

among other people who are actually dealing with the same sorts of circumstances, and they are actually being served by—about half the population in our veterans hospitals and our healthcare centers are veterans themselves.

This is a very important part of the broader solution we need to provide to our veterans as we continue to build a relationship with them for the rest of their lives. We will never finish all the work we should do. We will keep on making installments into a debt we can never repay, but what we need to do on November 11 is support our veterans by showing our gratitude and our thanks for their service. On this Veterans Day, make an extra effort to thank a veteran. Thank a veteran spouse. Thank the child of a veteran for their service to this great Nation. We will never be able to fully repay the debt we owe them, but we can make a lot of installments as individual citizens and as Members of this Congress. As long as I am in the Senate, that is what I intend to do.

I say to the Presiding Officer, thank you, again, for your service, and thank you to all the men and women who served before.

I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The bill clerk proceeded to call the roll.

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 President, I ask unanimous consent that the order for the quorum call be rescinded.

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

Mrs. MURRAY. I ask unanimous consent that I be allowed to speak as in morning business.

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

HEALTHCARE

Mrs. MURRAY. Mr. President, I appreciate all of my colleagues from both sides of the aisle who will be joining us here this afternoon and thank them for their leadership on our legislation and for taking the time to speak today.

We are now exactly 1 week into open enrollment, and it has been 3 weeks since Chairman ALEXANDER and I put forward a bipartisan bill to stabilize our healthcare markets and lower patients' healthcare costs. So I wanted to come this afternoon to talk for a few minutes about what it means that so many people nationwide are signing up for coverage and why there is no good reason for Republican leadership to wait another minute before bringing up our bill for a vote.

It is still early, but what we are seeing so far is that millions of people across our country are going to healthcare.gov to shop for coverage. Some 200,000 signed up on the first day. That is more than double the amount from last year. The vast majority will get tax credits to help cover their costs. In fact, some who are struggling the most will find they can save even

more this year because of how our current healthcare system absorbs cost increases.

But there is no question that premiums are going up in many places and that fewer coverage options are available and not every consumer is protected. One woman—Melissa—told the Washington Post this week that she is “joining the ranks of the uninsured” for the first time in her life as a 51-year-old. She said that she doesn't qualify for subsidies and that given how much her premiums would increase, her insurance costs would have been more than her mortgage payments each month. Melissa is one of the people paying the price for President Trump's healthcare sabotage and the Republican leadership's—so far—willingness to cheer him along.

It is unacceptable that patients and families are having to take on this burden. Let's remember that when someone goes to sign up for healthcare coverage, they are not doing it as a Republican or a Democrat, they are doing it as a parent or a caregiver or a business owner who wants to stay healthy and financially secure.

Here in Washington, DC, healthcare has become bogged down in politics, but in cities and towns across the country, it is about taking care of yourselves and your loved ones. That is why so many people are going online to shop for coverage despite the President's insistence that healthcare in the United States was going to “implode,” regardless of the fact that to make implosion a reality, President Trump—among his many other efforts at sabotage—shortened the enrollment period this year and gutted investments in outreach and advertising and caused premiums for those people to increase by double digits on the average. Patients and families deserve so much better.

I have said it before: The frustrating thing is that all this could have been avoided. Way back in September, Chairman ALEXANDER and I were on the verge of an agreement to stabilize healthcare markets and lower premiums for the coming year and for 2019. Our agreement would have provided multiyear certainty on the out-of-pocket cost reduction subsidies that President Trump decided to stop paying even though the law says he is required to do so. Had we been able to move faster, our legislation would have resulted in lower premiums right away for 2018. But Republican leaders pressed the “pause” button on bipartisan negotiations so they could try one more time to jam partisan repeal through the Senate, and we lost a lot of precious time.

Our bill, the Lamar Alexander-Patty Murray Senate bill, would do a lot of good right now and over the next years. If Republican leadership takes up our legislation now and passes it, families would see rebates this year and lower healthcare costs next year because our bill is designed to ensure

that the benefit of greater certainty is passed on to patients and taxpayers, not hoarded by insurance companies.

Our deal would also invest in open enrollment and outreach for 2019, so more people would be covered. It would allow States more flexibility to innovate as the Affordable Care Act always intended. It would mark a critical step away from this harmful partisanship on healthcare and toward working under regular order on solutions that make healthcare work better for the people we serve.

Finally, this legislation would send a critical message to patients and families that when Congress sets aside partisan difference and focuses on what is best for our country, we can deliver a result, as Chairman ALEXANDER often says.

More than 200 groups representing doctors, hospitals, State officials, Governors, and patients have endorsed our bill. The nonpartisan Congressional Budget Office says it would do exactly what it was intended to do—stabilize markets and bring down healthcare costs—while returning \$3.8 billion to taxpayers.

Twelve Senate Democrats and 12 Senate Republicans cosponsored it. We are continuing to build support, and there is no question that it would pass here with a filibuster-proof majority if it were brought to the floor. And while the Senate shouldn't need President Trump's signoff to take a position on ways to fix the Nation's healthcare system, the President has supported this process moving forward.

So here we are, and right now it is up to Republican leaders. They can choose to stay in a partisan corner and reject an opportunity to lower patients' healthcare costs in a bipartisan way, or they can do what people across the country want them to do and put patients over politics.

I do want to note that if Republican leaders hadn't gotten the message, voters made it pretty clear last night that they reject the deeply harmful partisanship we have seen on healthcare.

It is well past time for Republican leaders to give up the ghost on TrumpCare, declare it dead, and work with Democrats to get real solutions. That starts with our bipartisan bill to lower healthcare costs and stabilize the markets, because if they don't, they can be sure they will be held accountable.

I yield the floor.

The PRESIDING OFFICER. The Senator from New Hampshire.

Mrs. SHAHEEN. Mr. President, I am pleased to join my colleague from Washington, Senator MURRAY, and congratulate her and Senator ALEXANDER on being able to reach agreement to move forward to address the uncertainty in the marketplace.

Like Senator MURRAY, I also want to begin with what we are seeing going on in this open enrollment period. Despite all of the efforts to undermine the Affordable Care Act, to shorten the time

period in which people can sign up, to make it more difficult by having the site closed for part of Sundays, we are seeing a record number of people enroll in the initial days of open enrollment.

According to news reports, on the first day alone, about 1 million people visited healthcare.gov and more than 200,000 people selected a plan for 2018. That is almost double the number who signed up last year on the first day.

For anybody who is still thinking about it, you have until December 15, so sign up early. As my colleague from New Hampshire, Senator HASSAN, says, it is the best Christmas shopping you can do—take care of your healthcare. Go to healthcare.gov and shop around, get the best deal, and enroll during this open enrollment period.

This surge in signups is especially remarkable in light of the widely publicized efforts by the Trump administration to depress enrollment. The administration has slashed the advertising and outreach budget by 90 percent, cut the open enrollment period by half, and shut down the marketplace website for 12 hours on Sundays, taking away valuable weekend hours when people have free time to explore plans.

I think the healthy volume of enrollments sends two very important messages.

First, it shows again that ordinary citizens, faith groups, insurance navigators, and other private organizations have done an amazing job of filling the outreach void that has been created by this effort by the administration to cut back on letting people know about the website and how to enroll. Those folks have spent countless hours getting out the word that the Affordable Care Act remains the law of the land and that those who qualify for financial assistance can purchase high-quality, affordable coverage.

The second message that I think is important from this strong enrollment is a message that has been echoed in recent public opinion polls. It is one that we saw in the turnout in the Virginia elections last night. It is that a clear majority of the American people support the Affordable Care Act, that they reject efforts to sabotage it and they want Members of Congress to work together to strengthen it, just as Senator MURRAY said.

I am very pleased that we have come together in the Senate to do just that. We have come together in support of bipartisan efforts led by Senator MURRAY and Senator LAMAR ALEXANDER, the chair and ranking member of the HELP Committee. They have come together to stabilize the Affordable Care Act and the marketplaces and bring down premiums. I am proud to be one of the 12 Democrats who were original cosponsors with 12 Republicans of this legislation. This balanced agreement, which was negotiated by Senators ALEXANDER and MURRAY over many months, is our best bet for restoring stability to the marketplaces in the

short run and giving us the time we need to negotiate longer term to deal with other changes to the health law to make it work better.

I am especially pleased that the Alexander-Murray agreement provides for the continuation of cost-sharing reduction payments, or CSRs, which are payments that are necessary to keep premiums, deductibles, and copayments affordable for working families. They are extended for 2 years in this bill. Without these payments, the cost of coverage will skyrocket, insurers will leave the marketplaces—as we have already seen, as the Trump administration has said they are going to discontinue those payments—and millions of people will lose their health coverage. This is an opportunity for us to keep that from happening. Both Democrats and Republicans have recognized that these cost-sharing reduction payments, these CSRs, are an orderly, necessary subsidy that keeps down the cost of health coverage for everyday Americans.

In recent months, I have heard from hundreds of people across New Hampshire about the enormous difference that healthcare reform has made in their lives. We are a small State—we have just over 1.3 million people—but nearly 94,000 Granite Staters have gotten individual health coverage through the Obama marketplace, and nearly 50,000 have gotten coverage thanks to the Medicaid expansion, which had bipartisan support in New Hampshire. So that is about a tenth of New Hampshire that is covered either through the Affordable Care Act or through the expansion of Medicaid. And for us in New Hampshire, it has been particularly critical in responding and providing treatment to those people with substance use disorders.

Patricia Tucker has written to me. She is a substance use disorder counselor in Northfield, NH, and she talks about how grateful she is for the Medicaid expansion. She writes:

I am seeing people come for help that were not able to get help in the past because they couldn't afford it. They are getting help and remaining abstinent. If one mother gets clean, this affects so many others.

She goes on to say:

[I treat] one mother who has two children. She now cares for these children and has a full-time job. In the past, she lived off the state and did not care for anyone, including herself. Multiply this by thousands, just in New Hampshire, and this makes such a big difference.

And think about how across the country we have affected people with substance use disorders because they can now get treatment.

I agree with Patricia Tucker and so many others who have contacted me about the Affordable Care Act. We are grateful for the progress, and we refuse to be taken backward. That is why the bipartisan agreement hammered out by Senator ALEXANDER and Senator MURRAY is such an important breakthrough. This agreement stands on its

merits as a good-faith, win-win compromise. But just as important and maybe even more important, these two Senators have given us a template for bipartisan negotiations on other critical matters that lie ahead, including tax reform, reauthorizing the community health centers and the Children's Health Insurance Program, and reaching an agreement on the 2018 budget.

The Senate is at its best when we observe regular order, when we honor the committee process, and when we work across the aisle and make principled compromises and get big things done for the American people.

In a Senate that is nearly evenly divided between Republicans and Democrats, bipartisanship is the only productive way forward. This is how the great majority of Americans want us to conduct the Senate's business, and this is especially true on matters such as healthcare and tax reform that impact families in New Hampshire and all across America.

I am grateful to people across our country who have gotten out the word about the health insurance open enrollment period that began on November 1 and continues through December 15. I am heartened by the surge in enrollments. I am encouraged by bipartisan progress in the Senate to stabilize the health insurance marketplaces. I certainly hope the leadership in the Senate allows this bill to come to the floor because we know we have the votes to pass it.

Instead of partisan efforts to undermine the law and take health insurance away from people, let's embrace the spirit of the Alexander-Murray agreement. Let's work together in a good-faith, bipartisan fashion to build a healthcare system that leaves no American behind.

Thank you, Mr. President.

I yield the floor.

THE PRESIDING OFFICER. The Senator from Minnesota.

MR. FRANKEN. Mr. President, I rise today to talk about the importance of bipartisan action on healthcare, as the Senator from New Hampshire just did.

Over the past year, I have traveled all around Minnesota to talk with individuals and families and community leaders about healthcare. I have heard from mothers and fathers who have been worried about losing the healthcare their children need to access lifesaving services. I have heard from daughters who have been panicked about how to pay for their parents' long-term care and prescription drug costs. I have heard from hospital executives in rural areas, much like the rural areas in Arkansas, who have been concerned about how they are going to keep their doors open.

What is abundantly clear from all of these conversations is that Minnesotans want Congress to work together to build on the Affordable Care Act, lower healthcare costs, and support policies that work. That is why I believe, first, that Congress must act immediately to

pass bipartisan legislation to stabilize the individual market. Second, we must do all we can to support strong enrollment in our health insurance exchanges so that all consumers, regardless of their health needs, can find high-quality, affordable health insurance coverage. Third, it is time to reauthorize the Children's Health Insurance Program. Let me take each of those in turn.

When Republican efforts to repeal the Affordable Care Act failed, the Senate Health, Education, Labor, and Pensions Committee got to work and developed a bipartisan plan to stabilize the individual market. As a member of that committee, I participated in numerous hearings with witnesses who spanned the ideological spectrum, solicited input from State and national leaders, and worked in good faith with all of my colleagues to develop legislation that is truly a compromise bill.

This legislation, referred to as the Alexander-Murray deal, will contain healthcare costs for consumers, provide certainty to insurers participating in these markets, and provide States with the flexibility they need to develop innovative, local solutions. I am proud of what we were able to accomplish.

What I am most proud of is that this bill includes a provision that will reverse a decision by the Trump administration that would effectively punish Minnesota for pushing forward a bipartisan plan to stabilize the individual market—a bipartisan plan in our State legislature.

Last year, after our State experienced dramatic premium rate hikes in the individual markets, State leaders worked together in a bipartisan way to pass a reinsurance program to contain these costs, but the program's enactment was contingent upon approval from the Federal Government.

After months of foot-dragging, the Federal Government finally approved the State's reinsurance plan as part of the 1332 waiver proposal, but the Federal Government simultaneously cut Federal funding for MinnesotaCare, which is another program in the State that provides affordable health coverage to working families. Thus, our State had to choose whether to support a bipartisan proposal to stabilize the individual market and lower premiums for consumers or swallow hundreds of millions of dollars in lost Federal funding. It was an impossible choice that was completely unnecessary. That is why I set to work to fix it.

After weeks of productive negotiations, I am pleased to report that the Alexander-Murray deal will prevent the Trump administration from imposing these cuts on Minnesota. But my State wasn't the only one threatened by potential funding cuts. The Alexander-Murray bill would prevent such problems from occurring in any other State as well, and it would do much more.

According to the Congressional Budget Office, this agreement would reduce the deficit by billions of dollars, lower

premiums in 2019, and preserve coverage options for individuals and families. In short, it is not only good for Minnesota, it is good for the entire country. This bill is a bipartisan win-win-win.

Now our job is to pass this legislation into law. At the same time, we must do everything we can to drive up enrollment in the health insurance exchanges. Regardless of party, if we want to ensure that consumers have access to affordable, high-quality health insurance coverage, we have to get people to sign up for the coverage. More people equals better risk pools, which equals lower premiums. It is really that simple.

Look, the Trump administration has done everything in its power to undermine ObamaCare. It has halved the amount of time that people have to enroll in coverage, it slashed funding for outreach and enrollment efforts, and it deliberately misled consumers about the benefits of the ACA and individual requirements for coverage. But we have the power to combat these efforts.

Let's get people enrolled. Open enrollment started on November 1 and will end for most people on December 15. Minnesotans are lucky in that they have until January 14 to sign up for coverage. But everyone who doesn't receive coverage from their employer or through Medicare needs to sign up now, so I urge my colleagues to get their constituents to visit healthcare.gov and shop around and then enroll in coverage.

Lastly, it is time to reauthorize the Children's Health Insurance Program, community health centers, and the National Health Service Corps. These have always been bipartisan programs. There is no reason this should be any different today.

The anxiety that people in Minnesota and across the country feel about their access to healthcare is not inevitable; it is the result of political decisions made here in Washington, DC. Let's prove to the country that we are not here to fight with each other, we are here to fight for them. Let's show them that we can get something done. Let's take action to protect healthcare and give our constituents, at long last, some peace of mind.

Thank you, Mr. President.

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.

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

The PRESIDING OFFICER (Mr. TOOMEY). Without objection, it is so ordered.

Ms. KLOBUCHAR. Mr. President, I rise today to call for bipartisan action on healthcare.

I think it was interesting to learn that the citizens of Virginia who voted yesterday listed as their top issue

healthcare. There was obviously an issue there where there had been no Medicaid expansion, and they were unhappy with the way it had been handled by the legislature there as well as Republicans who were in charge of the legislature, and they appeared to be pushing for a change.

We have an opportunity here to make a bipartisan change. I think it is exactly the kind of message that we got yesterday. In my State, we have a Republican legislature and a Democratic Governor. They came together to do something about some of the rates, particularly in our rural areas. They focused on reinsurance, cost sharing—some of the things in the bipartisan agreement reached between Senator ALEXANDER and Senator MURRAY. We have 12 Democrats and 12 Republicans cosponsoring that bill. Support includes the American Cancer Society, the American Diabetes Society, the March of Dimes, and the Arthritis Foundation—and those are just the A's.

The American people want us to work together to make fixes to the Affordable Care Act. The day it passed, I said that it was a beginning and not an end. Unfortunately, we have been stymied in trying to make those kind of changes, and this is one bipartisan big opportunity to do it. I think it is a sensible bipartisan approach.

As we all know, both Senator ALEXANDER and Senator MURRAY held a series of hearings and discussions on commonsense solutions to bring down insurance costs with Senators on both sides of the aisle. There were Governors and insurance experts, and we worked hard to make sure there was some agreement on this bill. I fought for provisions that would help States apply for and receive waivers to give them some flexibility to construct their healthcare system and to bring down the costs without losing Federal funding. That is something my State did. As I mentioned, my State, with a Republican-led legislature and a Democratic Governor, came together to apply for a waiver and a reinsurance provision.

The bill would also expedite the review of waiver applications for proposals that have already been approved for other States that are experiencing certain circumstances—emergency circumstances—where they need to make changes.

The legislation also shortens the overall time period that States would have to wait for the Federal Government to decide whether to approve their waivers.

All of these are good fundamental concepts—this idea that States should have some flexibility, that they should be able to apply for waivers, and that they should be able to get their answers as soon as possible from the Federal Government. That is what this bill is about. Not only does the bill improve the process for waivers and flexibility for the States, like we have seen in Minnesota, where already the projected

numbers brought the rates down something like 20 percent, but the non-partisan Congressional Budget Office says the Murray-Alexander bill would actually cut the deficit by \$3.8 billion over the next 10 years. That is hard to argue with.

It is clear that this legislation could get support from both sides of the aisle to make healthcare better for Americans. We have a majority of Senators supporting this bill. So we need to get it done because the longer we wait, the more the markets don't know what is going on, the more confusion that is created, and the more the administration is doing things that sabotages the Affordable Care Act.

We need this stability in the system. Passing the bill would be an important step forward, but we still must do more to bring down the costs for middle-class families. A big part of that is addressing the skyrocketing costs of prescription drugs. I have heard from people across Minnesota who are struggling to afford the medicine they need. This is about the woman in Duluth who told me that she chose not to fill her last prescription because that one drug would cost a whole 25 percent of her income. It is about a woman in St. Paul who, even with Medicare, couldn't afford \$663 a month for the medicine she needs. It is about someone from Crystal, MN, who told me: I am practically going without food to pay for the prescription. It is heartbreaking that this is happening in America.

Reducing the cost of prescription drugs has bipartisan support in Congress, and the President has said he wants to get something done. He has said: The drug companies are "getting away with murder." Those are his words. That is what he said.

So what can we do? Republicans and Democrats could come together and act right now. I have a bill that has 33 cosponsors that lifts the ban that makes it illegal for Medicare to negotiate prices for prescription drugs for 41 million seniors. I think 41 million seniors are pretty good at getting bargains and deals, and they deserve to have someone negotiating on their behalf; that is, the government negotiating for Medicare. Except, why don't we negotiate, like we do for the VA, and like other countries do? We don't negotiate because there is a provision in law that says that the government is not allowed to negotiate on behalf of 41 million seniors with the drug companies. They are just set. Guess what that means. That is a big part of the reason why our drug prices are double the cost of those in Canada—because we are just taking it and we are not negotiating.

Another idea, bringing up Canada, is that Senator McCain and I have a bill that would allow less expensive drugs to be sold in the United States. To me, that is a way of putting pressure on our own drug companies to put out better prices if they know there is going to be competition.

Senator GRASSLEY of Iowa and I have a bill to stop something called pay-for-delay. That is when big pharmaceutical companies actually pay off generic companies to keep less expensive products off the market. This bill would save taxpayers \$2.9 billion. Do you know why? Because right now there is no competition or very little competition, and they are actually paying their competitors to stay off the market. The competitors have decided: Well, I get more money to be paid to stay off the market than if I actually competed.

Think about what a rip-off that is for the American people. We are allowing this to go on while the consumers are paying the price. How much? We know the government alone is going to save \$2.9 billion if we stop this practice. Consumers would save most likely around that same amount because they are paying all the copays. Both the government is ripped off and the consumers are ripped off, and the only ones making money off of it are the drug companies.

Another idea is, Senator LEE and I have a bill that would allow temporary importation of safe drugs that have been on the market in another country for at least 10 years when there isn't healthy competition in our own country. Again, if your drug companies that are messing around, charging high prices and not allowing competition in—if you know there might be foreign competition coming in, that is an incentive because you want to then make sure that doesn't happen because you know that if you keep your prices high and you do things to disallow competition, you are going to have some major competition. I don't know how else we bring the prices down without allowing more competition.

I also have a bipartisan bill with Senators GRASSLEY, LEE, FEINSTEIN, and LEAHY, which is called the CREATES Act, to put a stop to other pharmaceutical company tactics, such as refusing to provide samples to generic companies that are supposed to be allowed to compete with them. According to the Congressional Budget Office, this legislation would save approximately \$3.6 billion.

As we hear about tax reform and hear about the debt we might be seeing expand if something like this goes forward, then we ask yourselves: What is not in those bills? Why aren't we saving some money for the American people and reducing the debt by allowing for this competition, by allowing for the samples, by allowing for more generics, by stopping this practice of companies paying each other to keep their competitors off the market?

What this healthcare debate has been about for the last year, where repeatedly there have been attempts to repeal the Affordable Care Act—it has been about that. The American people made it really clear, they want to make it about something else. They want to make it about improvements

to the system we have now to make it easier for them. One way is the Alexander-Murray bill, which I strongly support. I am one of the cosponsors. It is smart. It works with the States, both Democratic and Republican States—blue States, red States. We want to see that kind of flexibility. The other way is to take a stand, be willing to take on the pharmaceutical industry, and take on some of the cost issues when it comes to prescription drugs.

Let's come together in the Senate, as an initial move, and pass the Murray-Alexander bill. We must do that, and we must do it by the end of the year. Then we can go on from there to actually do something about the cost of prescription drugs.

I yield the floor.

The PRESIDING OFFICER. The Senator from Michigan.

Mr. PETERS. Mr. President, there are a number of matters where we disagree in the U.S. Senate, and they range from deeply held foundational beliefs to the smallest details of legislative language. Despite these disagreements, I believe there is a lot we can all agree on.

I hope I speak for every Member of Congress in saying that in this great Nation of ours, hard work should always be rewarded. If you play by the rules and do the right thing, you should have an opportunity to earn a good life for yourself and for your family. Our mothers, fathers, and others before us have worked hard to ensure that we have a fair shot at the American dream. Unfortunately, it feels like the fabric of the American dream has started to fray for far too many families. Even more troubling, we are seeing nominees from this administration who seem committed to actively unraveling the support and the protections that help workers get ahead.

Today we are considering the nomination of Peter Robb to be general counsel of the National Labor Relations Board. Mr. Robb would be responsible for ensuring safe working conditions and fair compensation for American workers. He would be tasked with protecting the treasured right of workers to engage in good-faith negotiations with their employers.

However, a brief look at Mr. Robb's career reveals a clear track record of working to undermine our Nation's workers and middle class on behalf of corporate executives. To Mr. Robb's credit, he is not trying to hide his record or run away from his record. All you have to do is visit his firm's website, and you will see the experiences he is proud to display. I believe it is a preview of how he will approach his position at the National Labor Relations Board. His self-proclaimed accomplishments include: advising large corporations on mergers, acquisitions, and plant closings; securing labor injunctions; and bringing suits against labor organizations.

When someone tells you who they are, believe them. While I certainly believe that every American and corporation is entitled to vigorous representation by their lawyers, I also believe Senators must evaluate every nominee's full body of work. Let's be clear about how Mr. Robb has chosen to spend his professional life: helping management close plants and cut jobs, suing unions, delaying workers' rights to collectively bargain, and defending companies that violate workplace safety and fair pay laws.

At a time when corporate profits and executive compensation have skyrocketed and worker wages are stagnant, I have no confidence in Mr. Robb's ability to be a neutral arbiter between labor and management, let alone advocate for the safety and the well-being of America's working men and women. Our Nation's workers deserve a nominee who will protect their right to negotiate for fair pay and safe working conditions, not someone who has spent his entire career litigating against workers. I will be voting against Mr. Robb's confirmation, and I strongly urge my colleagues to do the same.

I yield the floor.

Mr. ALEXANDER. Mr. President, today we are voting on the nomination of Peter Robb for general counsel of the National Labor Relations Board, NLRB.

As general counsel, Mr. Robb will have the important job of helping workers who feel their right to organize collectively has been violated or assisting employers when some of their employees want to form a union.

Mr. Robb will have an opportunity to help restore the Board to the role of a neutral umpire in labor disputes.

While partisanship at the Board did not start under the previous administration, it became far worse.

When the Board is too partisan, it creates instability in our Nation's workplaces and creates confusion for employers, employees, and unions.

For example, in 2015, at the previous general counsel's urging, an NLRB decision dramatically expanded "joint employer" liability, and this increased liability makes it much more likely a company will find it more practical to own and operate its stores, taking away the opportunity for a worker to own and run their own franchise.

This decision was the biggest attack on the opportunity for small business men and women to make their way into the middle class that anyone has seen in a long time, threatening to destroy the American Dream for owners of the Nation's 780,000 franchise locations.

Or consider the previous general counsel's aggressive application of the National Labor Relations Act to protect certain employees' belligerent, threatening, and discriminatory conduct.

One troubling decision involved an employer that fired a picketing em-

ployee who engaged in racist and offensive conduct on a picket line.

The Board found that the employee's remarks were "racist, offensive and reprehensible," and violated the company's nondiscrimination policies and the union's conduct rules; yet the Board still ruled that the employer's discharge of the employee was unlawful.

This type of Board decision defies common sense and makes it more difficult for employers to maintain safe workplaces free of discrimination and harassment.

Mr. Robb is extremely qualified to be general counsel of the NLRB.

He currently works as the director of labor and employment at the law firm Downs Rachlin and Marin.

He served as chief counsel to NLRB Member Robert Hunter and was a regional field attorney for the NLRB in Baltimore.

Mr. Robb earned his B.A. in economics from Georgetown University and his J.D. from the University of Maryland School of Law.

His experience and prudence will serve him well at the NLRB.

I urge my colleagues to join me in voting to confirm Peter Robb for general counsel of the National Labor Relations Board.

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

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

NOMINATION OF WILLIAM WEHRUM

Mr. SCHATZ. Mr. President, the Senate has, actually, already considered Bill Wehrum to be the Assistant Administrator for Air and Radiation at the Environmental Protection Agency, who is the person in charge of the rules to administer the Clean Air Act at the EPA. This person has already been considered, and the Senate decided that he was not right for the job.

Over 10 years ago, President Bush nominated Mr. Wehrum to head the Office of Air and Radiation at the EPA. He was rejected because his 6-year record as an employee at the EPA told the Senators all that they needed to know. As the ranking member, Jim Jeffords, put it at the time: "Mr. Wehrum's disdain for the Clean Air Act is alarming." If you disagree with the foundational Federal law that we use to keep our air clean, then it is hard to believe that you can competently lead the EPA's efforts when it comes to protecting our right to clean air. A decade later, nothing has changed. Mr. Wehrum has done nothing that should change our minds about his ability to lead the EPA.

This, of course, is part of a pattern. This administration continues to nominate anti-science, pro-pollution, cli-

mate-denying people to lead the U.S. agencies that are in charge of science and climate.

Scott Pruitt has denied a century's worth of established science and basic facts that say that climate change is real, urgent, and caused by humans. He now leads the No. 1 Federal Agency that is charged with working on climate change.

Then there is JIM BRIDENSTINE, who hopes to lead NASA, which is one of our Nation's top science agencies. He, too, is still on the fence about climate change.

Meanwhile, 13 Federal agencies, including the EPA and NASA, just published a dire report that reads that greenhouse gases released by human activity are to blame for rising temperatures and severe weather throughout the world.

This is why Mr. Wehrum should not go any further. It is really very simple. Our own government scientists say that climate change is real, urgent, and caused by humans.

If you do not want to take their word for it, here in the United States in this year alone, a record number of category 4 hurricanes killed dozens of people and destroyed or damaged entire communities in the southern United States and Puerto Rico. Wildfires killed dozens of people and burned more than 8.4 million acres in the Northwest. Droughts lasting for months wiped out farmers' crops and forced ranchers to sell livestock in the Midwest. The city of Seattle had soot on cars from the wildfires. For a period, the State of Montana, depending on where you were, looked like it was literally on fire.

The U.S. Forest Service's budget is soon to be more than 50 percent firefighting. This is supposed to be the Forest Service for the conservation and management of our forests, and now it is the Federal firefighting of our forests. There have been 15 severe weather events this year that have resulted in losses exceeding \$1 billion. That is what insurance companies and reinsurance companies consider to be the threshold. They consider a big event—a catastrophic event—from an insurance standpoint to be a \$1 billion event. We had 15 of them this year in the United States. In the past 10 years, the U.S. Government has spent more than \$350 billion in helping communities recover from severe weather, and that is before our getting through with the various and necessary disaster supplemental budget requests that are coming down for Florida, Houston, and Puerto Rico.

Look, severe weather is a reality or whatever you want to call it. If you feel uncomfortable politically calling it "climate change," fine, but severe weather is actually already happening. It is now a moral issue, and it is a fiscal issue. It has taken a huge toll on our economy, on the American taxpayer, and on local communities. For the most part, we do not budget for