

anybody in this Chamber; it is about those working families who, for the last 8 years, have not done as well as the American dream would say they should.

On behalf of those working families, I congratulate Chairman HATCH for this job. I look forward to the passage of this bill, and I look forward to all of the benefits of this bill coming to help the families of this country and in my State of Louisiana.

Thank you.

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.

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 President, I ask unanimous consent that the order for the quorum call be rescinded.

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

HEALTHCARE

Ms. HEITKAMP. Mr. President, I rise today to discuss a couple of pressing issues regarding our healthcare system and to ensure that Americans are aware of some critical deadlines for their health options in the marketplace.

It is that time of year. Healthcare open enrollment has started, and Americans across the country can sign up or change their healthcare plans to make sure they are getting a plan that works best for them and their families.

I have long said that the health reform law, otherwise known as ObamaCare, is not perfect, and I have been pushing since I have been here to make it work better for North Dakota families and small businesses. But there are many pieces in that healthcare law that are helpful, and I wish to make sure that Americans and North Dakotans take advantage during this open enrollment period.

Every individual and family should be able to get access to affordable, quality healthcare, and no one should have to go bankrupt to pay for healthcare for a child with a disability, a sick family member, or just an emergency that you never thought could happen. That is why I am encouraging everyone to please make sure you explore your options and sign up for healthcare coverage.

It is more important than ever that folks take advantage of this open enrollment period early because there are many changes this year that, unfortunately, make it more difficult for individuals and their families to sign up for health insurance. Even if you already have a plan, it is worth checking out healthcare plans, as these prices change from year to year.

First, open enrollment today is a month and a half shorter this year than it has been in the past. Open enrollment is from November 2—right now—until December 15. That is just 45 days. Do not wait to check this out. It is best if you go today to find out if

there is a better plan for you or if you need to secure health insurance on the marketplace.

Second, the administration has significantly reduced funding for in-person assistance, called navigators, who help individuals and families sign up for healthcare coverage. This action is leaving millions of Americans and thousands of North Dakotans without the critical help they need to understand their options and enroll in meaningful healthcare coverage.

I want to make a point here. For those of us who in the past have always had the option of getting healthcare coverage through an employer, there is always someone in that employment office, in the payroll office, or in human resources who helps you through. This is not unique in needing this assistance. It is not unique to the marketplace. It is access and information that you have through your employer, if you are getting your insurance through your employer. The idea was that the same opportunity for information should be made available in person on the marketplace, but it is not. So we have to try and fill in those gaps. Because we have these gaps, we are in many ways seeing a number of cutbacks and a number of folks not getting access to the information they need.

In fact, the Great Plains Tribal Chairmen's Health Board does not have enough funds to operate as a navigator, and they will not be able to help North Dakotans sign up for coverage as they have done in previous years. Another navigator in my State, Minot State University, has had its Federal funds cut by over 96 percent.

Since 2013 the uninsured rate in North Dakota has been reduced from 11 percent to 8 percent, in large part because of the work of these navigators. The navigator grantees in my State have provided an invaluable service by guiding families through the process of determining the best private health insurance coverage for them, as well as through traditional Medicaid and Medicaid expansion application processes. Many North Dakotans who sign up for coverage qualify for Federal assistance to help afford that coverage. So it is vitally important that they understand Medicaid, that they understand Medicaid expansion, and that they understand the tax implications of the plans they are selecting.

But even those numbers that show the decrease in uninsured in North Dakota don't tell the full story. Not only have navigators responded to daily inquiries both during and outside of the open enrollment period, but they have identified and responded to the challenges of increasing enrollment, particularly in rural and hard-to-reach areas of the State that are less likely to have access to coverage through an employer.

Slashing funding for navigators also has implications for Indian Country. The Indian Health Service has had

challenges delivering quality care to Native Americans in my State and certainly in our region. But those issues have lessened as more Native Americans have enrolled in traditional Medicaid, Medicaid expansion, and private health insurance, enabling these families to access quality, affordable healthcare to stay healthy. Thanks to the increase of third-party payments, we are no longer limited to life-or-limb care at Tribal IHS facilities in the Great Plains service area.

Adding to the turmoil of the enrollment process, the administration also announced that it is cutting off Federal funding that helps make healthcare affordable for families, known as cost sharing reduction payments. As a result, many individuals and families will see their premiums skyrocket by double digits. Due directly to this decision and the uncertainty it has injected into our healthcare system, one insurer has exited the healthcare marketplace in North Dakota and another has reduced its health insurance plan offerings, leaving many counties in my State with only one insurer for consumers to choose from. Ironically, North Dakota was one of the best covered States in terms of options and choices. That option and that source of pride has been diminished as a result of the lack of consistency with cost sharing reduction payments.

A recent report from the nonpartisan Congressional Budget Office said that if the administration stopped paying the cost sharing reduction payments, as it has now done, there would be serious consequences for individuals and families across the country. The report said families' premiums would jump about 20 percent, many families would be left without health insurance options as the lack of payment would force many insurers to leave the market, and it would also add \$194 billion to the deficit over a decade.

Despite these efforts to sabotage the marketplaces and jeopardize access to coverage for families, we have fortunately seen a surge of encouraging enrollment numbers in the first week of enrollment. But the American public deserves better, and I will do everything I can to ensure that consumers know their options, that consumers are connected with opportunities for meaningful coverage, and that they are provided certainty in the future about healthcare costs.

On November 1, I had launched a new page on my website, heitkamp.senate.gov, to help provide resources and enrollment information to North Dakotans. I sincerely hope folks who are looking to buy health insurance on the marketplace in North Dakota take advantage of that website.

Access to affordable quality healthcare is a must, and I am proud to have worked with a group of Republican and Democratic Senators, led by Senators ALEXANDER and MURRAY, to reach a deal to offer some immediate

fixes to make healthcare more affordable and accessible in North Dakota and across the country. Our bill would specifically address many of the new challenges that face folks during open enrollment.

The deal we unveiled last month would provide certainty for insurers and customers by restoring the cost sharing reduction payments for 2 years and restoring Federal funding for outreach and enrollment efforts in States, including the navigator services that I talked about earlier. It incorporates an idea that I have been championing for many years, which is to create a lower cost copper plan with lower premiums and higher deductibles to increase coverage options for young, healthy families, where they aren't so much worried about the day-to-day costs of healthcare but that catastrophic event that could throw them into a lifetime of poverty.

The agreement would also provide flexibility for States to continue to explore their options to deliver the best healthcare options to their citizens. This recognizes that one size does not fit all and that we need to have more flexibility for States to experiment and to provide the kind of quality of care and the kind of care options that work best for their State.

On top of having significant bipartisan support, there is a bonus. The bonus is that CBO and the Joint Committee on Taxation estimate that enacting the legislation would reduce the deficit by \$3.8 billion without substantially changing the number of people with health insurance coverage.

Now Congress needs to pass our bill. I have long said there are good parts of the healthcare reform act and parts that need to be fixed. Our bipartisan deal is an important step to help families afford healthcare coverage so the health reform law works better for North Dakotans.

How rare is it in this body to have this many people come together to propose one piece of legislation? I know that if you put this bill on to the floor tomorrow, it would easily pass with over 60 percent of the Senate. We need to get this done. We need to get it done to ensure the American public that we are serious about responding to their concerns about healthcare but that we are also serious legislators who can, in fact, fix the problems that we have in this country.

This isn't everything that we have been working on, but it certainly is the most important and the highest priority to pass the Murray-Alexander bill. But there are other proposals to improve healthcare that I am working on. I recently introduced a bill to delay the health insurance tax for 2 years and make coverage more affordable for the 156 million consumers across the country impacted by the fee. It would also make the tax deductible moving forward, providing more certainty for families to plan into the future.

Reducing the impact of the health insurance tax—a fee that directly im-

pacts the healthcare affordability for families and small businesses—has had broad, bipartisan support. In 2015 Congress passed a 1-year delay of the fee. This delay benefited consumers, seniors, employers, State employees, and Tribes. The average premium reduction from that delay of the fee was 3 percent.

If we think about the health insurance tax and we think about the sales taxes that many States enact, many States will tell you we don't enact sales tax on the necessities of life, whether it is food or whether it is electricity. Clearly, this is a necessity of life, having this health insurance. This health insurance tax is nothing more than a regressive sales tax on premium costs, and I believe we need to find a better and more commonsense alternative.

Another commonsense bill that I have introduced to help make healthcare more affordable for middle-income families is a bill that would address what I call the current cliff problem on premium assistance that many middle-class families and seniors face when they earn above 400 percent of the Federal poverty level, putting affordable care out of reach.

Right now, those earning just a nominal sum over—\$1 over 400 percent of the Federal poverty level, which is \$47,550 for an individual and \$97,200 for a family of four—are no longer eligible for any premium support to make health insurance more affordable. This perhaps is one of those issues that I have heard more about than almost any other issue in the Affordable Care Act.

What my bill would do is to get rid of the cliff and instead insert a slope. The bill would enable more young, healthy families to be able to obtain affordable healthcare coverage while diversifying the insurance pools, and it would make sure seniors with high medical costs aren't forced to lose those hard-earned retirement savings or go without care. Smoothing out that cliff will make health insurance more affordable, will make this bill more responsive to our middle-class taxpayers and middle-class families, and will provide some certainty for these families as they look at the high cost of healthcare and insurance premiums into the future.

I also cosponsored a bill to provide stability in the insurance marketplace by making the current reinsurance program for individual health insurance market permanent. It would be similar to the successful programs used to lower premiums and spur competition in the Medicare Part D Program. This reinsurance program would provide funding to offset larger than expected insurance claims for health insurance companies participating in State and Federal insurance marketplaces, and it would encourage them to offer more plans in a greater number of markets, improving competition and driving down costs for patients and families.

It is that catastrophic cost, which is unpredictable for the actuaries, that

drives up high cost. If they know that catastrophic cost above a certain amount is subject to a reinsurance plan and those costs are shared more broadly than just within that system, the healthcare that they can provide and the insurance commissioners can secure with a reasonable rate would be greatly reduced.

Lastly, another critical program that ensures access to coverage throughout the country and in North Dakota is the Children's Health Insurance Program, or CHIP. I have to tell you, I know many, many families who, without CHIP and without their ability to find that temporary opportunity to use CHIP to insure their children, would be bankrupt today. They would have incurred healthcare bills just from a simple fall off a swing set, and they would be spending a lifetime trying to figure out how they are going to pay or they would be finding their way into the bankruptcy court.

CHIP is a program that has been used since the late 1990s, and more than 2,000 North Dakota children currently rely on it for affordable healthcare. It provides a critical bridge between Medicaid and private insurance coverage for children. We have to act fast to reauthorize CHIP and let thousands of children across the country who are on CHIP and their families know that we care about them, that we are standing up for them, and that we are not going to leave them behind.

Unfortunately, the authorization for this critical and lifesaving program expired at the end of September. Without action from Congress, some States will already run out of Federal funding before the end of the year. Some already have and require emergency funding from the Centers for Medicare and Medicaid Services to shore up their programs so that they can still provide that continuous coverage while we fail to act here in the Congress.

While my State of North Dakota is not scheduled to run out of funding until April of next year, this is not a way to administer an ongoing and critical healthcare program. We need to get this program reauthorized now before it is too late and we have unnecessarily hurt American children and have created unnecessary unpredictability for families who need and have found some incredible benefit in covering their children with this program.

The Senate Finance Committee has marked up bipartisan legislation, the Keep Kids' Insurance Dependable and Secure Act, to extend authorization for the program for 5 years. Congress needs to act now to make sure these families know their children have dependable and secure coverage. No parent and no family member should have to wonder if their children will get critical care. Put yourself in their shoes.

Since I came to the Senate in 2013, I have said there are parts of the healthcare law and the healthcare system that need improvement to make sure it is working for hard-working

North Dakotans and hard-working Americans. As I have outlined, these are some tangible, commonsense policy proposals that have strong bipartisan support, and we can, in fact, make this system better. We can, in fact, tackle this challenge of healthcare, and then we can roll up our sleeves and reduce costs and make healthcare more affordable and less costly in this country.

We can do all of that. We have a country and a group of American citizens who are counting on us to do our job to make sure that, into the future, they will have the certainty that they need, the predictability that they need, to get their healthcare coverage and to make sure that their families will never have to worry about having to file bankruptcy because a child has fallen off of a swing set.

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.

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

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

THE GREAT LAKES AND UNDERWATER OIL PIPELINES

Mr. PETERS. Mr. President, next to our people, the Great Lakes are unquestionably Michigan's greatest resource. They are more than an economic engine. They are more than a source of drinking water for 40 million people. They are more than a destination for tourists, boaters, and anglers from across the globe. While the Great Lakes are certainly all of those things, in Michigan, they are also a way of life. They are, quite simply, home. You cannot sit on the edge of one of our massive inland seas without feeling a sense of awe and gratitude.

Next to me is a photo of the Straits of Mackinac, a 5-mile stretch of water where Lake Michigan meets Lake Huron and where Michigan's Upper and Lower Peninsulas are connected by the Mackinac Bridge.

Unfortunately, today I cannot look out at these straits without feeling a grave concern. The Straits of Mackinac are home to powerful currents. Water, at times, flows through at a volume greater than 10 times that of Niagara Falls. The currents are also unpredictable, as they can flow in any direction and can change not only by the season or even by the day, but they can actually change by the hour.

The straits are also home to twin underwater oil pipelines that are operated by Enbridge, known as Line 5, that are now 64 years old and getting older by the day. A recent study by the University of Michigan found that the Straits of Mackinac are the absolute worst possible place for an oilspill anywhere in the entire Great Lakes Basin.

Without question, there is no way that this pipeline would have been

built today, but it is there, and we need the toughest protections and strictest accountability possible. To put these in place, I worked to pass bipartisan legislation to designate the Great Lakes as an unusually sensitive area, which requires the highest possible operating standards under Federal law.

Rigorous Federal oversight is critical, but pipeline owners and operators must do their part as well by being transparent and forthcoming.

While Enbridge assured us repeatedly that Line 5 is "as good as new," we found out in August that there are bandaid-sized gaps where protective coatings had worn completely away and exposed the bare metal underneath to the harsh underwater environment in the straits. Last month, we learned of six additional locations with damage to the protective coatings, leaving areas as big as 1 square foot of exposed bare metal at each location. Then, on October 27, 2017, just 2 weeks ago, Enbridge disclosed that its pipeline integrity department knew of the damage that it had caused to the pipeline while conducting maintenance in 2014—3 years ago.

I share the concerns that have been expressed by thousands of Michiganders who dread the worst case oilspill scenario, and I share their frustration and their anger at being misled. It is unacceptable that damage to a pipeline running through the Great Lakes could go unreported for 3 weeks, let alone 3 years.

Simply put, Enbridge does not deserve our trust, and we deserve some answers. This is why, earlier this week, I called on the Pipeline and Hazardous Materials Safety Administration to exercise its oversight role and conduct a thorough investigation—examine any potential safety or reporting violations—and assure all Michiganders of the safety and integrity of Line 5, if at all possible. I also joined Senator STABENOW in demanding answers from Enbridge's CEO to three very critical questions:

One, what are you doing to fix your broken reporting procedures?

Two, is there any other unreported damage to Line 5?

Three, how can we be certain that regulators are being fully informed by your company?

We need these answers, and we must get them.

I will never stop fighting to hold pipeline operators accountable and to keep our Great Lakes safe and clean. The Great Lakes are home, and I will do everything that I can to protect them for generations to come.

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. Without objection, it is so ordered.

SENATE ANTI-HARASSMENT TRAINING RESOLUTION

Ms. KLOBUCHAR. Mr. President, I want to turn to two topics today.

First, the good news is that all of the members of the Senate Rules Committee have come together on a mandatory sexual harassment training resolution that has been submitted with broad support, including from the two leaders and every member of the Rules Committee. I thank Senator GRASSLEY for his leadership, Senator SHELBY for his leadership, as well as Senators CAPITO and CORTEZ MASTO, who were a big help.

We are all too aware that sexual harassment continues in our workplaces. A recent study found that one in four women has been sexually harassed in the workplace and that three-quarters of individuals who have experienced sexual harassment at work have not reported the incidences. Civil service is actually among the top five industries with the highest sexual harassment incidences.

We know that it will not stop on its own, and we will not be complacent bystanders who expect workplace cultures to change on their own. That is why today, with a bipartisan group of 19 of our colleagues, we took a major step forward with this resolution. Once it is adopted by the full Senate, which we hope will be shortly, this resolution will simply require that all Senators and staff receive sexual harassment training, as well as on other forms of harassment, at least once every 2 years—in addition to that, 60 days after it passes.

What happens if Senators do not receive this training? The American people will know.

In one part of this bill—and I appreciate the broad support from Senator MCCONNELL, who has long been someone who has taken leadership in this area for many years, and from Senator SCHUMER, who has also taken leadership in this area—all offices will have to certify to the Secretary of the Senate that they and their employees here in Washington, as well as those working in our home States, have, in fact, taken the training and complied with the resolution. These certifications will be posted online for the public to view.

I thank Senator GRASSLEY, again, as well as Senator SHELBY. Senator GRASSLEY, the chairman of the Judiciary Committee, was the author of the Congressional Accountability Act of 1995. I want to thank as well Senators CORTEZ MASTO and CAPITO and all the members of the Rules Committee for coming together, on both sides of the aisle, on this commonsense resolution.

I urge my colleagues to support the Senate Anti-Harassment Training Resolution of 2017. There is more work to be done with regard to the reporting process, and that is something we are going to be working on in the next few weeks through the Rules Committee, but I do want to thank them.