

S. 2553

At the request of Ms. STABENOW, the names of the Senator from Kentucky (Mr. PAUL) and the Senator from Ohio (Mr. BROWN) were added as cosponsors of S. 2553, a bill to amend title XVIII of the Social Security Act to prohibit health plans and pharmacy benefit managers from restricting pharmacies from informing individuals regarding the prices for certain drugs and biologicals.

S. 2556

At the request of Mr. KENNEDY, the name of the Senator from New Hampshire (Mrs. SHAHEEN) was added as a cosponsor of S. 2556, a bill to direct the Administrator of the Federal Aviation Administration to promulgate regulations to prohibit the storage of live animals in overhead compartments of airplanes.

S. 2564

At the request of Mr. TILLIS, the name of the Senator from Utah (Mr. HATCH) was added as a cosponsor of S. 2564, a bill to amend title 11, United States Code, to promote the investigation of fraudulent claims against certain trusts, to amend title 18, United States Code, to provide penalties against fraudulent claims against certain trusts, and for other purposes.

S. 2565

At the request of Ms. DUCKWORTH, the name of the Senator from Maryland (Mr. VAN HOLLEN) was added as a cosponsor of S. 2565, a bill to amend title 38, United States Code, to require the Secretary of Veterans Affairs to provide child care assistance to veterans receiving certain training or vocational rehabilitation, and for other purposes.

S.J. RES. 54

At the request of Mr. SANDERS, the names of the Senator from New York (Mrs. GILLIBRAND) and the Senator from Wisconsin (Ms. BALDWIN) were added as cosponsors of S.J. Res. 54, a joint resolution to direct the removal of United States Armed Forces from hostilities in the Republic of Yemen that have not been authorized by Congress.

S. RES. 424

At the request of Ms. BALDWIN, the name of the Senator from Montana (Mr. DAINES) was added as a cosponsor of S. Res. 424, a resolution honoring the 25th anniversary of the National Guard Youth Challenge Program.

S. RES. 432

At the request of Mr. JOHNSON, the names of the Senator from Illinois (Mr. DURBIN), the Senator from Georgia (Mr. PERDUE), the Senator from Florida (Mr. RUBIO), the Senator from Delaware (Mr. COONS), the Senator from Wisconsin (Ms. BALDWIN), the Senator from Massachusetts (Mr. MARKEY), the Senator from Minnesota (Ms. KLOBUCHAR) and the Senator from Maryland (Mr. VAN HOLLEN) were added as cosponsors of S. Res. 432, a resolution congratulating the Baltic states of Estonia, Latvia, and Lithuania on the

100th anniversary of their declarations of independence.

#### STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. LEAHY (for himself, Ms. COLLINS, and Ms. HEITKAMP):

S. 2571. A bill to reauthorize the Runaway and Homeless Youth Act, and for other purposes; to the Committee on the Judiciary.

Mr. LEAHY. Mr. President, today, I am proud to once again join with Senator COLLINS to introduce the bipartisan Runaway and Homeless Youth and Trafficking Prevention Act. Senator COLLINS and I have championed this effort together for years now, and I thank her for her thoughtful and steadfast advocacy and constructive contribution throughout our efforts. Our bill will extend for five years key programs authorized by the Runaway and Homeless Youth Act, and expand and improve the programs and services that are vital—and sometimes life-saving—resources and safe havens for at risk youth in our home states and across the country.

Runaway and homeless youth are significantly more likely to become victims of sexual abuse and trafficking. Our bill ensures that service providers, who are the bedrock of the support system for runaway and homeless youth, have the information, training, and resources they need to identify and serve youth that have been victims of trauma. This includes connecting the youth with appropriate additional services to ensure their physical and mental health and safety.

The bill reauthorizes and expands programs and guidance that help providers reunify youth with their families and loved ones, or, if not possible, provide a tailored and comprehensive support system to help them get back on their feet or on a path to self-sufficiency. The spectrum of support services include emergency and transitional housing—because the first step is having a safe place to stay. They also include training and counseling relating to physical and mental health care, financial literacy, and workforce training. Runaway and Homeless Youth providers are there for the youth every step of the way, supporting them and connecting them to their community and to available resources. Our reauthorization adds completion of the Free Application for Financial Student Aid (FAFSA) form to the available assistance to help youth who wish to pursue advanced educational opportunities realize their goals.

Finally, our bill ensures that no child can be discriminated against in trying to gain access to access services or housing through Runaway and Homeless Youth programs. It is unconscionable to turn away any child in need—gay, straight, black or white. These are our Nation's most vulnerable youth and they must all feel welcome. In

many cases, Runaway and Homeless Youth programs can be a last resort. We cannot let one child fall through the cracks in our support system.

In Vermont alone, the Vermont Coalition of Runaway and Homeless Youth Programs served 500 young people in need of housing supports in Fiscal Year 2017. Vermont is the seventh most expensive State to live in for rural areas, and ranks within the top five States for the largest shortfall between housing wage and renter wage. As youth and families struggle to make ends meet in Vermont and across the Nation, these programs and support systems are more important than ever. We must invest the resources to ensure our youth have a safe place to go and the resources they need to become self-sufficient.

Senator COLLINS and I know just how dangerous and unpredictable the weather can be in the Northeast. In fact, we are getting hit with yet another nor'easter complete with fresh snow this week. No child in either of our states, or anywhere in the United States, should have to call the street home. The bill we are introducing today will help ensure our nation's children have a safe place to stay and have the support they need to grow, learn, and thrive.

#### SUBMITTED RESOLUTIONS

#### SENATE RESOLUTION 437—SUPPORTING THE GOALS OF WORLD TUBERCULOSIS DAY TO RAISE AWARENESS ABOUT TUBERCULOSIS

Mr. BROWN (for himself and Mr. SULLIVAN) submitted the following resolution; which was referred to the Committee on Foreign Relations:

S. RES. 437

Whereas  $\frac{1}{4}$  of the population of the world is infected with the tuberculosis bacterium (commonly referred to as "TB");

Whereas the World Health Organization (commonly referred to as the "WHO") estimates that 10,400,000 people were newly infected with TB in 2016, 10 percent of whom were also infected with the human immunodeficiency virus (commonly referred to as "HIV");

Whereas, in 2016, TB killed an estimated 1,700,000 people, causing more deaths worldwide than any other single infectious agent;

Whereas more than 80 percent of TB deaths among HIV-negative people in 2016 occurred in Africa and Southeast Asia, and India accounted for 33 percent of global HIV-negative TB deaths;

Whereas TB is a leading killer of people infected with HIV, and 400,000 people with HIV died of TB in 2016;

Whereas additional vulnerable populations at high risk for developing TB include pregnant women and newborns;

Whereas TB is 1 of the 5 leading causes of death among adult women between the ages of 20 and 59 in low-income countries, and women with TB can face stigma, discrimination, and in some settings ostracization by their families and communities;

Whereas the global TB epidemic and the spread of drug-resistant TB present a persistent public health threat to the United

States because the disease does not recognize borders;

Whereas antibiotic-resistant pathogens are a growing problem worldwide, and drug-resistant TB can occur when the drugs used to treat TB are misused or mismanaged;

Whereas studies have demonstrated direct person-to-person transmission of drug-resistant TB;

Whereas multi-drug resistant TB (commonly referred to as “MDR-TB”) is caused by bacteria with resistance to rifampin and isoniazid, the 2 most potent treatments for TB infection;

Whereas, according to the 2017 WHO Global Tuberculosis Report, in 2016 an estimated 4.1 percent of all new TB cases and 19 percent of previously treated cases were MDR-TB or rifampin-resistant TB;

Whereas, in 2016, an estimated 600,000 people around the world developed MDR-TB or rifampin-resistant TB and those drug-resistant strains caused approximately 240,000 deaths worldwide;

Whereas extensively drug-resistant TB (commonly referred to as “XDR-TB”) is a rare type of TB that is resistant to nearly all medicines, and therefore can be very difficult and expensive to treat, especially among patients with HIV and acquired immune deficiency syndrome (commonly referred to as “AIDS”);

Whereas, according to the 2017 WHO Global Tuberculosis Report, in 2015, 123 countries reported at least 1 case of XDR-TB;

Whereas, in 2016, the Centers for Disease Control and Prevention estimated that the cost of treating a single patient with MDR-TB in the United States averaged \$160,000, and the average cost of treating a patient with XDR-TB was even higher at \$513,000, compared with \$18,000 to treat a patient with drug-susceptible TB;

Whereas MDR-TB and XDR-TB cases in the United States between 2005 and 2007 collectively cost the health care system an estimated \$53,000,000, according to an analysis by the Centers for Disease Control and Prevention;

Whereas, in a 2000 report, the Institute of Medicine found that a decrease in TB control funding and the spread of HIV and AIDS caused a resurgence of TB in the late 1980s and early 1990s;

Whereas a total of 9,272 TB cases were reported in the United States in 2016, representing all 50 States and the District of Columbia, and up to 13,000,000 people in the United States may be living with latent TB infection;

Whereas 75 percent of States have reported an increase in the proportion of complex cases of TB in recent years due to factors such as homelessness, HIV infection, drug resistance, substance abuse, refugee status, and other factors;

Whereas the rate of TB disease in African Americans is 8 times higher than the rate in white non-Hispanic Americans, and significant disparities exist among other minorities in the United States, including Native Americans and Alaska Natives, Asian Americans, and Hispanic Americans, with 86 percent of all reported TB cases in the United States in 2016 occurring in racial or ethnic minorities;

Whereas, globally in 2016, an estimated 1,000,000 children developed TB and 250,000 children died of TB;

Whereas smoking greatly increases the risk of death from TB, and more than 20 percent of TB cases worldwide may be attributable to smoking;

Whereas diabetes is a major risk factor for TB, and people with diabetes are more likely to develop TB and have a higher risk of death due to TB;

Whereas bedaquiline is an antibiotic that boosts an MDR-TB patient's chance of survival from approximately 50 percent to as much as 80 percent, and through a public-private partnership, the United States Agency for International Development (commonly referred to as “USAID”) assists more than 8,000 patients in almost 40 countries in accessing this new medication;

Whereas Bacillus Calmette-Guerin, a TB vaccine that is known as “BCG”, provides some protection to children but has had little epidemiologic impact on TB worldwide;

Whereas there is a critical need for new drugs, diagnostics, and vaccines for controlling the global TB epidemic;

Whereas the WHO has called for “global solidarity and action” to support a 20-year strategy to end the global TB epidemic;

Whereas the enactment of the Tom Lantos and Henry J. Hyde United States Global Leadership Against HIV/AIDS, Tuberculosis, and Malaria Reauthorization Act of 2008 (Public Law 110-293; 122 Stat. 2918), and the Comprehensive Tuberculosis Elimination Act of 2008 (Public Law 110-392; 122 Stat. 4195) provided a historic United States commitment to the global eradication of TB, including a commitment to treat 4,500,000 TB patients and 90,000 MDR-TB patients between 2009 and 2013 and to provide additional treatment through coordinated multilateral efforts;

Whereas USAID provides financial and technical assistance to 23 countries highly burdened by TB, helps to support the development of new diagnostic and treatment tools, and is authorized to support research to develop new vaccines to combat TB;

Whereas TB incidence in the countries that receive bilateral TB funding from the United States through USAID has decreased by nearly ½ since 2000;

Whereas the Centers for Disease Control and Prevention, partnering with other entities of the United States and individual States and territories, directs the national TB elimination program, coordinates TB surveillance, technical assistance, and prevention activities, and helps to support the development of new diagnostic, treatment, and prevention tools to combat TB;

Whereas the National Institutes of Health, through its many institutes and centers, plays the leading role in basic and clinical research on the identification, treatment, and prevention of TB;

Whereas the Global Fund to Fight AIDS, Tuberculosis, and Malaria (commonly referred to as the “Global Fund”), to which the United States is a top financial donor, provides more than 65 percent of all international financing for TB programs;

Whereas, to date, Global Fund-supported programs have detected and treated 17,400,000 cases of TB; and

Whereas March 24, 2018, is World Tuberculosis Day, a day that commemorates the date in 1882 on which Dr. Robert Koch announced his discovery of *Mycobacterium tuberculosis*, the bacteria that causes TB: Now, therefore, be it

*Resolved*, That the Senate—

(1) supports the goals of World Tuberculosis Day to raise awareness about tuberculosis;

(2) commends the progress of tuberculosis bacteria elimination efforts by entities that include the Interagency Working Group on U.S. Government-Sponsored International Exchanges and Training, the United States Agency for International Development, the Centers for Disease Control and Prevention, the National Institutes of Health, the World Health Organization, and the Global Fund to Fight AIDS, Tuberculosis, and Malaria; and

(3) reaffirms the commitment to strengthen the United States leadership and effec-

tiveness of the global response to tuberculosis.

## SENATE RESOLUTION 438—COMMEMORATING THE 150TH ANNIVERSARY OF THE UNIVERSITY OF CALIFORNIA

Mrs. FEINSTEIN (for herself and Ms. HARRIS) submitted the following resolution; which was referred to the Committee on the Judiciary:

S. RES. 438

Whereas Congress enacted the Act of July 2, 1862 (commonly known as the “First Morrill Act”) (12 Stat. 503, chapter 130; 7 U.S.C. 301 et seq.), to allow for the establishment of land-grant colleges offering programs teaching agriculture and the mechanic arts;

Whereas on March 23, 1868, the State of California enacted the Organic Act, which—

(1) established the University of California (referred to in this preamble as the “University”); and

(2) entrusted the organization and government of the University to a corporate body entitled the Regents of the University;

Whereas in 1869 the University opened in Oakland, California, and had an inaugural class of 40 students and 10 faculty members;

Whereas, since 1869, the University has grown to include a total of 10 campuses in the following cities: San Francisco; Berkeley; Davis; Los Angeles; Santa Barbara; Riverside; San Diego; Santa Cruz; Irvine; and Merced;

Whereas, as of 2018, the University has more than 273,000 enrolled students and employs more than 223,300 faculty, staff, and other academics;

Whereas the University has graduated more than 2,000,000 living alumni;

Whereas in 1870 the University decreed that the University would admit women and men equally;

Whereas the University has 5 academic medical centers, which include 6 medical schools, 12 public hospitals, and 18 health professional schools;

Whereas the University is affiliated with—

(1) Lawrence Berkeley National Laboratory, since 1931;

(2) Los Alamos National Laboratory, since 1943; and

(3) Lawrence Livermore National Laboratory, since 1952;

Whereas these 3 national laboratories are—

(1) working to create advanced new tools for scientific discovery;

(2) enabling transformational solutions for health and the environment;

(3) enhancing the defense of the United States while reducing the global threat from terrorism; and

(4) addressing other emerging national security and energy challenges;

Whereas, due to the commitment of the University to diversity and to providing access to higher education to all qualified students in the State of California, the University currently enrolls the highest number of resident undergraduates in the history of the University;

Whereas the faculty of the University is internationally renowned for scholarly and scientific achievements, and has helped maintain the prestige and quality of education of the University during decades of social and technological change;

Whereas in 1939 University professor E. O. Lawrence received the first Nobel Prize of the University for inventing the cyclotron;

Whereas 61 faculty members associated with the University have won Nobel Prizes;

Whereas the faculty and alumni of the University include hundreds of MacArthur “Genius” grant winners, Pulitzer Prize winners,