

## 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 of 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 re-authorized. 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.

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.

AUTHORIZING RECORD  
PRODUCTION

Mr. McCONNELL. Mr. President, as in legislative session, I ask unanimous consent that the Senate proceed to the consideration of S. Res. 237, submitted earlier today.

The PRESIDING OFFICER. The clerk will report the resolution by title.

The senior assistant legislative clerk read as follows:

A resolution (S. Res. 237) to authorize the production of records by the Permanent Subcommittee on Investigations of the Committee on Homeland Security and Governmental Affairs.

There being no objection, the Senate proceeded to consider the resolution.

Mr. McCONNELL. I ask unanimous consent that the resolution be agreed to, the preamble be agreed to, and the motions to reconsider be considered made and laid upon the table with no intervening action or debate.

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

The resolution (S. Res. 237) was agreed to.

The preamble was agreed to.

(The resolution, with its preamble, is printed in today's RECORD under "Submitted Resolutions.")

## EXECUTIVE CALENDAR—Continued

## MEASURE PLACED ON THE CALENDAR—H.R. 3219

Mr. McCONNELL. Mr. President, I understand there is a bill at the desk due for a second reading.

The PRESIDING OFFICER. The clerk will read the bill by title for the second time.

The senior assistant legislative clerk read as follows:

A bill (H.R. 3219) making appropriations for the Department of Defense for the fiscal year ending September 30, 2018, and for other purposes.

Mr. McCONNELL. In order to place the bill on the calendar under the provisions of rule XIV, I object to further proceedings.

The PRESIDING OFFICER. Objection is heard.

The bill will be placed on the calendar.

Mr. McCONNELL. I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

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 President, I ask unanimous consent that the order for the quorum call be rescinded.

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

## RECOGNITION OF THE MINORITY LEADER

The Democratic leader is recognized.

## HEALTHCARE

Mr. SCHUMER. Mr. President, the American people are looking to Congress to turn the page on healthcare and start working on bipartisan improvements to our healthcare system. Stabilizing the individual market is

the first thing we should all focus on. The repeated attempts to repeal and replace the healthcare law, as well as the administration's threat to stop making the cost-sharing payments that help keep premiums down and keep markets stable, have injected massive uncertainty into the system.

Insurers hate nothing more than uncertainty. It drives them to jack up the costs of premiums and to pull out of markets. Already, insurers in three States have issued two separate sets of proposed rates for 2018—one if the administration makes the cost-sharing payments and one if it does not. The set of proposed rates if the payments are not made is 20 percent higher in all three States. I don't know the third, but two of them are North Carolina and Pennsylvania, which are very significant States. In Idaho, the State insurance commissioner said that rates on the most popular plans would be 50 percent higher next year because of "the potential refusal by the Federal Government to fund the cost share reduction mechanism." That comes from the State insurance commissioner. I do not know if that is an elected position, but whether it is elected or appointed, my guess is that he is a Republican. They do not elect too many Democrats out there.

The administration is supposed to announce today or sometime this week its decision on whether to make the next set of payments. The ball is in the President's court. He can make the payments as the law requires and needs or he can sabotage our healthcare system and impose a Trump premium tax of 20 percent higher premiums on the American people next year by not extending the cost-sharing program.

Why would he do this? Why would he raise people's rates? His only stated reason is petty, is childish, is un-Presidential. He will get back at people because his hope to repeal and replace was rejected. You do not hurt innocent people when you lose politically. That is not Presidential. That is not, frankly, what an adult does. The ball is in the President's court, as I said, and let's hope he does the right thing.

President Trump has already made it harder for Americans to afford insurance next year by publicly rooting for our Nation's healthcare system to collapse, injecting a baseline of uncertainty into the system. President Trump would make things a whole lot worse by not making the next set of payments—20 percent higher premiums, more bare counties, even more market instability.

The American people need a President who puts their interests first, not someone who plays political games with their healthcare. The American people can ill afford a Trump premium tax this year, and it is completely avoidable. All the President has to do is to make the payments and carry out the law as he is supposed to. Afterward, Congress should move to guarantee these payments permanently or at least for a significant period of time.

This uncertainty caused by the President's threats has been the most destabilizing factor in the individual market. That is not according to CHUCK SCHUMER or any Democrat; it is according to the insurers' largest trade group, AHIP. The President has proved that he cannot be trusted to faithfully execute the procedures that keep our healthcare system on track.

The only good news here is that there are moves by people on both sides of the aisle in this Senate to take some of this uncertainty off the table by guaranteeing these payments in the future.

My good friends, the chairman of the HELP Committee, the senior Senator from Tennessee, LAMAR ALEXANDER, and the ranking Democratic member, Senator PATTY MURRAY, have an ability to work together on many issues. I know they are meeting almost as we speak—in 5 minutes—to discuss how we can move forward. I spoke to Senator ALEXANDER in the gym, where the Presiding Officer, I want to tell his constituents, was exercising and staying fit, too, and he seemed very eager to try to work together to stabilize the system.

## TAX REFORM

Mr. President, on another matter—taxes—it is clear that our economy would benefit from a bipartisan package of changes to our Tax Code that would focus laser-like on increasing wages for working families, improving middle-class job growth, and promoting domestic investment, while modernizing our outdated business and international tax system.

From what we have heard from the White House so far, its plan would not do any of that. We Democrats are open to a bipartisan discussion on those issues, but we also believe that, in an economy in which wealth is seemingly funneled to the already wealthy, it is working Americans who deserve tax relief, not those at the very top. The wealthiest Americans have seen outsized benefits from recent economic gains. Now is not the time to shower millionaires and billionaires with another tax break while working Americans continue to struggle to make ends meet.

Today, 45 Members of the Democratic caucus sent a letter to our Republican friends, writing that we are open to bipartisan discussions on tax reform but that we will not support any effort to rewrite the Tax Code to give another tax break to the top 1 percent or add even more to the deficit and the debt.

Here are our three principles outlined in the letter:

First, no new tax breaks for the top 1 percent.

Second, it must not increase the debt and must be fiscally responsible.

Third, we must use a regular order process that will ensure true bipartisan input in the product, not the reconciliation process that was used in healthcare, which excluded the Democrats from the get-go and, in part, led to the failure of the Republicans to