

move to bring to a close debate on the nomination of William Francis Hagerty IV, of Tennessee, to be Ambassador Extraordinary and Plenipotentiary of the United States of America to Japan.

Mitch McConnell, Chuck Grassley, Deb Fischer, Steve Daines, Luther Strange, Bob Corker, Thom Tillis, Tom Cotton, Tim Scott, Johnny Isakson, Richard C. Shelby, Michael B. Enzi, Richard Burr, John Hoeven, David Perdue, Roy Blunt, Todd Young.

The PRESIDING OFFICER (Mr. TILLIS). By unanimous consent, the mandatory quorum call has been waived.

The question is, Is it the sense of the Senate that debate on the nomination of William Francis Hagerty IV, of Tennessee, to be Ambassador Extraordinary and Plenipotentiary of the United States of America to Japan, shall be brought to a close?

The yeas and nays are mandatory under the rule.

The clerk will call the roll.

The assistant bill clerk called the roll.

The yeas and nays resulted—yeas 89, nays 11, as follows:

[Rollcall Vote No. 159 Ex.]

YEAS—89

Alexander	Feinstein	Murphy
Baldwin	Fischer	Murray
Barrasso	Flake	Nelson
Bennet	Franken	Paul
Blumenthal	Gardner	Perdue
Blunt	Graham	Portman
Boozman	Grassley	Reed
Brown	Hassan	Risch
Burr	Hatch	Roberts
Cantwell	Heitkamp	Rounds
Capito	Heller	Rubio
Cardin	Hoeven	Sasse
Carper	Inhofe	Schatz
Casey	Isakson	Schumer
Cassidy	Johnson	Scott
Cochran	Kaine	Shaheen
Collins	Kennedy	Shelby
Coons	King	Strange
Corker	Klobuchar	Sullivan
Cornyn	Lankford	Tester
Cortez Masto	Leahy	Thune
Cotton	Lee	Tillis
Crapo	Manchin	Toomey
Cruz	Markey	Van Hollen
Daines	McCain	Warner
Donnelly	McCaskill	Whitehouse
Duckworth	McConnell	Wicker
Durbin	Menendez	Wyden
Enzi	Moran	Young
Ernst	Murkowski	

NAYS—11

Booker	Hirono	Stabenow
Gillibrand	Merkley	Udall
Harris	Peters	Warren
Heinrich	Sanders	

The PRESIDING OFFICER. On this vote, the yeas are 89, the nays are 11.

The motion is agreed to.

EXECUTIVE CALENDAR

The PRESIDING OFFICER. The clerk will report the nomination.

The bill clerk read the nomination of William Francis Hagerty IV, of Tennessee, to be Ambassador Extraordinary and Plenipotentiary of the United States of America to Japan.

The PRESIDING OFFICER. The Senator from Wyoming.

HEALTHCARE LEGISLATION

Mr. BARRASSO. Mr. President, I come to the floor today to talk about

what I saw happen over the Fourth of July in Wyoming while visiting with people, visiting with patients, doctors, and nurses. What I am seeing is that the pain of ObamaCare continues to worsen. The healthcare crisis we are seeing across this country continues to grow. The crisis is rising, the choices are disappearing, and the American people are desperate for Congress to step in and do something to help rescue them from the rising costs and collapsing choices of the Obama healthcare law.

It is interesting. When the Democrats passed ObamaCare, the Democratic leader at the time, Harry Reid, said that we would all get an “earful of wonderment and happiness.” Those were his words about how great the law was. Well, every weekend at home in Wyoming and I am sure in the Presiding Officer’s State of North Carolina, we get an earful, too, and it is not about wonderment and happiness over ObamaCare. What I hear from patients, doctors, and nurses at home is that ObamaCare is hurting them, hurting our communities, hurting our State. I hear about the rise in premiums. I hear about the declining number of options, the collapse of ObamaCare. We have one choice in Wyoming. We used to have two. Both lost money in spite of very high premiums. What we saw is that one ended up going out of business, and the one we have in business—the only one we have—is still losing money.

We are fortunate because we have at least one provider providing coverage. There are now 40 counties across America where no one will be selling ObamaCare insurance next year—no one, not a single company will be selling ObamaCare insurance.

In Nevada, where prior Senator Harry Reid is from, only three counties are going to have anyone selling on the ObamaCare exchange—only three of the counties in the entire State, the State that Harry Reid represented in the Senate for many years. People living everywhere else in his home State will have I think one choice, maybe more, but in terms of these counties, no one is selling ObamaCare insurance at all. The State health insurance exchange put out a statement in his home State that said that the people living in the rest of the State face what they described as a healthcare crisis.

Democrats predicted wonderment and happiness about ObamaCare, but there is a healthcare crisis all across the country. People in that State are going to have no access to the insurance plans the Democrats promised them under ObamaCare. A lot of Americans are not much better off or in better shape right now.

There was a headline in the Independence Day edition of USA TODAY that said “1,370-plus counties have only one ACA insurer.” The article was about a study that was done by the Robert Wood Johnson Foundation. They found that people living in 1,300

counties have no choice when it comes to the ObamaCare plan; there is just one company offering the mandated coverage. Washington says you have to buy it; not many people want to sell it. Washington doesn’t seem to care.

Democrats don’t seem to care about the fact that what they promised was a marketplace and what we have ended up with is a monopoly. Remember when Democrats promised there would be more competition? Essentially there is none. When there is none, we end up with less competition and generally with higher prices, which is what people across the country are seeing. Prices have essentially doubled in ObamaCare marketplaces over the last 4 years. That is why a lot of people are finding out that while they may still have access to coverage, it is so expensive, they can’t afford to buy it—because they are down to one choice.

Health insurance companies keep releasing information about how much higher they expect rates to go next year, which continues to be a problem. I have seen the headlines. “Another ObamaCare Rate Shock.”

Look at what is happening in Tennessee. Earlier this year, Aetna and Humana both said they were dropping out of ObamaCare exchanges completely. Cigna is one of the last big companies that are still willing to sell these plans. Well, they say they are going to have to raise premiums by 42 percent next year.

Look at what is happening in Georgia, just across the border from Tennessee. Blue Cross Blue Shield is asking for an average rate hike of 41 percent in Georgia. The Atlanta Journal-Constitution had an article about it just last week. They said Blue Cross might charge as much as 75 percent more for one plan next year. That is ObamaCare.

Remember President Obama saying that if you like your plan, you can keep your plan? Those plans are gone.

Remember President Obama saying that rates would drop by \$2,500 a year for people? That is not what we saw. What we are seeing is what is continuing today.

The Atlanta Journal-Constitution is saying that Blue Cross Blue Shield may charge as much as 75 percent more next year. They quoted one man as saying: “That’s a breath taker.” Another woman quoted in the article responded to these price increases by saying simply “Yikes!” That is what people are facing all across the country.

I remember President Obama, leaving office, forcefully defending it and being proud. There is very little to be proud of here.

People all across America are having the exact same reaction as they see how much their own insurance companies are raising their rates all across the country. That is not the wonderment and happiness the Democrats said we would be hearing about when this was passed. The high prices are a big

reason so many people are dropping their insurance coverage. They can't afford it. The people most likely to drop out, we find out, are, of course, the young people.

Gallup came out with the results of a recent survey on Monday, just 2 days ago, with big headlines all across the country. What they found is that 2 million fewer Americans, under ObamaCare, have insurance today than they did at the end of last year, just 6 months ago. There have been 2 million fewer over the last 6 months.

So, in just 6 months, 2 million people have gone off insurance. Most of them are young, and according to the survey by Gallup, they basically say they dropped it because it was just too expensive. They do not feel that they are getting value for their money. These 2 million people are not talking about the wonderment and happiness of ObamaCare. They are just leaving it behind.

Democrats said people would love ObamaCare. They said ObamaCare would bring down prices. It has not. They said it would increase competition, but they did not get that one right either. None of this is happening. Now the Democrats are starting to say that having Washington-mandated health insurance is not enough. They say we need health insurance to be run entirely by Washington. Apparently, they did not learn the lesson that said that the Washington-mandated insurance—having to buy a Washington product—would be good enough. Now they are recognizing that it is not good enough. They are saying that we need Washington in charge of all of it.

They call it single-payer healthcare, but let's talk about what it is. It is government-controlled healthcare—government-mandated, government-controlled, government-run, one-size-fits-all healthcare. It is a single payer, with the American taxpayers paying the bill.

We see what happened in California when its legislature passed a similar thing in the State senate. They asked: What is the cost? \$400 billion. What is the budget of the entire State of California? \$190 billion. So what they proposed in the State senate has passed in the State of California and costs twice what the entire budget is in the State of California. To give what the people of California have been promised by the State senate, they are going to have to raise taxes on people, and then you will get the rationing of care and the lines and the waiting time. It is what happens around the world with government-mandated, government-run insurance. We see that in Canada, and we see that in England.

I was practicing medicine prior to coming here to the Senate. I was an orthopedic surgeon in Wyoming. I knew we needed to do healthcare reform, but ObamaCare was the very wrong reform. Democrats were wrong then, and all of the talk about government-run healthcare is wrong today—wrong today for the people of this country.

Look, we understand that we need a better solution than ObamaCare. That is what I hear about every weekend in Wyoming. We need to put patients in charge, not the government. With the Democrats and the speeches they are giving and the bills that have been co-sponsored in the House by a majority of the Democrats, they want to put the government solely in charge of healthcare in this country.

We need to have people at home making their own decisions, making their own choices, and not have Washington, DC, imposing its one-size-fits-all approach. We need to give people options, not mandates. People deserve choices. That is what the American people want. That is what Democrats promised years ago, but they never delivered. That is what Republicans are committed to giving the American people today—doing it now so that patients can get the healthcare they need from doctors whom they choose and at lower costs so that patients can make the decisions, not Washington. That is where we are today as we continue to debate and discuss healthcare in this country at this time.

Just coming back from Wyoming, I visited with many folks—many former patients, a number of doctors whom I had worked with over the years, and nurses. I was at several hospitals. I just heard, unilaterally, across the State of Wyoming that ObamaCare continues to be a burden on the people of the State. They want freedom. They want choice. They want flexibility. They want to make decisions for themselves, not have Washington dictate to them and, certainly, not have government controlling healthcare in this country.

I yield the floor.

The PRESIDING OFFICER. The Senator from Connecticut.

Mr. MURPHY. Mr. President, I have had the good fortune of being in both the House and the Senate during the period of passage and implementation of the Affordable Care Act and now the debate over repeal, and I have heard consistently from my Republican colleagues two things. One is that they did not think the Affordable Care Act was the right approach to fixing the problems of America's healthcare system. There were 60-some odd times that the House or the Senate voted to repeal all or parts of the Affordable Care Act. The second thing I heard consistently over that period of time, dating from 2009, is that the Republicans were prepared to offer a replacement to the Affordable Care Act that would be better, that would be an improvement over the Affordable Care Act—indeed, over the status of the American healthcare system when the Affordable Care Act was passed. The ground has shifted mightily since then.

The Congressional Budget Office tells us that, under the Republican plan either passed in the House or in the Senate, a humanitarian catastrophe will result in this country. Tens of millions of people would lose their healthcare.

That is not what Republicans said their replacement would do. They said their replacement would be better than the Affordable Care Act.

The CBO says that rates will go up immediately by 20 percent on almost everybody. Then, after that, if you are young and healthy, rates will probably go down, but for everybody else, the amount of money you have to pay in premiums, copays, and deductibles will go up. There is nothing in the Republicans' bill about cost—nothing that addresses the underlying issues with an American healthcare system that, procedure by procedure, costs twice as much as in most other countries—and nothing about quality. There is not a single provision in the bill that encourages higher quality.

As we get ready for Republican repeal bill 3.0 or 4.0—whatever this next version will be that will be released secretly to Republicans tomorrow—I think it is just worth reminding everybody what Republicans said would happen. I will just use our President's words. I understand that many of my Republican colleagues here do not ascribe to all of the beliefs and statements of our President, but he is the leader of the Republican Party. All of my colleagues did support him, and they stood with him in the House of Representatives, arm in arm, when they passed the Republican House's repeal and replacement bill.

President Trump wrote this:

I was the first and only potential GOP candidate to state there will be no cuts to Social Security, Medicare, and Medicaid. Huckabee copied me.

So no cuts to Medicaid was the promise. Yet the bill that the President has endorsed and is trying to help Leader MCCONNELL push through the Senate involves debilitating cuts to Medicaid—\$700 billion to \$800 billion worth of cuts to Medicaid—resulting in millions of people being pushed off of that benefit. The cut to the State of Connecticut would be \$3 billion. We are a tiny State. Our Medicaid Program is somewhere in the neighborhood of \$8 billion. We would lose \$3 billion of that. The promise was that we would not cut Medicaid. This bill cuts Medicaid.

President Trump wrote:

If our healthcare plan is approved, you will see real healthcare, and premiums will start tumbling down. ObamaCare is in a death spiral!

There is always one long sentence and then one very short sentence.

Here are the two claims: "Premiums will start tumbling down." That has been the promise, and that has been a consistent promise—that costs will go down if the Affordable Care Act is repealed and replaced with a Republican plan. The CBO debunks this from beginning to end. It says that premiums will go up. They will start tumbling upwards immediately at rates of 20 percent. If you are older or if you have any history of preexisting conditions, your premiums will continue to go up. The danger, of course, is in thinking

that the only thing that you pay in the healthcare system is premiums. I could pretty easily construct a healthcare reform proposal in which your premium would go dramatically down. How would I do that? I would just shift all of the payments onto deductibles, onto copays, and I would give you nothing with regard to the actuarial benefit of the plan. It is easy to get premiums to go down if you do not care about what you are actually covering and the size of your deductibles and the size of your copays.

Then, "ObamaCare is in a death spiral!" The CBO debunks that as well. The CBO says that, if you leave the Affordable Care Act in place over the course of the next 10 years, 2 or 3 million people will lose healthcare insurance. If you pass the Republicans' healthcare bill, that is where the death spiral occurs. There are 23 million people who will lose insurance if you pass the Republicans' bill, but 2 to 3 million people will lose insurance if you do not pass it.

Again, President Trump writes:

Healthcare plan is on its way. Will have much lower premiums and deductibles—

Here, he is making a commitment on deductibles. Once again, the Congressional Budget Office says that premiums will go up and deductibles will go up, especially for individuals who are older or individuals with pre-existing conditions—while at the same time taking care of pre-existing conditions!

This bill does not take care of people with preexisting conditions. Why? Because it allows for any State to allow insurance companies to get out from the minimum benefits requirement. If you have cancer, technically, the Senate Republicans' bill says that you cannot be charged more, but you may not be able to find a plan that covers cancer treatments. So that is not protecting people with preexisting conditions. The CBO says this specifically. It says that, especially for people with preexisting mental illness and preexisting addiction, they will be priced out of the marketplace because they will not find plans that cover their illnesses. You cannot just protect people with preexisting conditions by saying that insurance plans have to cover them. You actually have to require insurance plans to offer the medical benefit they need.

Once again:

Our healthcare plan will lower premiums and deductibles—and be great healthcare! Insurance companies are fleeing ObamaCare—it is dead.

I have already covered the part about premiums and deductibles, but let's remember that insurance companies were not fleeing ObamaCare until President Trump was sworn into office. The period of open enrollment covered a period prior to his inauguration and a period after his inauguration. Before President Trump's inauguration, open enrollment was on pace to enroll a record number of Americans in ex-

change plans and Medicaid plans—record enrollment. Enrollment fell off a cliff after President Trump was sworn into office and signed an Executive order that told all of his agencies to unwind the Affordable Care Act. People listened to President Trump, who said that he was going to kill the Affordable Care Act, and they stopped signing up for those plans.

It got worse when he refused to pay insurance companies. Right now, the President will not commit to paying cost-sharing subsidies to insurance companies more than 30 days ahead of time. He stopped enforcing the individual mandate, and it is no surprise that insurance companies are saying they do not want to participate in these exchanges because the President is trying to kill them. He has made it very clear from day one.

I have had the benefit of being on the floor a number of times with Senator BARRASSO, who often came down to the floor, following my remarks, during the period of the implementation of the Affordable Care Act. I heard him talk about the fact that there will be freedom for Americans to have or not to have insurance if this piece of legislation is passed. It is a wonderful idea that people will be free to not be able to afford insurance. The reality is that, yes, some individuals buy insurance today because they are compelled to by the individual mandate, but there is a reason for that. If you do not compel people to buy insurance who are healthy, then you cannot protect people who are sick.

I sat where the Presiding Officer is during Senator CRUZ's 24-hour filibuster. In the middle of that filibuster, he said exactly that. Senator CRUZ, in the middle of his filibuster, said that we all understand that you have to have the individual mandate in order to prohibit companies from charging higher premiums for people who are sick, and my Republican colleagues know that because they kept the individual mandate in their bill.

So this nonsense about no one's being required to buy insurance is belied by the text of the legislation we are considering. There is a mandate in this bill. There is a penalty in this bill. It is just a far meaner and crueler penalty than was included in the Affordable Care Act.

What do I mean by that?

So the Affordable Care Act doesn't mandate that you buy insurance in the sense that if you don't buy it, you will be locked up in jail; it says that if you don't buy insurance, you will pay a penalty on your income tax. If you don't buy insurance, there will be a penalty.

That is exactly what the Republican Senate bill says. It says that if you don't buy insurance, you will incur a penalty. In their bill, the penalty is that you will be locked out of buying insurance for 6 months. If you are sick, or even, frankly, if you are healthy and you need to go see a doctor for some-

thing, you will have to pay for that out of your pocket for those 6 months. If you are sick, and you have a serious condition and you are legally refused healthcare because of this legislation, the consequences could be dire, but whatever the scope of the consequences, it is still a penalty, just like there was a penalty in the bill that the Democrats supported and passed in 2009 and 2010.

So it is just not true to say that now Americans have the freedom not to have healthcare. You don't because you are going to be penalized if you let your health insurance lapse. If you don't make payments for a couple months, you are locked out of the insurance market. That is just a different kind of penalty than the one that is in our bill.

The truth is that while I admit there are some people who buy insurance today because they fear that penalty, it is necessary, as Republicans realize, in order to make sure the markets don't spiral out of control, because if you say that you can't charge people with preexisting conditions more and you don't require healthy people to buy insurance, then why would any healthy person buy insurance? They will just wait until they are sick because they know that once they are sick and need very expensive care, they can't be charged any more for it.

The nature of insurance is that people who have the good fortune to be healthy or to be free of accident or natural disaster subsidize individuals who are not so fortunate—who are sick, who do have an accident occur to their home or who are subject to a natural disaster. That is how insurance works.

Republicans realize that because they put a penalty in their bill, but for as many people who buy insurance because they are forced to, most people buy insurance because they want it because they recognize it is better to have insurance in the case that they or a loved one gets sick, and that is whom we are talking about here. Of the 23 million who lose insurance, according to CBO, under the Republican bill, millions and millions of those are those people who want insurance but will not be able to get it because they are priced out by the Republican bill. I can see there will be some people who will make that choice, but there will be millions more who had insurance today who will not be able to get it moving forward.

As Republicans finish up this latest round of secret negotiations, I just want to make sure we are on the same page about what this bill does. It mandates that you buy insurance, just in a different way. It has a penalty just like the Affordable Care Act has a penalty.

I want to make sure we remember what Republicans stated as their goals for this replacement. The goals were that the system would be better, but by every single metric, this proposal will result in worse healthcare for people. Less people will have insurance. Rates

will go up for everyone except for young, healthy people. Costs will continue to spiral out of control, and no additional measures will be taken to make quality better. Every single problem that Republicans address in the existing healthcare system gets worse.

Senator BARRASSO complains mercilessly about these exchanges. CBO says the exchanges will shed even more people. The costs will go even higher. Senator CORNYN regularly tweets out that the Affordable Care Act still left 28 million people uninsured, but this bill you are debating will double the number of people who don't have insurance.

For all of my Republican colleagues who rightly come to the floor and talk about the fact that the cost is too high for individuals in our system, there is not a single provision in this bill that deals with the actual cost of the service, of the procedure, of the visit, of the surgery.

I am deeply worried that this next version of the Republican repeal and replace bill will result in premiums going up by 15 percent and only 17 million Americans losing healthcare and it will be declared a victory, but that is not what Republicans promised. They promised to repeal the Affordable Care Act and replace it with something that is better, not something that is less bad than the original version of the replacement plan they introduced.

I think the reason that to many people it appears this bill is falling apart is because when my colleagues went home this weekend, they heard an earful from their constituents—from real folks who will be affected by this piece of legislation.

Alison is 28 years old. She is from Milford, CT. She was in my office this week. She came to DC this week, she and her boyfriend, I think—I don't want to ascribe an engagement to them that is not true; I think her boyfriend. They came down here this week. They were supposed to be on vacation this week, and they decided to spend some of their vacation coming to Washington so Alison could tell her story to Members of Congress.

When she was 9 years old, she was diagnosed with a rare liver disease. At the time, she and her family were told that they would need to find a liver transplant in roughly 10 years or she wouldn't survive.

At the start of her sophomore year at Sacred Heart University in Connecticut, she was starting to have symptoms of a condition that results from a buildup of ammonia in her brain. She was having a hard time concentrating, abdominal pain, nose bleeds, nausea, vomiting, and joint pain. Her doctor said it was time for her to get that transplant, that she was at that critical moment when she needed it.

Unfortunately, none of her family or 8 other candidates—friends, I think, of the family—were a match. So in desperation, her parents wrote an email and just sent it out to people who lived

in Trumbull and in the Sacred Heart University community. From that email, an anonymous young man stepped forward. He was tested and determined to be a match. The surgery was a success. When she walked on stage to receive her diploma from Sacred Heart University, she was joined by that anonymous donor, and her fellow graduates gave her a standing ovation.

Now, her family was lucky because she had insurance through her father. She is, because of the Affordable Care Act, allowed to do that, at the time being under 26 years old. Her insurance paid for virtually everything that was necessary, but, she says, had my dad not had the healthcare benefits he did, I know my family would not be in the place we are today because my parents would have lost everything they worked so hard for. There was no way we could have afforded to pay for all of those burdens.

Today she worries that if this bill is passed, she, as a young woman with a preexisting condition, will be destined to a life of discrimination because she may not be able to find a plan that covers her condition because of the withdrawal of protection with respect to the minimum benefits requirements. Even in Connecticut, she is vulnerable to that withdrawal of protection, not because Connecticut is likely to allow insurance plans to offer coverage that doesn't include the minimum benefits but because if you work for a big company, and even if you are housed in Connecticut, if that company anchors their plan in a State that does strip away the insurance protections, then you lose the protections even as a resident of Connecticut.

Alison is now a nurse in the neonatal intensive care unit at Yale University Children's Hospital. She is contributing in a big way to our State and to the healthcare system. Yet she is living in fear of this legislation being passed. So she took some of her vacation to come to Washington to share her story with us.

I am with Senator COLLINS. I think the Republicans should scrap this garbage piece of legislation. I hope they understand our offer is sincere—it is not political—that Democrats do want to sit down with Republicans and try to provide some reasonable fix to what still ails our healthcare system.

I will end with this thought: It doesn't have to be like this. Healthcare does not have to be a political football that is just tossed from one side to the other every 10 years. That is what has been happening here for my entire political lifetime. I was elected to Congress in 2006, in part because of the tempest of popular frustration with the way in which Republicans passed the 2003 Medicare Modernization Act, which included the new prescription drug benefit that Democrats saw—and sold—as a giveaway to the drug and insurance industries. Democrats used healthcare as a political cudgel to

bludgeon Republicans after the 2003 Medicare Modernization Act. Its implementation was very rocky, just as the implementation of the Affordable Care Act was. The Democrats used it against Republicans.

In 2009, it was the Republicans' turn to bludgeon Democrats. Democrats lost a lot of seats in 2010, in part because Republicans used the passage of the Affordable Care Act to politically harm Democrats. Now, once again, it is the Democrats' turn to politically bludgeon Republicans.

Whether this bill passes or not, the fact that Republicans have walked out on a plank with a partisan piece of legislation that takes insurance from 23 million people across the country and, as every poll shows, is widely unpopular will be a political liability for Republicans.

What if we decided to stop tossing healthcare back and forth? What if we decided to jointly own one-fifth of our economy? What if we decided to sit down and give a little bit, from our side to yours, from your side to ours? What if I said that I understood you cared about flexibility in these marketplaces, that I understood your desire for more flexibility for Governors and State legislatures under Medicaid? What if you said you understood our interest in providing long-term stability in these marketplaces, that you understood our desire to try to get at some of the costs of the actual services and devices and prescription drugs that are sold? What if we sat down and fixed the things that aren't working, kept the things that are working, and held hands together and said that we are going to jointly own the American healthcare system?

It would leave plenty of things to fight over. There would still be no shortage of disagreements that we could run elections on. Whether it be immigration or taxes or minimum wage, there will still be lots of things we could disagree on, but for as long as I have been in politics, this issue has just been thrown back and forth, to hurt Democrats, to hurt Republicans. In the process, we have injected so much uncertainty into the healthcare system and into the economy at large, that we make it impossible for private sector reform to take hold.

Hospitals and healthcare providers have been doing really innovative things since the Affordable Care Act went into effect because they got a signal from the Federal Government that we wanted them to start building big coordinated systems of care, that we were going to reward outcomes rather than volume. So they started making all of these big changes, and then, about a year ago, they stopped because Republicans said they were going to blow up that model and pass something new. We frustrated innovation because we telegraphed that healthcare policy is just going to ping-pong back and forth between left and right. We hurt ourselves politically, we frustrate the

private sector innovation, and get no benefit to us on the economy.

My offer, and I think the offer from most of my colleagues, is sincere. If my Republican friends do choose to throw away this piece of legislation because it doesn't comport with the goals that Republicans have long said were at the heart of their effort to repeal this bill, there is an important bipartisan conversation about keeping what is working in our healthcare system and admitting together that there are big things that aren't working and fixing them together.

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

The PRESIDING OFFICER (Mr. COTTON). Without objection, it is so ordered.

Mr. MERKLEY. Mr. President, the most important three words in our Constitution are the first three words: "We the People."

Our Founders chose to write those words in supersized font so that we could, from some distance away, know exactly what the mission statement was. Their goal wasn't to write a structure for government that would repeat the governments of, by, and for the powerful of Europe but to pursue differently a vision in which the will of the people would be enacted; that government would work not just for the benefit of the citizens at large but also empowered by the citizens at large. This is a vision we have been very concerned about as we see the influence of the concentration of money in American politics.

Indeed, we have five members of the Supreme Court who don't understand the basic, fundamental nature of the first three words of our Constitution. They adopted a court case, *Citizens United*, which was the opposite of the vision of our Constitution. That vision was articulated by Thomas Jefferson, who said that the will of the people will be enacted only if each and every citizen has an equal voice. But *Citizens United* gives a dramatic, stadium-sized megaphone to the individuals who are the richest and most powerful in the country, at odds with that fundamental vision that Lincoln so well summarized as government of, by, and for the people.

We have certainly seen the case of government by and for the powerful in the context of the recent TrumpCare bill—the Senate version thereof—crafted in secret by 13 of my colleagues from across the aisle, hiding from the press, hiding from the healthcare stakeholders and experts, hiding from their own citizens. In fact, during this last break, of the 52 Members of the Republican caucus, apparently—reportedly—only a couple had townhalls be-

cause they were terrified of what their citizens would say about the bill they have been crafting in secret—the secret 13.

This bill is also known as the zero, zero, zero bill—zero committee meetings, zero amendments considered in committee, zero months of opportunity for Senators to go back and consult with their citizens back in their home States.

Then what do we find as a result of this secret process of government by and for the powerful? A bill to rip healthcare from 22 million Americans in order to deliver hundreds of billions of dollars to the richest Americans. In fact, if you want to summarize it, you can say that this bill gives \$33 billion—not \$33,000, not \$33 million but \$33 billion—to the richest 400 Americans while ripping healthcare away from 700,000. That is the number who could be funded by that same \$33 billion. That would cover all of the Medicaid recipients in Alaska and Arkansas and West Virginia and Nevada. This has incredibly grave consequences for the peace of mind and the quality of life for these millions of Americans. It rips \$772 billion out of Medicaid.

We know the Medicaid expansion in Oregon has enabled 400,000 people to acquire healthcare in my home State—400,000. If they were holding hands, they would stretch from the Pacific Ocean to the State of Idaho, across the entire east-west breadth of my State.

Think about how much of an impact this has on rural Americans. One out of three Oregonians in rural Oregon are on the Oregon Health Plan, Oregon's Medicaid Program. It has a big impact on our seniors—our seniors in long-term care.

Oregon is a leader in helping families, helping individuals stay in their homes as their healthcare deteriorates. But when they can no longer stay in their home because of the extensive nature of their care, many then are, through Medicaid, able to go and get care—long-term care—in a nursing home. That long-term care, paid for by the Oregon Health Plan, covers about 60 percent of the individuals in long-term care, but in rural Oregon, it is much higher.

I was in Klamath Falls at a nursing home. I was citing the national statistic, 60 percent, and the head of the nursing home said: Senator, here, it is virtually 100 percent.

I looked at those residents down that long hallway who needed intensive nursing healthcare, and one woman asked why I was there. Her name was Deborah. When I explained it, she said: I am paid for by Medicaid. If Medicaid goes away, I am out on the street. That is a problem because I can't walk.

It is not just a problem for Deborah. It is a problem for all of our residents in long-term care who need extensive nursing care. It is a challenge. It is a real challenge. It is a real problem for our mothers. One out of three women in maternity care are paid for by Med-

icaid. Don't we want our children to get a good, strong start in life? Don't we want maternity care from the moment a woman knows she is expecting a child? Don't we want that? Then why do so many of my colleagues support a bill to tear that care away from our expecting mothers?

It is a problem for our older Americans, our older Americans whose rates would go way up. For example, a man who is 60 years old, earning \$20,000 a year, who currently pays about \$80 a month for healthcare—an affordable policy. Under the Republican TrumpCare bill, that would go to \$570 a month.

I challenge my colleagues, find me someone earning \$20,000 a year who can pay \$570 a month for healthcare. Find that individual and defend your plan on the floor of the Senate as to why that isn't equivalent to just taking healthcare away from that individual.

Then, of course, we have the issue of preexisting conditions. People sometimes have an injury in high school football or maybe it is in softball or gymnastics or in wrestling that they carry with them their entire lives. Maybe it is something that develops further on in life. Maybe it is asthma, diabetes, or an episode of cancer. Now they have a preexisting condition. Under our old healthcare system, prior to 2009, 2010, they couldn't acquire insurance unless they were fortunate enough to get it through that job, which millions of Americans do not get it through their workplace. They were out in the cold, out on the ice.

Now we have this Republican TrumpCare bill. They want to throw those citizens back on the ice who have preexisting conditions, not their friends who are wealthy enough to buy healthcare on their own or heads of corporations who get big benefit packages—not them, no, just the struggling working Americans.

Don't we care about struggling working Americans? Aren't we a "we the people" nation, not a "we the privileged" nation? I encourage my colleagues to read up on the first three words of our Constitution and what it means.

Then we have the plan my colleague from Texas has presented. It is referred to as the Cruz amendment. The Cruz amendment—the Cruz amendment for fake insurance. It works like this. It says, if an insurance company provides one policy with extensive benefits—that is, benefits essential to ordinary healthcare like maternity care and the ability to go to a hospital, the ability to get a broken bone repaired, the ability to get affordable drugs, just the basics of healthcare—they have one policy with these essential benefits. They can offer policies that cover virtually nothing. These are known as fake insurance.

We have a President who likes to talk about fake news virtually every day. Why do we have a President who

hates fake news but loves fake insurance? Why do I have 52 colleagues here who apparently love fake insurance?

Here is what it does. It means the young and the healthy get those policies because they cost very little, and they make a bet that they aren't going to get hurt and they are not going to get sick. That means that those who are older and those who have pre-existing conditions have to go for the policy that has those essential benefits, but now because only the older individuals and the sicker individuals are getting that policy, it is way beyond reach.

Earlier I described how a 60-year-old at \$20,000 has a policy that increases seven times, from \$80 a month to \$570 a month. The Cruz amendment would make that much worse. It makes fake insurance for the young or the wealthy and unaffordable policies for those who are older and have preexisting conditions.

Our President said the House bill is mean, but the Senate bill is meaner. The House bill would knock 14 million people out of healthcare within a single year. The Senate bill, that is 15 million people.

The American Medical Association has long operated under the precept of, first, do no harm. Wouldn't that be a good principle for legislation on healthcare? Is it any wonder that the USA TODAY poll says only one out of eight Americans likes this Republican TrumpCare bill. We can turn to the PBS NewsHour poll, 17 percent. That is quite a small number of Americans who understand that ripping healthcare from 22 million people in order to give hundreds of billions of dollars to the richest Americans is one of the biggest takings this country has ever seen proposed and one that so deeply and profoundly damages the quality of life for these Americans.

Our Presidents—Republican and Democratic—over time have understood this. President Eisenhower said:

Because the strength of our nation is in its people, their good health is a proper national concern; healthy Americans live more rewarding, more productive and happier lives.

He continued:

Fortunately, the nation continues its advance in bettering the health of all its people.

Today, on the floor of the Senate, we have a different philosophy, not the Eisenhower strategy of advancing the bettering of the health of all of our people but in fact the Trump policy echoed by so many of my colleagues that is about destroying the healthcare for millions of people, taking us back in time to a place where peace of mind was missing for millions of Americans because they couldn't either afford healthcare or because their policies didn't cover anything. Other Presidents over time have weighed in with very similar sentiments to that which President Eisenhower put forward.

Let's hear it from the citizens back home. Kathryn, from Springfield, has

battled cancer three times over the last 12 years. Kathryn says that during her last two bouts with cancer, in 2010 and 2011, she was "blessed enough to have qualified for the Oregon Health Plan" and that without it she would not be here today.

Indeed, healthcare coverage has been a blessing to so many. Let's not rip those blessings away.

Let's go to Beth in Bend and her 34-year-old son who is living with a rare genetic condition and relies on the Oregon Health Plan to survive. In 2012, doctors found tumors along his spine and areas of concern in his brain and his lungs. They are benign now but could turn into cancer at any time. Beth's son's life depends on regular, expensive MRIs to monitor them. He is only able to afford those MRIs because of the Oregon health plan.

As Beth says, "If the ACA is repealed and replaced with TrumpCare, my son will most likely lose his current health insurance . . . the loss of access to affordable insurance is a potential death sentence for my son."

Medical professionals like Caitlin, a nurse in Portland, tell us how significant this is, and she writes:

With the passage of ObamaCare, I saw people were finally able to come and be seen by our medical teams. Often their disease processes were so advanced that we would have to take very extreme measures to try to halt or reverse these disease processes.

But as time has passed, we're able to catch things sooner and people can actually go to primary care rather than waiting until it's a matter of life or death and having to be seen in the Emergency Department.

I am struck by Liz from Enterprise, who works at a clinic and told me that the clinic has expanded in this very small, remote town in Northeast Oregon from 20-something employees to 50-something employees. It has doubled in size, which means an incredible improvement in healthcare. She went on to say that they have been able to take on mental health as well, which they never were able to do before. Why could they afford to do this? Because the uncompensated care dropped so dramatically that their finances improved, and they were able to hire more staff.

Let's ask about John in Sherwood. John wrote about his grandmother. He lost his grandmother to Alzheimer's a few months ago, but thanks to the Oregon Health Plan, his grandmother was able to live in a nursing home and get the care she needed 24 hours a day right up until the end.

As John says, "I'm forever thankful for the work of President Obama and Congress for passing the ACA. If they wouldn't have passed this bill, my grandmother wouldn't have gotten the care she needed from those great men and women at the nursing home."

These stories go on forever. Over this last weekend, I did a series of townhalls in rural Oregon, parts of Oregon that would be painted red on a political map. I held those townhalls and then went to a series of other Main Street walks with mayors and small incor-

porated cities. What I heard everywhere I went—inviting the entire community to come to the townhall and talk—was enormous anxiety, enormous anxiety and disappointment that the leaders they are counting on here to make our healthcare system work better care more about giving more American tax dollars away to the richest Americans than they do about fundamental healthcare for struggling working families across our Nation.

Let's listen to those individuals. I know most of my colleagues didn't go home and listen to their constituents. As I mentioned, it has been reported that only a couple of my Republican colleagues held a townhall, even though this bill would affect them so profoundly. Still, their voices are echoing through this building, through the emails, through the phone calls, through the individuals who are coming and visiting our offices both here and back home. Let's listen to those voices. Let's be a "we the people" nation that works in partnership with the American people to make this world, this Nation, provide a foundation for every family to thrive.

That means we have to take an oak stick and pound it through the heart of TrumpCare and bury it 6 feet under and then work together in a bipartisan fashion. Think of all we could do. We know that when you strip away reinsurance, you destroy the market for insurance companies to go into new areas and compete. Let's restore that reinsurance.

We know that when the President holds on to the cost-share payments and will not say whether he is releasing them, our companies don't know how to price their policies, and they are dropping out of the exchanges across this Nation. County after county health insurance companies are fleeing because the President will not tell them whether he is releasing these cost-share payments. We can fix that.

We know we have a meth and opioid epidemic across this country. I have heard my colleagues on both sides say we have to take this on in a more courageous, more substantial fashion. We passed authorizing legislation, but let's put funds behind that. Let's do that, and let's take on the high cost of pharmaceuticals.

These four things we can do together. The country would love to see Democrats and Republicans working together to make our healthcare system work better. That is exactly what we should be doing in representing the citizens of the United States of America in a "we the people" democratic republic.

The PRESIDING OFFICER. The Senator from Utah.

TAX REFORM

Mr. HATCH. Mr. President, I rise to once again discuss the ongoing effort to reform our Nation's Tax Code. Over the past several years, I have come to the floor often to make the case for tax reform by highlighting the many shortcomings of our current tax system and