

the State of the majority of Members here. Some of these changes don't benefit 98 of us; they only benefit 2 of us. And they are in this version of the bill in order to win votes, not to make good policy.

We heard word this morning of a new fund that was invented in the middle of the night last evening that would supposedly help States that are Medicaid expansion States transition their citizens who are currently on Medicaid to the private market. Now there are reports that it is a \$200 billion fund, and that is a lot of money. It sounds like a lot of money, and it is a lot of money, but it would represent 17 percent of the funds that are being cut to States, and it would only be a temporary bandaid on a much bigger problem. Why? Because CBO says definitively that the subsidies in this bill for people who want to buy private insurance are so meager that virtually no one who is kicked off of Medicaid will be able to afford those new premiums. That is why the numbers are so sweeping in their scale—22 million people losing healthcare insurance.

So even if you get a little bit of money to help a group of individuals in a handful of States transition, when that money runs out—and it will—they are back in the same place. All they are doing is temporarily postponing the enormity of the pain that gets delivered. And once again, this provision being delivered to only States with Medicaid expansion populations is being targeted in order to win votes, not in order to improve the entirety of the healthcare system.

Senator CORKER called out his colleagues today. He said that he was willing to vote for the motion to proceed, but he was growing increasingly uncomfortable with a bill that was increasingly—I think his word was “incoherent.” That is what happens when you get to the point where you have a deeply unpopular bill that everybody in the country hates and you need to put amounts of money in it to get a handful of additional votes. It becomes incoherent. And this was an incoherent bill to begin with. It is hard to make this bill more incoherent, but that is what is happening when these individual funds are being set up for Alaska, Louisiana, and Florida.

We could solve all of this if Republicans decided to work with Democrats. If we set aside the big tax cuts for the wealthy and the pillorying of the Medicaid Program, if we try to fix the real problems Americans face today, we could do it on a bipartisan way. And wouldn't that be great.

I get it that there is enormous political advantage for Democrats to sit on the sidelines and watch Republicans vote for a bill that has a 15-percent approval rating, just like there was political advantage for Republicans to sit on the sidelines and not do anything to help Democrats provide insurance to 20 million more Americans. Healthcare is a very thorny political issue, but it

doesn't have to be that way. We could sit down together and own this problem and the solution together, and we could end healthcare being a permanent political cudgel that just gets used every 5 to 10 years by one side to beat the other side over the head.

We are Senators too. We got elected just like our Republican friends did. Why won't Republicans let Democrats into the room, especially after this bill has failed over and over again to get 50 votes from Republicans? We don't have a communicable disease. We aren't going to physically hurt you if you let us into that room. We are not lying when we say we have a desire to compromise.

Democrats aren't going to walk into a negotiating room and demand a single-payer healthcare system. We understand that we are going to have to give Republicans some of what they want; maybe that is flexibility in the benefit design that is offered on these exchanges. But Republicans are going to have to give Democrats some of what we want, which is the end to this madness—an administration that is trying to sabotage our healthcare system and destroy the healthcare our citizens get. But that could be a compromise. It is not illegal to meet with us. There are 48 of us; there are not 12 of us. My constituents in Connecticut deserve to have a voice in how one-fifth of the American economy is going to be transformed.

I know a lot of my Republican friends want to do this. I have talked with Republican Senators who say: Well, when this process falls apart, we want to work with you. It is falling apart, because the only way Republicans are going to get the 50 votes is by making these shameful changes—specific funding streams for specific States in order to get a handful of votes—and that is not how this place should work. Maybe that is how things happened here 100 years ago, but it is not how things should happen today.

So once again I will beg my Republican colleagues to stop this partisan closed-door exercise and come and work with Democrats. We can do this together. We can own it together. We will have plenty of other stuff left to fight about if we find a way to agree on a path forward for America's healthcare system.

Mr. President, I yield the floor.

The PRESIDING OFFICER (Mr. CASSIDY). The Senator from Oregon.

Mr. WYDEN. Mr. President, before he leaves the floor, I want to commend my colleague from Connecticut for a very thoughtful speech. I think he has made the case that the challenge ahead is really a two-part drill—first, to stop something that is especially ill advised, and second, to then move to a better way that really focuses on sunlight and bipartisanship. So I thank my colleague for his very thoughtful comments.

THINKING ABOUT SENATOR MCCAIN

Mr. President, I am here to speak about healthcare, but before I turn to

that subject, I want to spend a few minutes talking about our wonderful colleague JOHN MCCAIN.

Some of the most satisfying moments I have had in public life have been serving with JOHN MCCAIN. When I came to the U.S. Senate—Oregon's first new U.S. Senator in almost 30 years—I had the honor of being chosen to serve on the Senate Commerce Committee, which was chaired by JOHN MCCAIN. And what an exhilarating way to begin serving in the Senate. We tackled big, meaty, important issues of the future—the question of multiple and discriminatory taxes on internet commerce. We focused, for example, on Enron and what went wrong there when so many consumers were ripped off. We dug into consumer rights. JOHN MCCAIN was an early advocate for saying that if you rode on an airplane, it didn't mean you ought to sacrifice basic consumer rights, and some of those same issues are getting more attention today.

Then, of course, we built on this floor the Y2K measure. When everybody was so concerned about what would happen at that time, Senator MCCAIN gave me the honor of being his Democratic partner in putting together a bill. We had the benefit of incredible work from the private sector and first responders and smarter Federal policies. We all know that some of the calamitous predictions about Y2K didn't come to pass.

JOHN MCCAIN did some extraordinary work at that time. As a young U.S. Senator, what a thrill it was to be able to be involved with a real American hero on some of those first experiences I had in the Senate.

As we begin to absorb the news of last night, what struck me is that now we are counting on JOHN MCCAIN's legendary strength to give cancer its toughest fight ever—toughest fight ever.

I just wanted to come to the floor today and say we are rooting for you, dear friend. We are rooting for you and Cindy and your wonderful family, and we are thinking about you this afternoon.

HEALTHCARE

Mr. President, it is my sense that if you thought the TrumpCare debate in the Senate had met its end on Tuesday, it is pretty obvious you ought to be thinking again. The zombie stirs once more.

The latest attempt by the majority to cobble together 50 votes, according to reports, comes down to waving a \$200 billion slush fund in front of Senators from States that expanded Medicaid under the Affordable Care Act.

As the ranking Democrat on the Senate Finance Committee, I am very pleased that the Presiding Officer joined the committee this year. We have studied this one-time slush fund, and the theory, of course, is that it is supposed to be enticing enough for a Senator to vote for a bill that still slashes Medicaid to the bone.

Let's be realistic about what the slush fund represents in the context of

the overall plan. Senate Republicans are steering tens of millions of Americans toward a cliff and are offering the world's smallest pillow to break the fall.

Before I go further on the specifics of what the majority has on offer, I want to step back and take a look at what the American people have been subjected to over the course of this debate. The reason I want to do this is that, even by Beltway standards here in Washington, this is the absolute worst of this city.

In the crusade to repeal the Affordable Care Act, the ACA, there has been the AHCA—the House TrumpCare bill. That is the one that earned the big victory ceremony with the President of the United States in the Rose Garden. Next, we had the BCRA—the Senate TrumpCare bill. Then, there was a second version of the BCRA. Then, along came something called the ORRA, the bill I have called “repeal and ruin,” which got its start back in 2015. Then, this morning, the public got a look at a third version of the BCRA. My sense is, if you are having coffee in Coos Bay, OR, or in Roseburg over lunch or something like that, your head is going to be spinning as you hear this news.

I also want to make sure folks know about the strategy that has come out of the White House over the last few days. The President first endorsed the Senate's TrumpCare bill, but then it was repeal only. Then, while the country watched the administration sabotage the Affordable Care Act, the President said that everybody ought to just sit back and watch what happens. Then it was back to calling for the Senate majority to pass TrumpCare.

Nobody in this Chamber, with the possible exception of Senate Majority Leader MITCH MCCONNELL, can claim to really know what is coming down the pike on American healthcare. So with the health and well-being of hundreds of millions of Americans at stake, this shadowy, garbled, and wretched process really just leaves your jaw on the floor.

Senate Republicans seem to be speeding toward a vote on something. As I mentioned, there is the prospect of this \$200 billion slush fund being dangled out there to help round up votes. My sense is that this slush fund is of zero consolation to the millions of Americans who live in States that didn't expand Medicaid. It is of zero consolation to the tens of millions of middle-class families who are going to have their tax cuts or healthcare ripped away and see their premiums skyrocket. It will be of zero consolation to middle-class families who are panicked over whether they are going to be able to take care of elderly parents and grandparents when long-term care through Medicaid is cut.

Make no mistake about what this slush fund really does; it just delays a little bit of the pain for a short time in States that expanded Medicaid. But the slush fund is going to run dry. That is a fact. State budgets are going to get

hit like a wrecking ball. That is the reason so many Governors are so unhappy with what is on offer.

There is no escaping the consequences of whatever the Senate passes. If you had objections to TrumpCare or a repeal-only bill yesterday, this doesn't change a thing.

A few hours ago, the nonpartisan Congressional Budget Office—for folks who don't follow the lingo and CBO, those are our nonpartisan umpires. They put out an analysis of the third version of the Senate Republican healthcare bill. If you were hoping that was the charm, the news doesn't exactly help your cause.

The CBO found that it is still going to send premiums through the roof. The new version is going to kick 22 million Americans off their healthcare. It is still going to make healthcare unaffordable for millions of Americans with preexisting conditions. That is especially troubling to me—and I know the Presiding Officer is very interested in the policy foundations of these big issues. Before the Presiding Officer came to this body, I worked with one of our former colleagues, and we put together what is still the only comprehensive bipartisan health reform—seven Democrats, seven Republicans—that has been introduced in this body. One of the priorities that those Senators—and some of those colleagues on the other side of the aisle are still here; they were cosponsors of this bill, and many of the Democratic sponsors are still here. There was bipartisan agreement that there should be an airtight, loophole-free commitment to protecting people with preexisting conditions. As I said, seven Democrats, seven Republicans signed off on that bill. A number of them from both sides still serve in the U.S. Senate today.

Now what is being discussed is an approach that would make healthcare unaffordable for millions of people with preexisting conditions, really taking a big step back—and I have heard my colleague speak about this, commenting on TV shows and the like—toward the days when healthcare in America was for the healthy and the wealthy. That is what you get if you don't have airtight protections for those with preexisting conditions, if you don't have what we had in our original bill by seven Democrats, seven Republicans—airtight protections, loophole-free protections for those with preexisting conditions. If you don't have it, you are marching back to the days when healthcare was for the healthy and wealthy, where you could not move to another job if you got a great opportunity because you had a preexisting condition. You were immobilized. That is where this is going with the proposal to make healthcare unaffordable for millions of people with preexisting conditions, turning back the clock, moving away from what has strong bipartisan support in this Chamber with Senators on both sides who are still here.

For those who care about the affordability of health coverage, there is a statistic that really leaves you without words. Under the Senate Republican bill, in 2026, a middle-aged American who brings home \$26,500 annually will face a deductible of \$13,000—\$13,000. If you are watching this, remember that figure the next time you hear that the Senate Republican bill lowers costs or puts the patient at the center of care. If this bill becomes law, that individual with a \$13,000 deductible is one bad injury or diagnosis away from personal bankruptcy. How does that figure compare to the system on the books today, you might ask? Under the Affordable Care Act, that same individual's deductible is \$800.

The other option being put forward by Senate Republican leaders is a repeal-only strategy, and they claim it would have a 2-year transition. But the numbers from the Congressional Budget Office make clear that the idea of a transition after a repeal bill passes is a fantasy.

“Repeal and run” means that 17 million Americans lose coverage in the first year; 32 million Americans lose coverage within a decade; premiums in private market plans double. It is easy to see why. My colleague in the Chair, the Presiding Officer, knows so well about the signals that are sent to the private marketplace; we are talking about the marketplace. If you are pouring gasoline on the fires of uncertainty in the private insurance sector and people can't plan and they can't calculate, what will happen during this 2-year transition? You are going to have bedlam in the marketplace. It is a prescription for trouble, and premiums and private market plans will double.

The numbers I am talking about are real lives. I was the director of the Gray Panthers senior citizens group for almost 7 years before I was elected to the Congress. This is my background. As I started to see government reports and the like, I came to realize that those reports—all those facts and figures on pieces of paper, long sheets of paper, figure after figure—are not really what this debate is all about. This is a debate about people, about their hopes and aspirations and what they want for the future. Families are worried, for example, about how they are going to pay for the care of an older parent. I think about those seniors I met as director of the Gray Panthers. They did nothing wrong. They scrimped and saved, and they didn't go on the special vacation. They didn't buy the boat. They did everything right. They educated their kids and tried to sock away a little money. What we know is, growing old in America is expensive. In spite of being careful about costs all their lives, when a spouse needed extra care or they had early onset of healthcare problems, they went through all the money they saved. Then they needed Medicaid.

Medicaid now picks up the costs of two out of three nursing home beds in

America. What is not known is very often seniors need not just that care, but they need home and community-based care. They need a continuum of services so they get the right kind of care at the right time.

They are looking at this bill. They are saying this is going to make my prospects for being able to afford care—whether it is nursing homes, home and community-based services—an awful lot harder to figure out in the days ahead.

We have young people who have been through cancer scares. We have single parents who work multiple jobs to put food on the table. This is what I am hearing about at home. When I had the good fortune of being chosen Oregon's first new Senator in almost 30 years, I made a pledge that I would have an open meeting, open to everybody in every one of my State's counties. We have 36 counties in Oregon.

This year, so far, I have had 54 open-to-all town meetings. Each one of them lasts 90 minutes. There are no speeches. People say what they want. They ask a question. It is the way the Founding Fathers wanted it to be. They are educating me, and I am trying to respond. I am trying to take back to Washington, DC, which often strikes them as a logic-free zone—I am trying to take their thoughts back to Washington, DC. Frankly, my highest priority has been to find common ground with people of common sense on the Finance Committee, especially in the healthcare area, because long ago I decided if you and your loved ones don't have your health, nothing else really matters.

At those 54 town meetings—they have been in counties where Donald Trump won by large numbers or Hillary Clinton won by large numbers—each one of those meetings has been dominated by the fears of Americans of all walks of life, of all political philosophies worried about what is going to happen to their healthcare.

Frankly, their worry seems to be just as great in rural communities that President Trump won by large majorities because Medicaid expansion in my State has been enormously helpful. So many Oregon communities, under 10,000 in population, have been able to use Medicaid expansion at a hospital to maybe hire another person. It has really been a lifeline. They have an awful lot of people between 55 and 64. They are going to be charged five times as much as young people here, and they are going to get fewer tax credits to deal with it.

In all of these counties—counties won by Donald Trump, counties won by Hillary Clinton—fear about healthcare has been front and center. People are fearful and obviously would like some clarity, some sense of what is coming next.

One of our colleagues whom I do a lot of work with, Senator THUNE—a member of the Finance Committee and his party's leadership—spoke to a reporter

a little bit ago. He couldn't say what the Senate would take up, if the first procedural vote passes next week, whether it would be TrumpCare or a straight repeal bill.

My sense is, everybody is being asked to walk into this abyss on healthcare but particularly colleagues on the other side of the aisle. To be in the dark about what is on offer a few days before a vote that affects hundreds of millions of Americans, one-sixth of the American economy—for them to be in the dark, someone like myself, the ranking Democrat on the Senate Finance Committee that has jurisdiction over Medicare and Medicaid and tax credits, strikes me as very odd, even by the standards of the beltway.

The American people are now left guessing about what comes next. The only guarantee, should the first procedural vote succeed, is that both options Senate Republican leaders put on the table are going to raise premiums, make care unaffordable for those with preexisting conditions, and leave tens of millions of Americans without health coverage.

I want to repeat a message that I and other Democratic Senators have been delivering for days. The choice between TrumpCare and straight repeal of the Affordable Care Act is false. Nobody is being forced to choose between calamity and disaster.

Democrats and Republicans absolutely can work together on the healthcare challenges facing the country. As soon as there is a willingness to drop this our-way-or-the-highway approach—this partisan approach known as reconciliation—there will be a good-faith effort on our side to find common ground.

I heard enough of the back-and-forth in this debate to know there is a bipartisan interest; for example, in flexibility for States. I know the President of the Senate is especially interested in this issue—flexibility for the States. He has given it a lot of thought. I want him to know I am always open to talking to him about this issue.

In the bill I described earlier—seven Democrats, seven Republicans—we had a special section which became law in the Affordable Care Act that in effect provided for what are called innovation waivers. The theory—and I am sure my colleague in the Chair has been thinking about these issues as well—is based on the idea we both have heard for years, conservatives have said, if those folks in Washington will just give us the freedom, we can find better ways to cover people, hold down the costs, and make what works in Louisiana work for us, and folks in Oregon can pursue what works for folks in Oregon.

I said, at the time, that every single bill that I would be part of in this debate about fixing American healthcare would have a provision that would respond to this argument that the States are the laboratories of democracy. We would have a provision that would allow considerable flexibility for States to take their own approaches.

I continue to feel very strongly about it. I wrote an entire section of my comprehensive bill to give States flexibility, and fortunately it was included in the Affordable Care Act. There ought to be room to work on these kinds of issues, State flexibility. There ought to be room to work on a bipartisan basis with respect to bringing down prescription drug costs.

I have indicated to the President of the Senate, I think the lack of transparency in the pharmaceutical market has really been a major factor in the reason that our people get hammered by escalating drug prices.

We have heard for so long that some of the middlemen—they are called pharmaceutical benefit managers. They came into being a few years ago. They said: We will negotiate for businesses or States or labor unions. We will negotiate a better deal for the consumer.

Consumers said: Hey, we will see that in our pocketbook. At home we would see that at a pharmacy, at Fred Meyer or Rite Aid or Walgreens or any of our pharmacies. These are all big pharmacies around the country. Right now, as of this afternoon, we don't know what these middlemen put in their pocket and what they put in our pocket.

There ought to be an opportunity to find common ground. I think there ought to be a chance for Democrats and Republicans to work together on approaches like my SPIKE bill, which says that when a big pharmaceutical company wants to drive up the prices, they should have to publicly justify why they are doing so.

There ought to be ways for Democrats and Republicans to work together and bring down prescription drug costs. There certainly is bipartisan interest in getting more competition and more consumers into the insurance markets. That means more predictability and certainty.

My view is, if you are serious about really helping to make the private insurance market robust, you have to stop this crusade to repeal the ACA. Insurers are making decisions right now. All eyes are on this body to bring certainty back to the marketplace.

The reality is, there is only a very short time with respect to 2018 premiums. I know there are Republican Senators who would like to tackle challenges on a bipartisan basis. The message my colleagues and I are sending on this side of the aisle is, there are a lot of open arms here. Instead of taking the partisan route and causing devastation in our healthcare system, let's work together to make healthcare better and more affordable for all Americans.

I consider that kind of bipartisan cooperation to be the premier challenge of my time in public service, to work with colleagues, common sense, looking for common ground. I have heard one after another of my colleagues on this side of the aisle state that in just the last few days.

Let us set aside this partisan our-way-or-the-highway approach, opt for the alternative, which is more sunshine and more bipartisanship. I will pledge to you everything in my power on the Senate Finance Committee to bring that about.

Mr. President, I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

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

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

MANUFACTURING

Mr. BLUNT. Mr. President, the White House started out this week with all kinds of activities on the White House grounds pertaining to things that we make here in America and the importance of manufacturing and, frankly, the kinds of good jobs that have traditionally come with manufacturing.

When we have an economy that focuses on making things and growing things, that has always been the strongest economy for working American families—an economy that competes, an economy that produces. Where the Presiding Officer and I live in Louisiana and in Missouri, in the middle of the country and close to that great transportation corridor and close to the resources of the country, we always particularly thrive when we are in an economy that is focused on making things.

With all of the other discussions this week, it would be a shame to not think about those products from every State that the President talked about this week, that were on the Capitol grounds, and that are reflective of companies that are almost brandnew and companies that are a century old, where people had figured out how to be competitive enough in what they were doing that they could make a living for themselves and lots of other people, doing just that. In fact, manufacturing employs 12.3 million people in the country today, including more than 260,000 people in my State of Missouri. There is no doubt that we benefit from those kinds of jobs.

I was glad that in 2014 we were able to get the Revitalize American Manufacturing and Innovation Act signed into law. This was a new way, a new opportunity for businesses to link with each other and to link with training facilities, maybe research universities. You have to have that kind of public partner, as well, to see what we could be to be even more competitive than we are. When we looked at Germany and other countries, they were not only doing this sort of thing, but they were doing it in a way that made it really hard for us sometimes to keep up with that level of interaction between innovation and manufacturing, innovation and labor.

Businesses are really very much impacted, jobs are very much impacted by

the decisions that government ultimately sets the stage for. If you are going to make something in America today, the first two boxes I think you would have to check would be can you pay the utility bill and does the transportation system work with what you are trying to do. If you can't check those two boxes, no matter how great that workforce and that location might be, you are not going to take those jobs there. So government, either as a regulator or as a provider, is going to be very involved in whether you can pay the utility bill.

That is why I was really glad to see the new director at the Environmental Protection Agency look at the power rule. The courts fortunately had already said you don't have the authority to do that—only Congress can do what you want to do here—which is look at the power rule and look at States like many of our States in the middle of the country where, in my State, the so-called clean power rule would have doubled the utility bill for families and the places they work in about 10 or 12 years. By the way, nobody pays the utility bill for you. The utility bill is paid based on how many utilities you use. There is no mythical big government to come in and pay the utility bill unless we are going to have a totally different system than we have now. The utility bill would have doubled.

I have often said that in the last three years in this fight to see that this didn't happen to Missouri families—and I said it again on the radio this morning in an interview, thinking that this fortunately had not happened—I said: If you want to test what happens if the utility bill is allowed to double because of some needless government action—and double before it has to because you are doing things before they have to be done—the next time you pay your utility bill, just as you are writing your checks out of your checkbook, pay it one more time and see what you are going to do with the rest of your family's money that month, which suddenly you can't do because you are paying the utility bill twice.

There are ways—when we need to transition to some other kind of utility provider if we want to transition in fuels or sources or whatever—there are ways to do that. The way to do that is to say that the next time you have to build something, the next time you have to borrow money that the utility users are going to pay back over 20 or 30 years, once you have paid for what you are doing now that has met all the requirements, you have to do it differently than what that silly rule would have said, because it would have said you have to pay for what you already have, but you have to also be paying for what you immediately had to replace it with.

This would have been like if you had the CAFE standards, the miles-per-gallon standards, if that same agency

would have said: OK, we are going to have new miles-per-gallon standards and they are effective immediately, and if you have a car that doesn't meet those standards, you of course have to keep paying for your car, but you also have to have a new car. That is what we were about to tell utility users and families. And if you don't think that would have had an impact on jobs, you are just not thinking about jobs.

There was a water rule, the waters of the United States, that would have done about the same thing. Both of those have been pushed back by the courts, and hopefully we are walking toward a more reasonable situation where we are thinking about how to accomplish the same goals in a way that lets families accomplish their dreams.

Then the second thing, the transportation issue: Does the transportation system work for what you want to make? Can you get the material where you need to get it? Can you get a product in a way that continues to make you competitive? And the State and Federal Government and local governments are very, very much in charge of the decisions that make that environment whatever it is.

So when we are thinking about "Made in America," we have to think about those things. Then we have to think, with that infrastructure in place, what is the third and crucial piece of that puzzle coming together? It is a workforce that is competitive and prepared and an education system that is prepared to help with whatever comes next.

If we think we know what the average person, or any person, is going to be doing and how they are going to be doing it 20 years from now, I suspect none of us are quite that able to predict what 20 years from now is going to look like. In fact, if we had thought about the way we do most of the work we do now 20 years ago, it would be amazing: Oh, it is just 20 years later, but we didn't have the cell phone, we didn't have an iPad, we didn't have a computer. There was nothing at the factory that did what that machine does right now. We have to have a workforce that is ready, and we have to do all we can to make that workforce ready.

On the infrastructure front, we need to look not only at the infrastructure bill that is coming up, but also how many more tools can we put in the tool box. Senator WARNER and I reintroduced the BRIDGE Act to provide one more tool to create more incentive for private sector partnerships, to do things differently than we have done them before. If we are going to get different results, we have to do different things. If we do just exactly what we have been doing, we are going to get just exactly what we have been getting.

So as the President focuses, I think properly, on the kinds of American jobs that create stronger families and more opportunities, we don't want to lose