

Whereas more than 1 of 4 older adults in the United States falls each year;

Whereas falls are the leading cause of both fatal and nonfatal injuries among older adults;

Whereas, in 2014, approximately 2,800,000 older adults were treated in hospital emergency departments for fall-related injuries and more than 812,000 of those older adults were subsequently hospitalized;

Whereas, in 2014, more than 27,000 older adults died from injuries related to unintentional falls and the death rates from falls of older adults in the United States have risen sharply in the last decade;

Whereas, in 2015, the total direct medical cost of fall-related injuries for older adults, adjusted for inflation, was \$31,000,000,000;

Whereas, if the rate of increase in falls is not slowed, the annual cost of fall injuries will reach \$67,700,000,000 by 2020; and

Whereas evidence-based programs reduce falls by utilizing cost-effective strategies, such as exercise programs to improve balance and strength, medication management, vision improvement, reduction of home hazards, and fall prevention education: Now, therefore, be it

Resolved, That the Senate—

(1) designates September 22, 2017, as “National Falls Prevention Awareness Day”;

(2) recognizes that there are proven, cost-effective falls prevention programs and policies;

(3) commends the 72 member organizations of the Falls Free Coalition and the falls prevention coalitions in 43 States and the District of Columbia for their efforts to work together to increase education and awareness about preventing falls among older adults;

(4) encourages businesses, individuals, Federal, State, and local governments, the public health community, and health care providers to work together to raise awareness of falls in an effort to reduce the incidence of falls among older adults in the United States;

(5) recognizes the Centers for Disease Control and Prevention for its work developing and evaluating interventions for all members of health care teams to make falls prevention a routine part of clinical care;

(6) recognizes the Administration for Community Living for its work to promote access to evidence-based programs and services in communities across the United States;

(7) encourages State health departments and State units on aging, which provide significant leadership in reducing injuries and related health care costs by collaborating with organizations and individuals, to reduce falls among older adults; and

(8) encourages experts in the field of falls prevention to share their best practices so that their success can be replicated by others.

AUTHORITY FOR COMMITTEES TO MEET

Mr. BURR. Mr. President, I have 10 requests for committees to meet during today's session of the Senate. They have the approval of the Majority and Minority leaders.

Pursuant to Rule XXVI, paragraph 5(a), of the Standing Rules of the Senate, the following committees are authorized to meet during today's session of the Senate:

COMMITTEE ON AGRICULTURE, NUTRITION, AND FORESTRY

The Committee on Agriculture, Nutrition, and Forestry is authorized to

meet during the session of the Senate on Tuesday, September 19, 2017 at 9:30 a.m., in 216 Hart Senate Office Building, in order to conduct a hearing to consider the nominations of Ted McKinney and Stephen Censky to the U.S. Department of Agriculture.

COMMITTEE ON ARMED SERVICES

The Committee on Armed Services is authorized to meet during the session of the Senate on Tuesday, September 19, 2017, at 10 a.m., in open session, to receive testimony on recent United States Navy incidents at sea.

COMMITTEE ON COMMERCE, SCIENCE, AND TRANSPORTATION

The Committee on Commerce, Science, and Transportation is authorized to meet during the session of the Senate on Tuesday, September 19, 2017 at 10:30 a.m. in room 253 of the Russell Senate Office Building.

COMMITTEE ON ENERGY AND NATURAL RESOURCES

The Senate Committee on Energy and Natural Resources is authorized to meet during the session of the Senate in order to hold a Business Meeting on Tuesday, September 19, 2017, beginning at 9:30 a.m. in Room 366 of the Dirksen Senate Office Building in Washington, DC.

COMMITTEE ON ENERGY AND NATURAL RESOURCES

The Senate Committee on Energy and Natural Resources is authorized to meet during the session of the Senate in order to hold a hearing on Tuesday, September 19, 2017 at 10 a.m. in Room 366 of the Dirksen Senate Office Building in Washington, DC.

COMMITTEE ON FINANCE

The Committee on Finance is authorized to meet during the session of the Senate on Tuesday, September 19, 2017 at 10 a.m., in 215 Dirksen Senate Office Building, to conduct a hearing entitled “Business Tax Reform.”

COMMITTEE ON FOREIGN RELATIONS

The Committee on Foreign Relations is authorized to meet during the session of the Senate on Tuesday, September 19, 2017 at 10 a.m., to hold a business meeting.”

COMMITTEE ON FOREIGN RELATIONS

The Committee on Foreign Relations is authorized to meet during the session of the Senate on Tuesday, September 19, 2017 at 10:15 a.m., to hold a hearing entitled “Nominations.”

COMMITTEE ON HEALTH, EDUCATION, LABOR, AND PENSIONS

The Committee on Health, Education, Labor, and Pensions is authorized to meet during the session of the Senate, in order to conduct a hearing entitled “Nominations” on Tuesday, September 19, 2017, at 10 a.m., in room 430 of the Dirksen Senate Office Building.

SELECT COMMITTEE ON INTELLIGENCE

The Senate Select Committee on Intelligence is authorized to meet during the session of the 115th Congress of the U.S. Senate on Tuesday, September 19, 2017 at 2:30 p.m. in room SH-219 of the

Hart Senate Office Building to hold a closed briefing.

NATIONAL DEFENSE AUTHORIZATION ACT FOR FISCAL YEAR 2018

Mr. MCCONNELL. Mr. President, I ask unanimous consent that notwithstanding the passage of H.R. 2810, as amended, that amendment No. 545 be considered and adopted.

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

The amendment (No. 545) was agreed to as follows:

(Purpose: To strike the section relating to the treatment of storm water collection systems as utility systems)

Strike section 2814.

FINANCIAL STABILITY OVERSIGHT COUNCIL INSURANCE MEMBER CONTINUITY ACT

Mr. MCCONNELL. Mr. President, I ask unanimous consent that the Senate proceed to the immediate consideration of H.R. 3110, which was received from the House.

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

The senior assistant legislative clerk read as follows:

A bill (H.R. 3110) to amend the Financial Stability Act of 2010 to modify the term of the independent member of the Financial Stability Oversight Council.

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

Mr. MCCONNELL. Mr. President, I ask unanimous consent that the bill be considered read a third time and passed and the motion to reconsider be considered made and laid upon the table.

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

The bill (H.R. 3110) was ordered to a third reading, was read the third time, and passed.

NATIONAL FALLS PREVENTION AWARENESS DAY

Mr. MCCONNELL. Mr. President, I ask unanimous consent that the Senate proceed to the consideration of S. Res. 265, 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. 265) designating September 22, 2017, as “National Falls Prevention Awareness Day” to raise awareness and encourage the prevention of falls among older adults.

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

Mr. MCCONNELL. Mr. President, 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. 265) was agreed to.

The preamble was agreed to.

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

ORDERS FOR THURSDAY, SEPTEMBER 21, 2017, AND MONDAY, SEPTEMBER 25, 2017

Mr. MCCONNELL. Mr. President, I ask unanimous consent that when the Senate completes its business today, it adjourn to then convene for a pro forma session only, with no business being conducted, on Thursday, September 21, at 8:30 a.m.; I further ask that when the Senate adjourns on Thursday, September 21, it next convene at 4 p.m. on Monday, September 25; further, that following the prayer and pledge, the morning hour be deemed expired, the Journal of proceedings be approved to date, the time for the two leaders be reserved for their use later in the day, and morning business be closed; further, that following leader remarks, the Senate proceed to executive session and resume consideration of the Emanuel nomination, with the time until 5:30 p.m. equally divided between the two leaders or their designees; finally, that at 5:30 p.m., all postcloture time be expired and the Senate vote on the confirmation of the Emanuel nomination with no intervening action or debate, and, if confirmed, the motion to reconsider be considered made and laid upon the table, the President be immediately notified of the Senate's action, and the Senate then resume legislative session.

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

ORDER FOR ADJOURNMENT

Mr. MCCONNELL. Mr. President, if there is no further business to come before the Senate, I ask unanimous consent that it stand adjourned under the previous order, following the remarks of Senator BLUMENTHAL.

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

The Senator from Connecticut.

HEALTHCARE

Mr. BLUMENTHAL. Mr. President, I thank the majority leader for yielding me this time before we close business today, as the last speaker of the day.

Let me first of all say how deeply we feel about folks who have been affected by these mammoth storms in the gulf coast, in Florida, and in the Virgin Islands and Puerto Rico, as well as others elsewhere. Our hearts and prayers are with them.

I am here today to talk about another potential disaster to our country, although it is of a completely different kind and not a physical disaster made by nature but a disaster potentially of our own making—one that can be pre-

vented and avoided. I am horrified that I am here again, fighting back again, against a proposal that would devastate the health and finances of so many families in Connecticut and around the country.

This proposal—the so-called Graham-Cassidy bill—is cruel beyond measure. It is undoubtedly the most extreme proposal we have seen from my Republican colleagues in their political crusade to destroy the successes of the Affordable Care Act. How illogical and irresponsible to pretend, as my Republican colleagues continue to do, that any proposal that cuts billions of dollars from Medicaid and decimates important Affordable Care Act provisions protecting people with preexisting conditions and high medical costs will somehow result in a better healthcare system. In fact, it will vastly diminish and in some respects destroy that system.

The Republican obsession with repealing the Affordable Care Act and gutting Medicaid really has to end, and it has to end today.

My constituents in Connecticut made themselves heard loud and clear in saying that past proposals were sickening attempts to ruin the gains we have made in providing better healthcare to many people. Those folks who came to town meetings and emergency field hearings, who wrote, who phoned, who made their views known, were the catalyst in defeating these ill-advised efforts before. I can assure you that, once again, they will be heard. They will make themselves heard. They will, once again, guarantee its defeat.

Under this lethal proposal, hundreds of billions of dollars will be cut from Medicaid. Those severe cuts will cause Connecticut more than \$2 billion by 2026. In 2027 alone, without the reauthorization of funds, Connecticut would lose \$4 billion. In 2027 alone, \$4 billion would be lost to Connecticut without reauthorization. Those are not just dollars, those are lives. They are hundreds of thousands of lives.

This bill would end the patient protection that countless Americans have come to rely on in their oftentimes lifesaving care. States would allow insurance companies to reimpose annual caps and lifetime limits; insurers could decide to drop essential health benefits, like maternity care or mental health services; and those with preexisting conditions could see their premiums skyrocket, leaving them with no affordable options and nowhere to turn. It would be a humanitarian catastrophe. This is not hyperbole. It is not exaggeration. It is reality.

In a recent report on this legislation, there was a finding that a person with metastatic cancer would see a \$142,650 premium surcharge; a pregnancy would mean a \$17,320 premium surcharge; and, during a deadly and unrelenting opioid epidemic, people struggling with substance abuse disorder could expect to see a \$20,450 premium surcharge. These effects are immoral and incomprehen-

sible. They will lead to many Americans needlessly losing their health insurance and very likely their lives.

When I see the true effects of this bill and what they are likely to be, I can't help but think of a little boy in Connecticut whom I mentioned on the floor before. He is 7-year-old Conner Curran. Conner has Duchenne muscular dystrophy. It is a chronic and terminal condition that will slowly erode his motor functions unless there is a cure, and none exists now. This disease will eventually take his life. He is a young man of extraordinary courage and strength and so is his family.

His parents have told me that although he appears healthy, he will slowly lose his ability to run, walk, or even hug them goodnight. In fact, earlier this summer, just days before the last Republican effort to gut Medicaid and repeal the Affordable Care Act—which failed in the Senate, fortunately—Conner's family had two lifts installed in their home so he could move up and down the stairs more easily. The video shows Conner's infectious smile as he tries out the new lift, not fully understanding the disease that necessitates it but enjoying his newfound freedom. He is just a little kid.

His mom wrote that this experience shows just how important Medicaid is to their family. As Conner gets older, he will only need more and more help, more medical services and equipment, and more financial support for his family to enable that kind of care. He will need a loving and compassionate healthcare system that will protect and care for him when he is at his most vulnerable. That is the only way he will have a fair chance at life. This bill, to put it mildly, deprives him of that fair chance.

So I question whether my Republican colleagues can look Conner or his family in the eye and explain to them why protections for children with preexisting conditions should be weakened, diminished, eviscerated. I question whether they can look at Conner's smile and tell him why Medicaid will be eliminated. This is the program that one day will make sure he has everything he needs to live. It is a program that should be enhanced, not cut by hundreds of billions of dollars.

Tell his parents why the insufficient or temporary funds my colleagues have proposed to replace Medicaid will run out in 10 years, as a shadow of Medicaid that you have left behind goes dark. See whether Conner's family cares about your legislation. See if your empty promises leave them reassured.

I can tell you, Conner's parents are two of the kindest, most wonderful people you will ever meet. They are also among the hardest working. They worry about countless things every single day. They worry about Conner's slowing body and medical research that could save him before that pernicious disease takes his life. They worry