

Obama—not because it is sound healthcare policy but just because of that very complicated relationship. And it is not the right thing to do.

It is long past time for us to leave the campaign rhetoric behind, to get together in a bipartisan fashion, and to work out ways to improve our healthcare system. That is what we attempted to do with the ACA. We sat in meeting after meeting, hearing after hearing—the longest markup, I believe, in the HELP Committee—accepting and voting on Republican amendments and Democratic amendments. That is how we get things done—I hope that is how we get things done.

Healthcare makes up one-sixth of our economy. And when you walk into an ER or a doctor's office, they don't ask you whether you are a Republican or a Democrat, but whether you have insurance. That is the only question they ask: How are you paying for this? If you don't have insurance, then you are in an awfully difficult position, and we know that.

Everybody is going to use the healthcare system in their life. This is not an optional thing. This is not something that is designed for a special group of people. We all will use the healthcare system. And if you can't access it because you have no money or no insurance, maybe you will find a way through the emergency room or some other way, but it won't be the best healthcare and it won't be the most efficient and economical for our country.

In fact, one of the ironies of our healthcare system before the ACA is that we could have large portions of our population with no health insurance, not getting treatment for illnesses that could have been readily fixed while they were in their forties and fifties, and then suddenly at 65, with Medicare, which we all support, they can get treatment they need.

I had an ophthalmologist in my office one day, and they kind of looked around and commented: Well, you are right, because I see people right now coming into Medicare—65, 66 years old—because they had early onset diabetes, which could have been treated by a modest drug regime in their forties and fifties. They are now so sick that they have to have expensive surgery.

That is not effective for the country. With the Affordable Care Act, we were putting our whole Nation, we hoped—from young people, children, all the way through—on a path to good healthcare, so that by the time they get to Medicare, those issues would not be so important.

So I would urge my colleagues to abandon this effort, to begin tomorrow not with a vote on their proposal, but sitting down with both sides, doing the same process that we did. Again, one of the tests of life is, do you allow your colleagues and friends to do what you did, or do you insist they do something else? We are just asking them to do the

same thing we did with the Affordable Care Act over many months of hearings and debate, and then at the end there was a vote.

We are going to see this for the first time tomorrow—the details. We still don't know what is going to be in it. There will be a vote, but it won't be an informed vote. It won't be a result of careful deliberation. It won't be a result of a bipartisan effort. It won't be a result of all the equity holders, including doctors, patients, public health officials, and governors, coming together and saying: We can do this better. That, to me, is a shame.

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

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

MORNING BUSINESS

TRIBUTE TO KIMBERLY BRANDT

Mr. HATCH. Mr. President, I speak today to bid farewell to Kimberly Brandt. Kim has worked for the Senate Finance Committee as the chief oversight counsel for more than 6 years. Kim came to the Finance Committee after years of public service, and she leaves it to again answer the call to public service. While we are sorry to see her leave, I want to take a minute to note the important contributions she has made while on the Finance Committee.

She has coordinated oversight on virtually every conceivable topic within the ambit of the committee's jurisdiction. That work has included IRS, Medicaid and Medicare, Social Security, and trade compliance oversight.

While her work has been both bipartisan and exceptional, Kim is probably equally known to everyone here as the thoughtful baker.

Always cognizant of the little things, Kim made it her life's mission in the Senate to ensure every staffer and Senator had a cookie in their hand when they needed it most. Her mantra that there are only a few things in life a good cookie can't improve has spread like fresh flowers in a spring garden.

It is no wonder the first comment most of my staffers have made is "who will make us cookies?" after hearing that Kim is leaving. The most unfortunate thing, however, is that I am not sure there is anyone who can fill those shoes. Kim's cookies are perhaps the best I have ever had during my tenure in the Senate. Only my wife's lemon bars can compare, and I feel compelled to say that just to ensure I don't end up on the couch tonight.

I mean, my goodness, just talking about Kim's cookies is making me hun-

gry. You just can't beat her peanut butter and chocolate chip cookies.

While Kim's attention to these little things have brought her considerable fame while she has worked here, there is little doubt in my mind that Kim's legacy extends far beyond her cuisine.

As just one example, Kim worked tirelessly through one of the largest investigations of the IRS that we have seen in recent memory. Kim's leadership ensured that our committee's analysis was both grounded in fact and integrity, and though it took several dozen months to complete, I don't believe there is anyone in this body that would dispute that report's precision, thoughtfulness, and earnestness.

She also has become known as the person who tackles complicated issues involving the Medicare and Medicaid Programs and develops creative, thoughtful policy solutions. That has been evident in her recent work on Medicaid over the past year and in her efforts to come up with solutions to the Medicare audit and appeals backlog, as well as the complicated and burdensome Stark rule. In each of these instances, Kim has engaged the impacted stakeholders and the relevant policy folks and come up with legislative ideas that are bipartisan. This is no small task.

It is this type of work ethic and reputable end product that makes Kim the type of person you hate to see leave, but you quietly rejoice that they are going to be the one helping steer the ship in the administration.

Truly, Kim's appointment as Principal Deputy Administrator for Operations at the Centers for Medicare and Medicaid Services, CMS, reflects this administration's desire to have quality individuals helping lead an agency facing daunting challenges. I don't think anyone would contend with the need for strong and informed leadership there. I can think of no one better suited for the position. I would like to take a few minutes to briefly reflect on Kim's experience to explain why I believe that to be true.

Before Kim came to the Finance Committee, she worked as senior counsel at Alston & Bird here in Washington, DC, advising clients on healthcare compliance and fraud and abuse issues. Prior to her work at Alston & Bird, Kim served 7 years as the director of the Medicare Program Integrity Group at CMS. For 5 years before that, Kim worked at the HHS Office of Inspector General as special counsel and director of external affairs and as a senior counsel negotiating False Claims Act settlements and drafting and monitoring corporate integrity agreements.

Just that work experience, in two administrations and a respected law firm, should be enough to qualify Kim for this important role, but I am not done. Kim also worked on authoring OIG's compliance guidance for individual and small group physician practices.

She received her J.D. with a concentration in health law from the

DePaul School of Law, an M.A. in legislative affairs and health policy from George Washington University, and her B.A. from Valparaiso University.

Kim has long been recognized nationally as an expert in healthcare compliance and fraud and abuse issues, but in 2016, that recognition culminated in her receiving the Healthcare Compliance and Ethics Professional of the Year award from the Society for Corporate Compliance and Ethics and the Health Care Compliance Association.

While I am sure to speak for all of my staff and fellow Senators when I say that we will miss Kim, I think I can also say, with confidence, that we have the greatest faith in Kim. Yes, we will probably have strikes due to the absence of Kim's baked goods, and yes, our oversight and Medicaid efforts will not be the same without Kim, but this is important work we are all engaged in, and it would be wrong to bar our great country from the service of this wonderful and highly talented friend of mine.

Before I conclude, though, I would like to harken back to one of my favorite stories about Kim.

It was in the wake of the Lois Lerner debacle. Kim and her team spent more than a dozen months hashing out a highly detailed and important investigation that revealed quite a bit more than what we were initially expecting. In the end, Kim and her team interviewed more than 32 current and former IRS and Treasury employees and reviewed nearly 1.5 million pages of documents. The fruit of their labor was a staggering and included a four-part treatise on the IRS's processing of 501(c)(3) and 501(c)(4) applications for tax-exempt status. There were thousands of pages of appendices and hundreds of pages of report text.

Before the report was finalized, however, I wanted to be sure I had read every word. Aside from the hefty amount of reading, it also created problems because the text included confidential taxpayer information and only those with clearance could enter my office while I reviewed the text. Kim's humor, wit, and zealous optimism kept me alert and motivated throughout the investigation of those hundreds of pages, and while I have always cherished Kim's famous cookies, they never tasted better than they did then.

Now, I had always appreciated Kim, but in this instance, her commitment to detail and integrity really struck me. To ensure that the product coming out of the committee was a complete and accurate one, she went back to the IRS to confirm that the committee had all relevant documents. Only then did we discover the thousands of pages of missing emails which would become a critical part of the investigation. If it weren't for Kim's hard work and intellectual rigor, we would have never discovered this fact, and throughout the investigation, which was often heated and impassioned on both sides of the

aisle, Kim was fair, honest, and worked hard to keep the inquiry bipartisan, something no other committee in Congress could do.

This and many other incredible memories of Kim will be with me forever, and words can't quite say how truly grateful I am to have Kim help me make all those memories these past several years.

Our work in the Nation's Capital can get ugly sometimes. It can be partisan. We often wonder whether we can still get good people to go into public service, but then we are reminded that there are good people in this town who repeatedly answer the call to public service. Kim Brandt is one of these—and she is one of the best. The Finance Committee, the Senate, CMS, and, in honesty, the United States of America is lucky to have her in these roles, and we thank her for her hard work.

I am going to miss you, Kim.

I want to wish Kim, her beloved pup Sherlock, and her family all of the best. I feel no need to hesitate when I say that we are all proud of you and will miss you dearly.

Thank you.

CYSTINURIA AWARENESS DAY

Mrs. SHAHEEN. Mr. President, I wish to recognize June 24 as Cystinuria Awareness Day and to offer my support to the International Cystinuria Foundation as the organization continues its excellent work promoting knowledge of this disease within the research and medical communities, as well as providing resources for those affected by cystinuria.

Cystinuria is an inherited disease characterized by high concentrations of the amino acid cysteine in the urine, leading to the formation of cysteine stones in the kidneys and urinary tract. It is a rare disease that affects roughly 1 in every 7,000 people, including an estimated 130 Granite Staters. Cystinuria is a painful and often debilitating condition. Those who suffer from it can experience kidney stones as frequently as daily, causing many to lose weeks of work each year. Many sufferers use prescription painkillers to cope with the disease, and tragically, some develop substance use disorders.

Cystinuria does not discriminate, affecting people of all genders, races, ethnicities, and ages. There is not yet a cure, and the disease is frequently misdiagnosed. I sincerely hope that this day of awareness will help in advancing research into the causes of the disease as well as possible therapies and cures. Because cystinuria is a rare disease, there is an acute need for more aggressive research, including at the National Institutes of Health. In addition to supporting important funding for research, we can also do our part by also advocating for awareness for the disease. Fortunately, the Affordable Care Act protects those with cystinuria and other preexisting conditions from discrimination by health insurance companies.

Cystinuria Awareness Day is a valuable opportunity for Americans to learn about this condition and offer support to those living with it. I am grateful to the International Cystinuria Foundation for its commitment to raising awareness of the disease, advocating for research, and providing support for those suffering from cystinuria.

MESSAGE FROM THE HOUSE

At 7:26 p.m., a message from the House of Representatives, delivered by Mr. Novotny, one of its reading clerks, announced that the House has passed the following bill, in which it requests the concurrence of the Senate:

H.R. 3298. An act to authorize the Capitol Police Board to make payments from the United States Capitol Police Memorial Fund to employees of the United States Capitol Police who have sustained serious line-of-duty injuries, and for other purposes.

MEASURES REFERRED

The following bill was read the first and the second times by unanimous consent, and referred as indicated:

H.R. 3298. An act to authorize the Capitol Police Board to make payments from the United States Capitol Police Memorial Fund to employees of the United States Capitol Police who have sustained serious line-of-duty injuries, and for other purposes; to the Committee on Rules and Administration.

REPORTS OF COMMITTEES

The following reports of committees were submitted:

By Mr. JOHNSON, from the Committee on Homeland Security and Governmental Affairs, with an amendment in the nature of a substitute:

S. 595. A bill to provide U.S. Customs and Border Protection with additional flexibility to expedite the hiring process for applicants for law enforcement positions, and for other purposes (Rept. No. 115-133).

By Mr. JOHNSON, from the Committee on Homeland Security and Governmental Affairs, with amendments:

S. 760. A bill to expand the Government's use and administration of data to facilitate transparency, effective governance, and innovation, and for other purposes (Rept. No. 115-134).

By Mr. THUNE, from the Committee on Commerce, Science, and Transportation, without amendment:

S. 756. A bill to reauthorize and amend the Marine Debris Act to promote international action to reduce marine debris, and for other purposes (Rept. No. 115-135).

By Mr. THUNE, from the Committee on Commerce, Science, and Transportation, with an amendment in the nature of a substitute:

S. 1096. A bill to amend and enhance certain maritime programs of the Department of Transportation, and for other purposes (Rept. No. 115-136).

INTRODUCTION OF BILLS AND JOINT RESOLUTIONS

The following bills and joint resolutions were introduced, read the first