to You. Provide them with such a passion to please You that they will maintain a conscience void of offense toward You and humanity. In the flurry of legislative activities, may they not forget those on life's margins.

Lord, guide our Senators to perform those actions that bring the greatest glory to Your Name. Remind them of that Golden Rule, which states: What you don't want done to you don't do to someone else. May integrity and honesty protect them as they put their hope in You.

We pray in Your great Name. Amen.

### PLEDGE OF ALLEGIANCE

The President pro tempore led the Pledge of Allegiance, as follows:

I pledge allegiance to the Flag of the United States of America, and to the Republic for which it stands, one nation under God, indivisible, with liberty and justice for all.

### RESERVATION OF LEADER TIME

The PRESIDING OFFICER (Mr. MORAN). Under the previous order, the leadership time is reserved.

### CONCLUSION OF MORNING BUSINESS

The PRESIDING OFFICER. Morning business is closed.

### EXECUTIVE SESSION

#### EXECUTIVE CALENDAR

The PRESIDING OFFICER. Under the previous order, the Senate will proceed to executive session to resume consideration of the Rao nomination, which the clerk will report.

The senior assistant legislative clerk read the nomination of Neomi Rao, of the District of Columbia, to be Administrator of the Office of Information and Regulatory Affairs, Office of Management and Budget.

#### RECOGNITION OF THE MAJORITY LEADER

The PRESIDING OFFICER. The majority leader is recognized.

#### HEALTHCARE LEGISLATION

Mr. McCONNELL. Mr. President, yesterday, Senate Republicans gathered down at the White House for another discussion on the way forward on healthcare. We had a productive conversation. I appreciate the administration's engagement, and I look forward to more discussions in the days that lie ahead.

We will continue working so that we can bring legislation to the floor for debate and, ultimately, a vote. We know that we cannot afford to delay on this issue. We have to get this done for the American people. That is a sentiment that is widely shared in our conference, and I think I speak for everyone in acknowledging, once again, that the ObamaCare status quo is unacceptable and that it simply cannot continue.

ObamaCare has caused premiums to increase by an average of 105 percent in the vast majority of States on the Federal exchange. Next year, premiums will again increase across the country—by as much as 43 percent in Iowa, 59 percent in Maryland, and 80 percent in New Mexico.

ObamaCare has led to 70 percent of our counties having little or no choice of insurance on the exchange this year. Next year, dozens of counties are pro-

jected to have no choice at all, which could leave thousands trapped, forced by law to purchase ObamaCare insurance but left without the means to do so. Seven years after Democrats forced ObamaCare on our country, these are the painful realities for countless families across our country.

It is unfortunate that our Democratic colleagues have refused to work with us in a serious way to comprehensively address ObamaCare's failures in the 7 years since they passed it. I regret that they continue to demonstrate an unserious attitude about all of this today, but it is increasingly clear that ObamaCare's negative trends will only get worse, hurting even more Americans all along the way, unless we act. This should not be acceptable to anyone.

Sitting on the sidelines and accepting the status quo will not bring help to anyone's constituents. We have the opportunity to provide relief to those struggling families, and we should take it. Senators will have more opportunities to offer their thoughts as we work toward an agreement, and every Member will have the ability to engage in a robust debate out here on the Senate floor.

But, if one thing is clear, it is this: ObamaCare is a direct assault on the middle class. It is getting worse, and we have to act to finally move beyond its failures.

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, the Senate will be going home this week for the Fourth of July recess, and most of us will be back in our homes with our families and in our hometowns and

• This "bullet" symbol identifies statements or insertions which are not spoken by a Member of the Senate on the floor.



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moving around. I still think the topic of conversation is going to be healthcare.

I think this conversation and debate in Washington has really touched a lot of families and businesses and individuals across this country. The reason I say that is because about 6 years ago, I voted for the Affordable Care Act, what is known as ObamaCare. For the longest time, I was sure it was the right vote, and I am still sure today, but I wondered why people didn't appreciate it because what we tried to do—and we achieved some success—was to provide health insurance for a lot of people in America who didn't have it. In my State of Illinois, we cut the percentage of uninsured people in half because of the Affordable Care Act. A large number of them are now covered by Medicaid, and a large number are able to buy health insurance through private insurance exchanges.

But for the longest time, when we asked people across America "What about ObamaCare? What about the Affordable Care Act?" we got mixed reviews. Less than a majority supported it.

Then we embarked on this conversation, this debate in Washington in the Senate over the last 6 months, and an interesting thing happened. When the Republicans, who are in the majority in the Senate and the House, who were determined to repeal ObamaCare, set out to do it, they found out it was a big, heavy lift.

So now, today, we have an interesting thing that has happened. For the first time in the last several weeks, a majority of the American people support the Affordable Care Act. All of those years after we passed it, when we were talking about the good things it did, people were skeptical, but when the notion of repealing it came up, people started saying: Well, what would I lose if you repealed it? And when they thought about what they would lose, they decided those things were valuable to them personally and to their families. And what were those things? Some pretty basic things—first, that you would have access to health insurance.

I have repeatedly told the story of my friend Judy. Judy is in hospitality. She works in a motel down in Southern Illinois that I have stayed in from time to time. She is a sweetheart of a lady. She is 62 years old and has had jobs that don't pay a lot of money, but she goes to work every day—there is not a lazy bone in her body. She is 62 years old, and Judy had never had health insurance in her life until we passed the Affordable Care Act. Now she qualifies for Medicaid, and thank goodness she does because she has been diagnosed with diabetes, and she needs a good doctor she can count on, and she needs good medical advice.

So when we said that we were passing the Affordable Care Act so that more people would have access to health insurance, it happened.

We also said we were going to change the health insurance policies you buy so that you don't get tricked into buying something that is going to provide protection but only enough and not enough when you really need it.

For example, there used to be lifetime limits. People would buy health insurance and say: I am going to keep the premium low. I will sign up for a lifetime limit. How could I ever need health insurance for more than \$100,000 a year?

Well, it is an eye-opener, but there are many diagnoses or accidents that could happen to you next week that would cost more than \$100,000. So a lot of people found themselves facing personal bankruptcy because they had a limit on their health insurance policy and faced a cancer diagnosis and knew they would have to spend \$150,000 or \$200,000 for the most basic care.

We also said: When you sell health insurance, you can't discriminate against people because of a preexisting condition.

Well, it turned out that insurance companies defined "preexisting condition" to include everything, such as acne when you were a teenager or asthma—you name it. In fact, they went so far as to say that being a woman was a preexisting condition. Some of those things made no sense, so we said: That is over. We are not going to let that happen anymore.

One out of three Americans has a preexisting condition. You can't discriminate against a person because they are of a family with a child who has survived diabetes or is living with diabetes or a spouse who survived cancer surgery. So we said that from now on, under the Affordable Care Act, when you buy a health insurance policy, it is going to cover the basics.

We did something else that I want to mention because I don't want it overlooked. There used to be a Senator who sat back here in the last row, in the second seat, named Paul Wellstone of Minnesota. Paul Wellstone was a great guy. You couldn't help but love him whatever your politics. Over here was Pete Domenici, and he was a conservative Republican Senator from New Mexico. Wellstone from Minnesota, Domenici from New Mexico—what would those two have in common? What they had in common was that each of them had someone in their family with a mental illness, and they watched what happened to their loved one in their family. The two teamed up and said: From this point forward, when you buy health insurance in America, it is not going to be just physical health that it is going to cover, it is going to cover mental health as well.

So many families are touched by mental illness, some very serious forms, some not so serious but need medical help, and they all should be covered. So they put that provision in the Affordable Care Act so that now, when you buy a health insurance pol-

icy in America, it is not hit or miss; it covers mental illness, as it should.

Then they added a provision that most of us didn't pay attention to, and we should, and we do now: mental illness and substance abuse treatment. Think of this opioid and heroin epidemic and the people who are dying right and left. Think of families who are absolutely consumed by the addiction of a child, of a teenager, wondering if they can get them into treatment so they can save their lives. For many of them, that health insurance plan is paying for that treatment—treatment that otherwise would come out of their pocket if they could afford it.

So we put all of these things into the law, and the law took place, and when the Republicans said they were going to repeal it, people stood up and said: Wait a minute. I have to face lifetime limits again? I have to face preexisting condition prejudice again? I am not going to have mental illness covered automatically or maternity care covered automatically?

Well, when people reflected on this, they realized their vulnerability. So simple repeal was not enough; the Republicans needed to replace. If they were going to eliminate ObamaCare and all the people protected by it, they needed to replace, and that is when the process fell apart. In the House of Representatives, they went through a process of writing the replacement. When it was all over, they didn't wait for the Congressional Budget Office to analyze it because they knew what was coming. The Congressional Budget Office announced that some 23 or 24 million Americans would lose their health insurance because of the plan that passed the House of Representatives. They also knew that people could again face discrimination based on preexisting conditions. They knew basic health insurance didn't include the protections all of us really need to count on.

Do you remember the provision in the Affordable Care Act that said your son or daughter could stay on your family health insurance plan until you reached the age of 26? It is pretty valuable, isn't it? That son or daughter, whom you like a lot and helped get through college, doing internships and looking for a job—you wanted to make sure they have health insurance, didn't you? That was part of the Affordable Care Act, and we want to make sure the guarantee remains in any future change of the law too.

The House of Representatives passed their measure, and, unfortunately, it was a partisan roll call; only Republicans voted for it. It passed by four votes. If two Republican Congressmen had changed their votes, it would not have passed.

Then the measure came over to the Senate, as we remember from our civics lessons, and the Senate had its chance. So what happened? We had a chance to take this question to the committees of the U.S. Senate—Labor

and the Health and Education Committee, which is chaired by Senator LAMAR ALEXANDER, a friend of mine, Republican of Tennessee, and the ranking member, Senator PATTY MURRAY of Washington. We had a chance to take the bill to the committee and to debate a better approach in the Senate, to have public hearings and witnesses. But we didn't do that.

Instead, the Republican majority said: We are going to do this on our own. We don't need any Democratic input. Thirteen Republican Senators will meet in a room and write the alternative to the House healthcare replacement bill, and they did. It went on for weeks, and no one saw it. There were no reports of what it included and what was inside of it. Then, 6 days ago—6 days ago—it was announced. We took a look at it, and it wasn't that much different from what the House had done.

The Congressional Budget Office released a report on Monday of this week and said that 22 million Americans would lose their health insurance under the Republican healthcare plan—22 million. And—this part was really troubling—there would be a dramatic increase in premium costs for people between the ages of 50 and 64. Some of them would see increases of up to \$8,400 a year in premium costs because of the Senate Republican plan.

What was the reaction of the medical professionals across my State to both the House Republican plan and the Senate Republican plan? It was the same reaction. They said: Senator, vote against it.

The Illinois Hospital Association said that if we cut back on Medicaid, hospitals—particularly rural hospitals and downstate hospitals—will have to cut back in services and may face closure.

The doctors in my State, the Illinois State Medical Society, came forward and said: Vote against the Senate Republican plan and the House Republican plan because we know what happens when people lose health insurance. They still get sick. They don't come to see us early on when we can prevent things from getting worse; they come to see us when things are pretty bad and pretty expensive and pretty dangerous.

So the doctors opposed it, the nurses opposed it, the pediatricians opposed it. Not one single medical advocacy group in Illinois supported the Republican bill, which was unveiled 6 days ago.

When it came to preexisting conditions, it wasn't just the medical groups that opposed the Senate bill. The cancer society, the heart association, the lung association—most of the major disease groups stepped up and said: The preexisting condition provisions in this bill are unacceptable, and, sadly, the policies that are going to be sold may not cover the basics that people absolutely need.

Then the other thing came out. What drove this whole debate, what started

healthcare reform in the House of Representatives and in the Senate was not healthcare reform, but a tax cut. You see, the Affordable Care Act imposed new taxes, particularly on higher income individuals, and the money from those taxes went into sponsoring people into Medicaid and helping people pay their health insurance premiums. The Republicans in both the House and the Senate said: The first thing we will do is cut those taxes—about \$700 billion worth of taxes. Ultimately, they took \$1.1 trillion out of our healthcare system with this tax cut and other cuts. When you pull that kind of money out of healthcare in America, fewer people have health insurance, fewer people have a helping hand when it comes to paying their premiums.

The reaction to the Senate Republican bill over the last 6 days has been growing opposition—growing opposition, until yesterday. Senator MCCONNELL announced: We are not going to vote on it this week. We were supposed to, but we are not going to vote on it this week. He said that he may return to it when we come back from the July 4th recess.

Here is the point I wanted to make on the floor today. I am glad we have reached the point that these proposals from the House and the Senate are not going to move forward quickly to become the law of the land. Too many people would be hurt—too many innocent people. Too many families would lose their health insurance. The cost of health insurance would go up dramatically. The premiums would go up, particularly for people over the age of 50. We would see hospitals facing closure across our States. We would see cutbacks in treatment for mental illness and substance abuse. The list goes on and on. It would have been a terrible outcome, and certainly doing this in order to give a tax cut to the wealthy people of this country makes no sense.

Incidentally, how much is the tax cut? If your annual income is \$1 million a year, under the Republican plan, your tax cut is over \$50,000 a year. The people who are wealthy aren't asking me for that tax cut, and the people who will suffer because of it are folks who aren't making anywhere near \$1 million a year.

Here is what we need to acknowledge: The current healthcare system in America needs to be improved. There are things in the Affordable Care Act that need to be addressed, and we need to do it in an honest fashion, and we need to do it on a bipartisan basis.

I have talked to some Republican Senators. Senator MCCONNELL has pulled this bill back, and they want to sit down and talk.

Senator MCCONNELL said that there will be no conversations with Democrats; Republicans will do it by themselves. I hope over the Fourth of July he reflects on that because there are Democratic Senators who, in good faith, want to sit down and make a better healthcare system for America so

that more people have the peace of mind and security of health insurance and so that it is more affordable for families all across the board.

The biggest, toughest part of healthcare today is the so-called individual health insurance market; 5 or 6 percent of people who need to buy health insurance plans don't have it where they work, and they don't qualify for Medicaid. Those are the ones who are seeing their premiums spike. Can't we take the collective wisdom of Senators—Democrats and Republicans—and sit down and address that problem effectively? Of course we can, but we need to have a starting point.

So my plea to the Republican leadership is to listen carefully, as our Democratic leader, CHUCK SCHUMER, said yesterday. Once you take repeal off the table, once you take this massive tax cut for the wealthy off the table, we are ready to pull up a chair and sit down at the table.

Wouldn't it be a breath of fresh air in America in this day and age, in light of all that is going on, if Democrats and Republicans worked constructively together to make the healthcare system better, more affordable, and stronger for families and businesses across our Nation? I think that is why we were sent here. I think that is the reason we are supposed to be here, and I sincerely hope that happens next.

So we are ending the debate in the Senate this week, but we are not ending the debate in America. I urge those who think this is an important issue, and I am one of them, to speak up and to go home—I am going home soon—and to meet with people and have a conversation about where we go next as a nation. We can solve this problem, and I know we can do it in a constructive way.

If we show that kind of bipartisan leadership in the Senate, I think the House will join us. I think they will do the same thing. I think they can have a bipartisan approach too. What a relief it would be, with all of the breakdown in comity, all of the breakdown in communications politically, the warring camps that have become the American political scene. If we can show why there is a Senate and why there is a House and why people run for these offices—it is to solve problems, not to put out a press release, not to stake out a political position, but to solve a problem. This is a problem that needs solving.

I hope that over the next week, both parties will reflect on it, and when we return after the Fourth of July recess, we can roll up our sleeves and go to work.

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 Democratic leader is recognized.

#### HEALTHCARE LEGISLATION

Mr. SCHUMER. Mr. President, yesterday afternoon, my friend the Republican leader announced that the majority would delay the vote on the motion to proceed to this particular Senate Republican healthcare bill. We Democrats take no solace in that fact. Unfortunately, the majority seems intent on continuing their efforts to pass this healthcare bill.

Over the next few days and weeks, I expect to see buyouts and bailouts, backroom deals and kickbacks to individual Senators to try and buy their vote. What I don't expect to see yet is a dramatic rethink of the core of the Republican healthcare bill, but I am hopeful we can get to that point.

So far, every single version of the Republican TrumpCare bill in the House and the Senate has the same basic core to it. The details have changed a bit around the edges, but the core remains the same in each and every version: slash Medicaid to the bone in order to give a massive tax break to a very small number of wealthy Americans, cut support for Americans in nursing homes, those suffering from opioid addiction, and those with a preexisting condition to pay for a tax break for the wealthiest few.

The basic premise of every Republican healthcare bill so far is to cut back on healthcare for Americans who need it most in order to give a tax break to the people who need it the least. There is just no moral calculus to justify it. It doesn't fix any of the problems in our current healthcare system like high premiums, high deductibles, counties where there are not enough insurance options, and it is not what the American people are for. The American people are not for tax breaks to the wealthiest of Americans, nor are they for cutting Medicaid.

A USA TODAY poll this morning showed only 12 percent of Americans support this bill. At a level of 12 percent, even huge numbers of Trump supporters are opposed to this bill. The level of popular support is not going to change one bit with a tweak that wins over this Senator or that. A bill with this twisted idea at its core will fail time and time again. That is why the vote had to be pulled yesterday. You can be sure, if it were popular with the American people, it wouldn't have had to be pulled.

I make my friends on the Republican side and President Trump an offer. Let's turn over a new leaf. Let's start over. Let's abandon more tax breaks for the rich. Let's abandon cuts to Medicaid, and discuss what the American people are really concerned about: premiums, deductibles, the cost and quality of healthcare.

President Obama invited both parties, Democrats and Republicans, to Blair House to discuss healthcare re-

form in front of the American people early in his first term as President. President Trump, I challenge you to invite us—all 100 of us, Republicans and Democrats—to Blair House to discuss a new bipartisan way forward on healthcare in front of all the American people. It would focus on what you, Mr. President, have talked about in your campaign: lower costs, better healthcare, covering everybody—not on tax cuts for the rich, not on slashing Medicaid. President Trump, you said you wouldn't cut Medicaid. We don't want to either.

We Democrats are genuinely interested in finding a place where our two parties can come together on healthcare. We want to bring down premiums. We want to bring down deductibles too. We want to stabilize the marketplace. We want to control the outrageous costs of prescription drugs—another thing the President talked about in his campaign.

There is plenty of common ground for us to come together around. We believe our healthcare system has made important progress over the past 8 years, but it still needs to be improved in many ways. We admit the Affordable Care Act isn't perfect. There are ways we can improve on that law and on our entire healthcare system. So let's talk together about how we can achieve that in a bipartisan way.

If my Republican friends abandon cuts to Medicaid, highly unpopular with the American people; abandon tax breaks for the wealthiest few, highly unpopular with the American people, we Democrats are more than willing to meet with them and the White House to talk about how to improve healthcare for the American people, how to lower deductibles, how to provide better healthcare for more people at a lower cost because that is what we Democrats are fighting for: the average American family, not the wealthy few.

Today, we can turn over a new leaf and discuss healthcare legislation the way our Founders intended our government to discuss legislation: as a true debate between all of our country's representatives.

Yesterday, the majority leader reminded Republican Senators that if they failed on their partisan healthcare bill, they would have to negotiate with me, the minority leader, and by implication, our Democratic colleagues. When did the prospect of bipartisanship become a cudgel instead of an opportunity? When did bipartisanship become a threat? That is not how Congress is supposed to work. Negotiations with the minority to seek a compromise should be the first option, not the last resort.

Let's start over and get back to legislating in a way deserving of the grand tradition of the Senate as the world's greatest deliberative body. Providing affordable and quality healthcare is an issue we should grapple with, all of us together. It is one of the most important things we can do for our country.

We can do it but only if we do it together and put the partisan ideology aside.

So I challenge the President, invite us all to Blair House. Let's see what we can come up with. Let's try. We Democrats have, on several occasions, sent letters to our Republican colleagues asking for bipartisan talks on healthcare. So far we have been rebuffed. Now, with the demise of this bill yesterday—its inability to get enough votes to proceed—we have an opportunity to go back to the drawing board.

We are willing to debate and compromise on healthcare, but we have to be included, and it has to be a discussion on how to actually improve our healthcare system for the American people, not slash Medicaid to pay for tax cuts for the wealthy. We can meet, and we can try or the Republicans can stick to the same partisan approach on healthcare, which so hurts working families and so benefits millionaires.

President Trump, my Republican friends, the choice is yours.

Thank you.

I yield the floor.

The PRESIDING OFFICER (Mr. TILLIS). The Senator from Indiana.

Mr. DONNELLY. Mr. President, for all of the discussion about delays, politics, the process, vote counts, budget scores and analysis, it is critical we remember that this healthcare debate is first and foremost about people, our friends and neighbors, and their families. It is about moms and dads, sons and daughters, sisters and brothers, grandmas and grandpas.

We all agree everyone needs access to quality, affordable healthcare. Regardless of how healthy you are today, everyone needs the peace of mind that if they get sick, they will be able to get the care they need. We all know someone who has fought cancer, diabetes, multiple sclerosis, or has a child battling a chronic condition or disease.

In our shared experiences and relationships are shared values. Each of us wants our loved ones to be healthy and to live long, full, happy lives. We want what is in the best interests of our families, our friends, and our neighbors.

I have seen these values firsthand through the stories of Hoosiers who recently wrote to me out of desperate concern about the Senate healthcare bill. I have heard from everyone—from working parents to students, to seniors—that access to quality and affordable healthcare is critical to their ability to raise a healthy family, to contribute to our communities, and to live our final years in dignity.

Take Conor, who is a lawyer, and Sarah, a nurse practitioner, and their family in Fort Wayne, as an example. In 2015, Sarah was diagnosed with multiple sclerosis, an autoimmune disease that attacks the nerves in her brain and spinal cord. As Conor wrote me, "Like everyone else who suffers from MS, my wife didn't make this choice."