

HEALTHCARE, THE DREAM ACT,
AND TAX REFORM

Mr. VAN HOLLEN. Mr. President, we had some good news—or I should say the American public had some good news today in the announcement from the Republican leader that the Senate will not be proceeding to debate what is known as the Graham-Cassidy legislation, the latest version of TrumpCare, which would have had a devastating impact on our healthcare system and created harm throughout the country and in my State of Maryland. In fact, I know millions of Marylanders will be breathing a sigh of relief as a result of this decision.

Mr. President, I ask unanimous consent to have printed in the RECORD the personal testimonials of Marylanders who, in the last few days, have sent to me their very powerful stories about how the Graham-Cassidy legislation would have harmed their loved ones.

There being no objection, the material was ordered to be printed in the RECORD, as follows:

VAN HOLLEN CONSTITUENT HEALTHCARE/ACA STORIES

9/19/2017

“I am a Registered Nurse who specializes in perianesthesia care. Please do not wind back the clock and make it harder for people to seek care during an illness. I am heartbroken that I have cared for patients who delayed care for weeks and months because they were more afraid of medical bills than dying. When people are ill and do not seek care, they jeopardize their lives—and in the case of communicable diseases they jeopardize the lives of others by delaying care and treatment.”—Beth

“My 14 year old daughter is a leukemia survivor. She has multiple serious long term side effects from her chemotherapy regimen. By repealing Obamacare, she becomes uninsurable due to her preexisting conditions and the fact that she has met her life time maximum many times over.”—Caroline

“I have a neuromuscular autoimmune disease called Myasthenia Gravis. It affects my voluntary muscles, muscles I use to walk, carry my groceries, see, swallow and breathe. I already have to fight with my insurance to get them to pay for my immunoglobulin infusions, which most of the time they deny, which sends me to the emergency room because I can't breathe. If for any reason I have to find a new insurance, such as my husband getting a different job, it could be a death sentence for me. Just one month of outpatient immunoglobulin therapy is \$27,000. My immunosuppressants I have to take daily can run up to \$2000 for a 3 month supply. Then couple my health issues and the cost of medications and I would probably die within a month or less. I didn't ask to get sick. I never imagined at 41 I would be facing my mortality.”—Chrissy

“My older sister has been profoundly disabled by mental illness for the last 50 years. She is 62 now. She has severe behavioral issues. She cannot work. . . . She has been one step from living on the street if it weren't for Medicaid and SSDI. She is not getting rich from these safety nets by any means. If these go away the republican congress and this presidential administration will be responsible for making challenging lives that much more miserable. We don't treat our most vulnerable as if they are disposable.”—Cat

“My son, 6, has a complex congenital heart defect called Hypoplastic Left Heart Syn-

drome (HLHS). He has had four open heart surgeries and several cardiac catheterizations. A transplant could be needed one day. I worry every day about how he will have heart care should something happen and when he is too old to be on our plan.”—Dara

“I am a nurse practitioner and worked for the VA Healthcare System for 15 yrs. While this system is not without its challenges, without it, many of our veterans would not be receiving the healthcare and support they need to remain healthy and productive members of society. They would not be able to work and support their families and as a result, would likely not seek healthcare until they needed emergency services. By then their previously untreated condition may already have worsened to the point of permanent disability or death, leaving their families to fall into poverty, despair and having to rely on Gov't. Assistance. If they do not die, their disability care costs far more than the early and maintenance treatment they should have been receiving even if they needed this maintenance treatment for a lifetime!”—Becky

“My 25 yr old son has Crohn's disease. His entire large intestine was surgically removed when he was 17. He must get a remicade infusion every 6 weeks to keep his immune system from attacking his intestines. No hospital ER will administer his remicade infusion as this is considered maintenance of his disease. When his situation becomes life threatening and he needs the intervention of the ER. . . . the damage is already done. Why don't our republican senators get this? Shouldn't they be aware of this. . . . if they think they are the experts, representing us? Trey will lose his insurance next June when he turns 26.”—Darlene

“Deep Medicaid Cuts would be devastating to the millions of people with disabilities. The Home and Community Waivers would be in jeopardy. Because of the Community Pathways Medicaid Waiver, Our 32 year old son is able to live in his own apartment, volunteer in the community, hold a 30 hr week job in Gaithersburg, and have a social life. Without the supports he would lose his independence. . . . Please don't make deep cuts to Medicaid.”—Reda

“We have 14 year-old twins, both of whom have Cerebral Palsy. . . . It isn't their fault that they have a disability and they should not be punished for it.”—Danica

“I work with medically fragile children with disabilities. Without Medical Assistance, these children and their families cannot afford the equipment, supplies & therapies that help them grow and thrive.”—Carmel

“I'm 48. I was diagnosed with scoliosis at age 13, and I had spinal fusion surgery to save my life from it at age 21. The surgery saved my life, but also had lifelong consequences. I have had this pre-existing condition for most of my life. My parents, and then me when I came of age, have always had to be careful to make sure that pre-existing conditions were covered. I once turned down a job in part because their insurance didn't cover pre-existing conditions. The ACA meant I no longer had to worry. Today, I work as a contractor for the US military, helping defend US cyberspace. I wouldn't be here, doing important work and being a productive member of society, if I couldn't get coverage for my pre-existing conditions.”—Bruce

“Obamacare saved my roommate's life. He was a server at a very popular restaurant, hardworking, got good tips but could not afford health insurance. He got prostate cancer. Obamacare got him the care he needed.”—Deborah

“I had a mitral valve prolapse. It was discovered when I was a little girl, and basi-

cally that means that one of the valves in my heart never fully closed. I was followed annually by a cardiologist, and she told me to expect to have it fixed in my 30s. She also told me to have children in my 20s because if I needed to have it replaced (not just repaired), I would need to take blood thinners that would not allow me to be pregnant. I had my heart repaired four days after my 30th birthday, when my kids were 5 and 9 months. It was not fun, especially being a mom with little ones, but I am as good as new five years later. Only my health insurance doesn't think so. Prior to the ACA, I was rejected by the BCBS policy my husband's company was providing for us and his employees. They told us they were happy to offer coverage for my family but would not include me on our plan. Everyone gets sick. Everyone gets old. You can do everything right and take care of yourself—and still have a preexisting condition that makes you more expensive to cover. And without the ACA, I may find myself having to fight for health insurance again.”—Justine

“My daughter was diagnosed with a rare Autoimmune disorder at age 18. . . . Thanks to Obamacare, she was able to stay on our insurance until age 26 then purchase her own through her employer. Preventative care keeps her in remission. Losing the ability to afford insurance means she cannot afford care. One medication alone costs over \$2,000/month!”—Cheryl

“I am the first to acknowledge that there are major problems under the ACA. Premiums and deductibles are far too high and increasing far too much annually. I am self-employed and the individual market is getting exceedingly worse each year. CareFirst proposed a 50% rate hike for 2018 for plans that already have a \$6500 deductible. This is not sustainable. However, prior to the ACA, I was denied coverage by every insurer in the State of Maryland. The reason for the denial was that I was prescribed Lovenox, an injectable blood thinner, when I was pregnant with my three children. The letters denying coverage said I was at increased risk for thrombosis, despite the fact that I had medical documentation stating otherwise because my particular blood clotting concerns exist only in pregnancy. Before the three children in my profile picture were born, our first daughter was stillborn and I had two miscarriages. Initial pathology following her stillbirth showed that the placenta was badly clotted and blood testing showed that my Protein S levels were low. Following the two miscarriages and substantial blood work, my doctors concluded that my protein S levels dip to deficient levels in pregnancy and that I needed blood thinner in order to maintain a pregnancy. I find it ironic that the “pro-life” Republican party wishes to punish me and my family because of medication I took to ensure that my children were born alive and well. We need to fix the ACA, but this is not it.”—Kim

“I have been a type I diabetic for 25 years. When my husband and I had health insurance coverage through his employer, my prescription for life-sustaining insulin cost us \$300 each month. After he began working for a new employer who did not offer health insurance, we were encouraged to shop for our healthcare on the Maryland Exchange. With our ACA plan, my insulin is now much more affordable at \$50 a month. If I have to go back to paying exorbitant amounts of money for a medication I need in order to survive, I will be forced to cut corners. If I do not take the necessary amount of insulin, I face a host of complications including kidney failure, neuropathy, blindness, and so much more. My husband and children should not have to watch me suffer the preventable side-effects of this disease. Like all other

Americans, I deserve affordable health insurance coverage and the Affordable Care Act provides that for me!"—Katie

"I am a 55-year-old humorous, fun-loving, and fiercely idealistic daughter, sister, friend, 5th grade teacher, volunteer, advocate, and 9 year breast cancer SURVIVOR. Please!! Do not allow them to change the words "breast cancer survivor" into something I loathe and fail to celebrate!! If the GOP is successful, which I CANNOT bear to consider, I become no more than a "pre-existing condition and cancer VICTIM" in the eyes of our government, insurance companies, and the healthcare system. If the GOP is successful, I become a 55-year-old angst-ridden daughter, sister, friend, 5th grade teacher, volunteer, advocate, and SCARED AS HELL breast cancer VICTIM who fears bankruptcy and spends countless hours contemplating my mortality. Please!! Keep fighting for all of us. I sincerely believe that EVERYONE IS A SURVIVOR—NOT A VICTIM—OF SOMETHING IN THIS LIFE!! Please!! Do not let the GOP take control of our narrative. We all have people who count on us. If we cannot take care of ourselves because of sky-rocketing medical costs . . . If we cannot function in our jobs properly because of constant fear and worry . . . How can we possibly take care of our beloved family, friends, and those in our care both professionally and in our volunteer endeavors???"—Carla

"Thank you for fighting this. I am a 7 1/2 year cancer survivor, but could be prohibited from coverage if my previous diagnosis is included in pre-existing condition exemptions."—Pat

"My daughter is medically fragile, and dependent on a ventilator, due to a genetic condition (Neurofibromatosis type 1, also known as NF). She also has a rare cerebro-vascular disorder, called Moyamoya Disease that caused her to suffer two strokes at age 15 months old. Daphne has been through heart surgery, neurosurgeries, chemotherapy, and countless hospitalizations. She also suffers from epilepsy. Because of her vast health issues, she requires 24 hour care and receives in-home nursing through Medicaid for 16 hours a day. Cuts to Medicaid coupled with allowing insurers to deny for pre-existing conditions, and bringing back high-risk pools would put the most vulnerable people at risk . . . Every ACA repeal bill that has come forward has been a threat to my daughter's wellbeing, and this one is no exception. This is not the right path forward. The Senate should be working hard to make sure every American has access to healthcare, every Senator should be looking out for the most vulnerable Americans. There are measures needed to improve our healthcare system; but cutting access to healthcare to the people who need it most is not an improvement. For families like mine, it would be devastating."—Jenny

"In 1994, I was 24 years old and working at Dartmouth College in New Hampshire, when I suddenly got very sick and was hospitalized. I was diagnosed with acute pancreatitis of unknown cause, and spent 11 weeks in the hospital and had 2 surgeries. I did have health insurance, but the final costs from that initial illness that were billed to insurance totaled over \$250,000. Two years later I experienced a recurrence of the pancreatitis, and I was told that I now was almost assuredly going to have what is known as Idiopathic Recurrent Acute Pancreatitis. This time I was only hospitalized for 30 days, but the costs were mounting, and I began to be afraid that I was going to easily hit the one million dollar lifetime limit that was currently part of my policy. I also was unable to consider moving away from New Hampshire to be closer to family resources and support,

for example), because of the strict Pre-existing Conditions clauses at that time. In 1998, when President Clinton signed the bill that forbade insurance providers from denying coverage for preexisting conditions, I was able to change jobs and move back to my hometown of Baltimore, Maryland. Now, after working for The Johns Hopkins University for 15 years, I have been forced by necessity to leave my job and obtain Social Security Disability benefits, and now I am also being covered primarily by Medicare. I am already living on a fixed income, at age 47, and I am not making enough money to even live without a roommate, let alone enough money to face increasing premiums as well as decreasing coverage for my medical care. Please, please, please do not let Congress pass this bill!! I would be honored for you to tell my story, and I hope that maybe it could be eye-opening for some of the representatives who seem to believe that if you are a well-educated, younger, tax paying citizen these changes won't have a big impact. This kind of unexpected medical disaster could happen to anyone."—Nicole

"11 months ago, I had to consent to a C-section at 28 weeks pregnant due to pre-eclampsia. The only thing worse than having to put my tiny son's health in jeopardy to save my life was the fear of my dying and leaving my husband to raise a 4 year old and a potentially medically-fragile infant. Now I worry, will his prematurity and my high blood pressure come back to haunt us? I got through his 142 day stay in the NICU by dreaming of what his life could be. I dream of him running when he is two, arms outstretched, of when he is 22 and graduates from college, maybe to be a NICU nurse, of when he gets married and I dance with him . . . My nightmare is that this will affect our ability to have that future I dreamed of, mostly that I won't be there for him. We have fought so hard to get our own "normal", please keep fighting for us."—Rachel

"I am a Montgomery County Maryland resident and have an aged severely disabled aged brother in a nursing home who depends on Medicaid and an adult daughter with Crohn's disease and a preexisting condition she acquired as a teenager and both of their lives will be put in jeopardy if they lose their current . . . medical coverage and I am worried and angry at the cruel and heartless Republican attempt to reduce or eliminate their life saving health coverage."—Richard

"My husband and I have both had life threatening medical conditions. To lose our health insurance due to pre-existing conditions will be a death sentence when we run out of options. I worry most though for our medically fragile children and seniors."—Val

"Twelve years ago, before the Affordable Care Act, I was a single parent of two school age children and was denied health insurance coverage because of pre-existing conditions. I frantically searched for employment where I could have coverage in an employer plan. I was fortunate to find this . . . In 2014 I had to leave employment to become a care giver for my husband who was diagnosed with Parkinson's disease. I considered myself fortunate to be able to do this because the Affordable Care Act would allow me to purchase health insurance without worrying about my pre-existing conditions. My premiums and deductibles have been very expensive, but at least I could obtain coverage. I remember the stress and fear from being previously denied coverage."—Roberta

"My 25 year old daughter is about to hit her 90-day sobriety date, thanks to her hard work, and the treatment she is receiving at a great rehab in PA. She is still going to outpatient, and she is living in a sober house with roommates. My health insurance has covered her treatment. Thank God she is

still able to be covered under our family plan. Please do not take the chance for a life in recovery, and addiction treatment services away from our children. It is saving lives."—Deb

"It would be a death sentence for me. As it is now I am fighting to get on disability now. I have 4 serious pre-existing conditions. The ACA saved my husband's life no joke as he had cancer life threatening cancer and without it he would NEVER had survived period. He also has 3 other preexisting conditions. Our medical bills as it stands now are more than all our other bills combined per month. In the middle of an opiate epidemic as well OMG addiction and or mental health issues are considered pre-existing conditions what are they thinking and ripping millions of people safety net away from them in the middle of this crisis is not human."—Jean

"I have asthma, which was and is a pre-existing condition. Early in my twenties when I was in college but not able to be on my parent's insurance, I would put off going to the doctor because I couldn't afford it when I got sick. Consequently, this meant I ended up in the ER for asthma related problems. Every 6 months I would come down with pneumonia because there was no vaccine for it then, and each time it meant a visit to the ER for intensive breathing treatments because I could not breathe. This happened so many times I eventually had to declare bankruptcy to get out from under the bills. Today my asthma medicine is covered with a nominal co-pay, I can see my doctor before a case of bronchitis becomes something worse, and I do not need to go to the ER for treatment. Now I have a twenty year old in college who has pre-existing conditions, unlike me she is still covered under our health insurance and her prescriptions are affordable. What happens to me, my daughter, and my husband who all have pre-existing conditions if our insurance is allowed to go back to the old days of charging more for our coverage? What happens to my daughter if she can no longer be on our policy? Surely the Republicans can't think that repealing these protections and replacing them with nothing is something good for our country? Are they that out of touch with the middle class? Please do not pass this, you will be hurting many, many people."—Pamela

"As a type 1 diabetic, I used to skimp on my insulin to make the bottles last longer. Keeping my blood sugar levels higher than they had to be is catastrophically unhealthy. Please don't make people with chronic illnesses have to choose between food and medicine!"—Sandra

"My sister who has Cerebral Palsy and is able to live at home at the age of 41 with my parents would lose the medical coverage and supports that ensures her wellbeing. My father who is 87 years old would now be subject to pre-existing condition exclusions. This is a man who served in the army and retired from the Postal Service in his 70's. He grew up in the Great Depression and worked tirelessly his entire life. Name me one person who does not have a pre-existing condition by the age of 87."—Bonnie

"My daughter has had pre-existing conditions since she was 22 months. She is now 23, still with developmental delays and chronic medical conditions. She will need good care and Medicaid and a Medicaid waiver program the rest of her life. She will never be able to work. If there are cuts to Medicaid and she gets denied private insurance for pre-existing conditions, our government is basically telling me and telling her, "We really don't want her to live. We really only want healthy and non-disabled people living in America. We would like her to die." That is exactly what their plan sounds like to me."—Kimbell

“I am guilty of being born with an autoimmune condition. For much of my young adult life I was not insurable because of the pre-existing condition clause, and arthritis caused by my autoimmune condition left me stuck in bed more days than not. Since the ACA, I am insured and as a result have been able to start a treatment for my condition which is literally life-changing. I can leave the house, I can have a normal life, and I’m even fostering a dog for a rescue that took dogs from the Harvey shelters before the storm, to make room for displaced pets. He needs a walk every day, at least once a day, and I can do that. The repeal makes no sense—if I can buy insurance I can work and contribute to the community. If I can’t get insurance I can’t get healthcare, and without healthcare I can’t work, I can’t contribute to society through volunteering—how do people benefit from making sure people like me can’t get the healthcare we need to be able to have lives? Even if you don’t care about us as people, society benefits when more people can work and pay taxes and volunteer.”—Kris

“In 2006 at age 41, I was diagnosed with a rare, incurable and life-threatening disease. I had insurance through a Health Savings Account, which had a \$3,000 annual deductible and monthly premiums that increased 400% in 5 years. I’ve been disabled by this illness and many complications and rely on Medicare and Medicaid to survive. If either is cut I won’t be able to afford the highly specialized medical care this rare disease requires. I will die as a result. Please do everything in your power to protect all of us whose lives are at risk.”—Sangye

“My Wife’s Father, Dennis, passed away a little over two years ago of congestive heart failure. He wasn’t even 60. He was a CT Native that lived alone in SC with just his beloved German Shephard Bobbi at his side. While his medical issues were great, he managed to hide most of them from the family Had he gotten treatment early his conditions could have been easily managed but because he went untreated for years, his issues became fatal. There was eventually nothing that could be done. The saddest part of this is that we fought with him for years to sign up under the Affordable Care Act. He refused because he felt this was a hand out and he was too proud for that. When he eventually became too weak to carry out even the most basic tasks, which included hiding his condition from the family, he finally agreed to sign up. While he did sign up, he would never see his first appointment. He passed in his sleep before it could even be scheduled Dennis should have lived. He could have lived. If he simply had access to the care he needed all along then he would still be with us. But we don’t get to have that. Instead my Wife has a hole in her heart that may never be repaired. Tormented with the “what ifs” that can never be answered. The only thing we can be thankful for in this is that we were able to claim Bobbi, the dog he lived for. She has become a truly beloved member of our family.”—Jason

“Thank you for fighting for us. If pre-existing conditions aren’t covered I will quickly go bankrupt. I will lose my house that I just purchased. I have a good, steady job and a Master’s degree but this would quickly bankrupt me.”—Rebecca

“People need to understand how easy it is to feel like a relatively healthy person, then be saddled with a “pre-existing condition”. I work in a field where it is difficult to get employer sponsored health insurance. Before the ACA, when I was applying for my own policy I had to go through underwriting. They called every doctor I ever had. They requested that my entire file be sent to the insurance company. It was very invasive

. . . . Finally, I received a letter. I do not qualify for insurance due to pre-existing conditions. I have never been seriously ill, never been hospitalized. I use an asthma inhaler as needed and I take one generic pill every day for another condition. This was enough to deny me. I had to go on a high risk plan which cost me almost as much as our ACA plan for a family of three. There was no drug coverage whatsoever. I had to pay list price for drugs I had a well-paying job with no dependents and I still needed help from my parents to pay for all of this With this new bill, these are the days we are going back to. We can’t. We just can’t.”—Hilary

Mr. VAN HOLLEN. Now that we have decided not to vote on that legislation, it is essential that this Senate move forward expeditiously to take up bipartisan legislation that has been in the works through Senator ALEXANDER and Senator MURRAY. Those conversations were bearing fruit. They were productive until the Senate decided to veer off, once again, to try to pass legislation that would have destroyed the Affordable Care Act. But now that we have decided not to go down that path, we have to quickly come back to those bipartisan talks and adopt some commonsense measures to strengthen the insurance system in a smart and targeted way.

There were many commonsense ideas that are part of those discussions, including making more permanent the so-called cost-sharing provisions, which help to lower the costs of healthcare and help to reduce the premiums, the copays, and the deductibles, and the reinsurance provisions that also have that effect, as well as discussions about how we might be able to streamline waivers within the Medicaid system without sacrificing or jeopardizing the important principles and protections that Medicaid provides on a national level.

We know we have to move quickly on this front because insurance companies all over the country have already started or are on the brink of starting the process of announcing their premiums. Unless this Senate takes action, we are going to see many high premiums. So we have to move quickly. As we do, the White House needs to stop their efforts to undermine and sabotage the Affordable Care Act.

On day one of his Presidency, President Trump adopted an Executive order that began to sabotage that program. We are already seeing the impact when it comes to some of the early premium announcements we have seen from insurance companies that offer insurance in the exchanges. That decision—that early Executive order—has created a big spike. So the President needs to act right away to assure the folks who provide healthcare throughout the country that he is going to stop the sabotage and begin to make sure that we stabilize those markets. It is under his control to say today, if he wanted, that he will continue those cost-sharing payments until the Senate and the House adopt permanent legislation to address those issues.

So it is really important that the Trump administration take those actions now to avert increasing premiums in the exchanges in the days to come. It is also essential that the Senate move forward on that legislation.

I hope we will also move forward with the continuation and some strengthening and modifications of the Children’s Health Insurance Program. Again, there is bipartisan agreement on that proposal. We need to move forward right away with the support for community health centers because that authority will also expire.

I hope we will then get on with the business of putting into law the agreement in principle that was reached by President Trump and the Democratic leaders in the House and the Senate to provide protections for the Dreamers. As we all know, the President lit the 6-month fuse on these young people who were brought here through no fault of their own, and it is incumbent on all of us to make sure that these young people, who have grown up knowing only America as their country and who have grown up pledging allegiance to the flag, not face the threat of deportation 6 months from now. That is what they are facing as of this moment. The Senate should act quickly to pass the bipartisan Dream Act.

I hope we will also move forward in a bipartisan way on the important issue of tax reform because I think all of us agree that our Tax Code could be simplified. There is a lot of junk in our Tax Code that has been put there by powerful special interests who were able to hire high-priced lobbyists to exempt themselves from certain tax provisions that all other Americans have to pay. We need to clear out that underbrush and make other important reforms, and we can simplify the Tax Code.

As we do that, I was very much hoping that we would take the advice of our colleague, Senator McCAIN, who said we need to get back to the regular order. We need to get back to the Senate conducting its business in a transparent manner. We need to have hearings. We need to bring witnesses from all different perspectives and points of view to testify as to the impact of tax reform proposals.

We short-circuited that process when it came to healthcare, and the result was a healthcare bill that the overwhelming majority of the American people rejected, including every single patient advocacy organization that weighed in on that bill—from the American Cancer Society to the American Heart Association and the American Diabetes Association. We have seen that very long list, with all of the healthcare providers, from the nurses to the doctors to the hospitals. Hospitals in rural areas, suburban areas, and urban areas all said that the healthcare bill that did not go through the regular process and did not go through the regular order was deeply flawed and would hurt America.

We should learn a lesson from that. The lesson we should learn is that tax reform, which also has an incredibly wide-reaching impact on our economy and on our country, should go through the regular order of debate. It is very alarming to see that, as of now, it appears that the process on tax reform is going to go through the same short-circuited effort as we saw with respect to healthcare, because what we have seen is that the Senate Budget Committee, on which I am proud to serve, will soon—maybe as early as next week—be taking up a budget bill that will include what are known as budget reconciliation instructions, which would provide for a tax cut that would be deficit-financed. What does that mean? It means that we would be cutting taxes and not paying for them. We would be cutting taxes and putting it on the American credit card and, as a result, dramatically increasing our debt. In fact, the reports indicate that the proposal will actually green-light a \$1.5 trillion increase in the Federal deficit.

Now, I have heard our Republican colleagues in the House and in the Senate for years talk about the fact that the debt is a huge burden overhanging on our economy. The debt is a big problem, and we need to deal with it. In fact, a few months ago, Leader McConnell said that any tax overhaul plan would “have to be revenue-neutral” because of the “alarming \$20 trillion Federal debt.” Yet, just months after that statement, we are told that we are probably going to get a proposal that would actually green-light—open the door—to increasing the Federal debt by \$1.5 trillion in order to provide a tax cut.

Now, the Democrats have put forward some principles for tax reform that I believe reflect the views of the American public. What we have said is this. No. 1, tax reform should be there to help the middle class and working families with some relief, and we should not be providing millionaires in the top 1 percent with yet another tax cut windfall. That should not be the priority of the country. In fact, Secretary Mnuchin, when he was testifying during his confirmation hearings, put forward something that we called the Mnuchin rule, which said that there should be no net tax cut for the very wealthy. So we have adopted that as one of our principles for tax reform.

We have also said what Leader McConnell said a few months ago, that tax reform should not add to the deficit and debt. We shouldn’t pass that burden on to taxpayers and future generations to pay the interest on that debt.

Finally, we have said that it should go through the regular order, as Senator McCain indicated, where we have that debate in an open forum so that everybody can understand the impact and have their say before people try to rush it through the Senate in a short period of time. So I hope that is what

we will do. These reports that we are talking about short-circuiting the process are alarming.

Then, we just heard within the last few days that, in addition to creating a process that would fast-track tax cuts that could go overwhelmingly to the wealthy and add to our deficit, this reconciliation bill will be written in a way that might allow us to try to fast-track the destruction of the Affordable Care Act again. We have finished this debate for this fiscal year, but suggestions are that it will open the door to destroying the Affordable Care Act through that fast-track, so-called reconciliation process in the months ahead.

So we would have in one piece of legislation a proposal that says: Let’s cut taxes for very wealthy people, and it will add to the deficit, but we are also going to try to reduce the deficit a little bit by cutting healthcare for millions of Americans.

We thought we just had that debate, and we thought the American public just weighed in on that debate. The result of the American public’s weighing in was very clear, and that is why we are not voting on that this week in the Senate. We should not open the door again to that kind of fast-track process that could do such grave harm to the healthcare of the American people.

So I hope that when it comes to tax reform, we will take a different path. As I indicated, there are things we can and should do to simplify our Tax Code. What we should not do is what we have seen in the past. What we saw in the past in the early 2000s was this fast-track procedure used to pass tax cuts that went overwhelmingly to the wealthiest Americans. In fact, after that tax cut was put in place, what went up was the income of the top 1 percent. What went up was the deficit and the debt, and everybody else was left flat or sinking. So that would be a terrible mistake.

For example, we are told that part of this will be eliminating entirely the so-called estate tax. Right now, the estate tax only applies to estates over \$11 million, for couples—over \$11 million. So 0.2 percent of Americans are impacted by the estate tax, and they are the wealthiest of the very wealthy. Yet this proposal says we are going to actually increase the debt by \$1.5 trillion in order to make room for tax cuts that benefit the top two-tenths of 1 percent of the American public.

That is heading in the wrong direction. I am pretty confident that, at least, in my State of Maryland, the overwhelming majority of our citizens would be very much opposed to that effort. What always happens is that, when it comes to cutting taxes for the very wealthy or for powerful special interests, many of our Republican colleagues here forget about all the talk about the importance of the deficit and debt. It is OK to run up a \$1.5 trillion debt on top of our already high debt in order to provide tax cuts. But then,

when those debts go up, always the conversation comes around to cutting—cutting our investments in education; cutting Medicare, turning it into a voucher program, as various Republican budgets in the House and Senate have proposed over the years; cutting Medicaid, which is what the Graham-Cassidy bill would have done and, according to the Congressional Budget Office, it is over a \$1 trillion cut, and that is before it went over a total cliff in the outyears.

So let’s, please, colleagues, learn the lesson from how this healthcare fiasco unfolded. When it comes to things like tax reform, let’s proceed in a bipartisan way. Let’s begin in the coming week to get back to the bipartisan discussions on healthcare, so that as we head into the fall, people are not going to experience wounds that are inflicted by the lack of action by this Congress—by this Senate and this House.

I thank you, Mr. President. I hope we can get back to regular order at some point in time and really do the people’s work the way it is intended to be done—in an open, transparent, and bipartisan way.

The PRESIDING OFFICER. The Senator from Iowa.

Mr. GRASSLEY. Mr. President, I ask unanimous consent to speak for approximately 6 or 7 minutes.

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

EPA PROPOSAL ON BIODIESEL

Mr. GRASSLEY. Mr. President, I come to the floor because I am very disturbed about some actions coming out of EPA affecting biofuels and contrary to what the President promised. In other words, I think people working for the President aren’t following the President’s direction.

As my colleagues know well, I have championed renewable fuels and other energies for a long period of time. I have worked hard to enact policies to encourage the growth of renewable electricity from sources such as wind and solar. The same is true for biofuels. I have pursued policies to grow our country’s production of renewable fuels, such as conventional corn ethanol, biodiesel, and cellulosic ethanol. I support renewable energy because it is good for the economy. It is good for our national security. It is good for our balance of trade. It is good for the rural economies, and it is good for energy independence.

I was pleased that in the most recent Presidential election, then Candidate Trump—now our President—made clear his support for ethanol and the renewable fuels standard. He said clearly: “We are going to protect the Renewable Fuels Standard.”

On another occasion, Candidate Trump recognized the benefits of the industry when he said this at an ethanol biorefinery:

Amazing what you’ve been able to do—amazing. And it’s great for the country and