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Senate

The Senate met at 10 a.m. and was called to order by the President pro tempore (Mr. HATCH).

PRAYER

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

Let us pray.

Our Father, be with us not only in great moments of experience but also during mundane and common tasks of life. Through the power of Your Spirit, make our Senators mount up with wings like eagles, running without weariness and walking without fainting. Lord, give them the wisdom to be patient with others, ever lenient to their faults and ever prompt to appreciate their virtues. Rule in their hearts, keeping them from sin and sustaining their loved ones in all of their tomorrows. Surround them with the shield of Your favor, as You provide them with a future and a hope, accomplishing in their lives more than they can ask or imagine.

We pray in Your sovereign Name. Amen.

PLEDGE OF ALLEGIANCE

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

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

RESERVATION OF LEADER TIME

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

CONCLUSION OF MORNING BUSINESS

The PRESIDING OFFICER. Morning business is closed.

EXECUTIVE SESSION

EXECUTIVE CALENDAR

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

The senior assistant legislative clerk read the nomination of Kevin Christopher Newsom, of Alabama, to be United States Circuit Judge for the Eleventh Circuit.

The PRESIDING OFFICER. The assistant Democratic leader.

HEALTHCARE

Mr. DURBIN. Mr. President, last week, on a bipartisan basis, the Senate rejected a bill that would have repealed the Affordable Care Act. This should be a turning point, not just in our healthcare debate but in the way that we move forward in the Senate.

The speech given by Senator MCCAIN when he returned to the Senate Chamber last week lasted about 15 minutes, and, in that short period of time, the senior Senator from Arizona reminded us of our historic responsibility here in the Senate and the role that we play under our Constitution as an independent branch of government, and he then exhorted us to put away the partisanship and the gamesmanship and move to what we would call regular order in the Senate: Send a bill to a committee, have the committee consider the bill, bring in experts, go through an amendment process, report it to the floor, and have another amendment process hoping that the collective wisdom of the committee and the body will result in a work product that actually achieves the goal that we set out to achieve. That is the regular order. That is what JOHN MCCAIN asked us to get back to, and now we have that chance.

On a bipartisan basis, I believe the Senate must come together and work on solutions to improve our healthcare

system. First, we have to stabilize it. In just a few weeks, the major insurance companies are going to announce their premiums for the next year, and I am afraid they are going to show dramatic increases, because what the industry has told us over and over is that the one thing they can't calculate is the uncertainty of policy decisions. So as long as we have not done our job in stabilizing the healthcare system, they will either step away from risk or charge higher premiums to cover the possibilities of greater risk. That is what we face in just a few weeks and particularly if this administration—the Trump administration—follows what the President has said over and over in his tweets. We have listened to the President basically say what I consider to be an irresponsible thing: Let the healthcare system fail; then the Democrats will come on their knees and beg us to change it.

Well, if the healthcare system fails, it will not have much impact on the President and his immediate family. They will still have health insurance. But if it fails, many people will not be able to afford basic health insurance. They may lose it, and others may lose their coverage altogether. It could be a personal disaster—a family disaster across the board. I can't believe that anyone—let alone the President—would suggest that is the best path to a constructive outcome. Responsibility suggests that there is a better way.

Thanks to the Affordable Care Act, 20 million previously uninsured Americans have gained healthcare coverage, including more than 1 million people in my State of Illinois. Thanks to the Affordable Care Act, our Nation's uninsured rate is at the lowest level in history. We cut it in half in Illinois. Thanks to the Affordable Care Act, insurance companies can no longer engage in the type of abusive conduct that was well known and well established before the passage of the Affordable Care Act.

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



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Before the passage of that law, insurance companies decided that women, because of their gender, had a pre-existing condition and, therefore, had to pay more for health insurance than men. They used to charge older people exorbitantly more than younger people for insurance. They would deny maternity care, mental health or substance abuse care, deny insurance to people with preexisting conditions or charge them sky-high premiums. They would impose annual or lifetime caps on benefits and kick people off insurance when they got sick and needed care.

The Affordable Care Act changed each and every one of those things. Young adults, in addition, can now stay on their parents' health insurance plans up to the age of 26, and seniors with Medicare are getting free preventive care and substantial discounts on their pharmaceuticals.

The law is far from perfect. Improvements can and should be made. We have done that over the years to Social Security and Medicare. We should do it again here. Six percent of Americans and 3 percent of Illinoisans purchase their insurance in the individual market, and more than 50 percent of those people receive premium subsidies to help them pay for their monthly premiums. For these people, especially those who don't qualify for subsidies, insurance options can be limited or expensive. So while there are clear challenges, we also need to be honest about the scope of the problem and where we need to make fixes. There are ways to help.

First, the 19 States that have refused to expand their Medicaid Program should do so. If they did, 4.5 million more Americans would instantly gain access to healthcare coverage. Many of these people who would gain coverage go to work every single day—sometimes to more than one job a week—and they don't have any healthcare benefits where they work. They have no place to turn. Medicaid can help. If Republicans are serious about wanting to provide people with access to affordable health insurance, Medicaid expansion is the most commonsense measure we can take.

Second, the administration should stop stoking uncertainty in the individual market and commit to paying cost-sharing reduction subsidies known as the CSRs. These Federal subsidies now help 7 million Americans with out-of-pocket health insurance costs. If the Trump administration sabotages the healthcare system and refuses to make these payments, premiums on these individuals would increase by 20 percent next year alone. Now, many of my Senate Republican colleagues, including HELP Committee Chairman LAMAR ALEXANDER of Tennessee, support the CSR payments. I think that is a responsible course of action. In fact, they are even included in some of the Republican healthcare repeal bills. It is time to end this “will they or won't they” game—this uncertainty—and re-

assure Americans and insurers that payments are going to be made. The uncertainty is going to raise the cost of health insurance for everybody. For goodness sake, let's move in the opposite direction, bring stability and bring assurances of where we are headed so that healthcare premiums can stabilize and perhaps not go up as far as they would otherwise.

Third, we should give people in the individual market more affordable options. I support offering a Medicare-like plan. If insurers choose not to participate in the individual market, why wouldn't the government step in and offer an option that individuals can decide whether they want to take it.

Finally, we have to do something about the high cost of prescription drugs. They are contributing directly to massive premium increases. The health insurance companies tell us—in Blue Cross Blue Shield's case in Illinois, they are paying more for prescription drugs in Illinois than they are paying for inpatient hospital care—that is driving premiums higher.

What have we done to deal with prescription drug costs exactly? Nothing. There is nothing in the Affordable Care Act that even monitors these costs when it comes to the public at large and very little, if anything, has been proposed or passed in Congress to deal with these out-of-control increases in prescription drug prices. I think drug companies should have to publicly justify their prices and provide ample lead time when they are going to raise these prices.

Drugs that are developed with significant Federal taxpayer dollars—and that is many of them—whether from the National Institutes of Health or the Department of Defense, should commit to reasonable pricing in their products. If these drug companies are using taxpayer subsidized research to develop a drug, I think they have a special public responsibility when it comes to the marketing of that drug to make sure the pricing is reasonable. The taxpayers helped them to a profitable position. They shouldn't go overboard and overcharge.

Last week when Senator MCCAIN made his appeal on the Senate floor, he really called on us to work together to get something done. I have noticed that there is a bipartisan effort underway in the House. I believe we will hear one this week in the Senate. I am glad that we are heeding his advice. I agree with the Senator from Arizona that it is time for the Senate to turn to regular order, hold hearings, bring in experts, and really work together on proposals that would expand access to affordable health insurance coverage and care. Democrats stand ready to work with Republicans to do this. It is time to put ObamaCare repeal behind us. It is time to move forward on behalf of those who are counting on us.

I yield the floor.

RECOGNITION OF THE MAJORITY LEADER

The PRESIDING OFFICER. The majority leader is recognized.

WORK BEFORE THE SENATE

Mr. MCCONNELL. Mr. President, as I said yesterday, the Senate has a number of nominations to consider in the coming days.

Yesterday we voted to advance a well-qualified judicial nominee to serve on the Eleventh Circuit Court of Appeals.

Soon we will consider one of the President's nominations for the National Labor Relations Board, and we obviously need to confirm an FBI Director. I would hope, with all the threats facing us at home and abroad, our Democratic colleagues would not launch the first filibuster of a nominee to be FBI Director, especially one who was reported out of the Judiciary Committee by a vote to 20 to 0. These are just a few of the many nominees who need to be acted upon and quickly.

Up until now, our friends across the aisle have thrown up one unnecessary procedural hurdle after the next on even the most uncontroversial of nominees. As a result, I noted last month that at the pace we were going, it would take more than 11 years to confirm the remaining Presidential appointments. Well, that pace has slowed even further. Now it would take 12 years.

It is time to end this.

I look forward to our Democratic colleagues cooperating with us to do that so the Senate can spend its time considering other things that are important to our constituents. We have legislation to address over the remainder of this work period as well. Our veterans deserve the best care the country can provide. Under the last administration's VA scandal, the veterans were let down in a big way. Congress came together in the wake of that scandal to pass the Veterans Choice Program, which allows many veterans to skip the long wait and travel times at some VA facilities and access private care.

The House recently acted to shore up this program on an overwhelmingly bipartisan basis, 414 to nothing. Now the Senate needs to act as well.

We also need to renew the FDA User Fee Program. This program is critical to speeding up the drug approval process, and that is important to everyone frustrated by the time and costs of bringing lifesaving drugs to market. Without it, the important work of ensuring that drugs and devices are safe and effective would literally come to a screeching halt. Every 5 years, these agreements need to be reviewed and reauthorized. The Senate legislation to do so was reported by the HELP Committee on a 21-to-2 bipartisan vote, and given the lifesaving developments in immunotherapy and personalized medicine on the horizon, it is more important than ever.

We have important work to do over the remainder of this work period. I hope colleagues will cooperate across the aisle in our efforts to do so.