

will be meeting with her next week. I have a number of questions, and after meeting with her, I will make my decision.

I thank the Senator from Texas, as I have thanked many on the Intelligence Committee from whom I have sought opinions while reading all the relevant documents.

#### HEALTHCARE

Mr. President, I rise today because the State of Florida has again proposed to harm thousands of seniors and folks with disabilities who rely on Medicaid for their healthcare, as well as for their financial security.

Under current law, critical protections in Medicaid allow those who rely on the program for their healthcare to get up to 3 months of retroactive coverage after they apply for Medicaid and after they have enrolled in the program. To put that in another way, a person who has had healthcare problems and who is eligible under Medicaid, once they apply, under current law, there is a look-back period of 3 months in which those healthcare expenses they incurred would be reimbursed to their healthcare providers—the doctors, the nurses, whatever the service is—and paid by Medicaid because they have been deemed to be eligible—certain people with disabilities and certain people because of their income level and their status.

What the State of Florida is proposing—and this is what is so damaging—is to cut those 3 months of reimbursement for Medicaid down to 1 month. The current law is 3 months, so why should the State of Florida penalize its citizens who are eligible under Florida's law for healthcare through Medicaid by saying: We are going to make you eligible only for 30 days instead of 3 months. It defies understanding.

The State proposed to CMS just a week or so ago to eliminate this critical protection, and in the process, it jeopardizes many people in Florida right now—39,000 of the most vulnerable Floridians and the countless medical providers who treat them. If they constrict this period, that means a lot of providers will not get compensated by Medicaid, such as a hospital. The hospital can't eat all of those uncompensated expenses, so what happens? Ultimately, it finds its way to the rest of us taxpayers who have private health insurance, and it runs up the price of health insurance.

If what the State of Florida is doing is not enough of an outrage to these 39,000 people, this maneuver will also cut up to \$100 million from an already underfunded Medicaid Program that is suffering because the State of Florida has decided over the last several years that it is not going to expand Medicaid up to 138 percent of the poverty level. Do you know how much money the State of Florida has passed up that, otherwise, 800,000 people in Florida would be getting healthcare through Medicaid? They passed up \$66 billion in

Federal funds that is sitting there on the shelf ready to be used for healthcare through Medicaid for Florida by refusing to expand Medicaid that is allowed under the law up to 138 percent of poverty. It is unacceptable.

This provision was designed to protect seniors and veterans and pregnant women and individuals with disabilities and parents and their families with high medical bills and the costs associated with long-term care. So not only are we jeopardizing the pay of the hospitals and the doctors and the nurses and all of the medical providers, for which they are eligible under current law, we are also putting into financial jeopardy the poor people who are sick and need to be treated, and they don't have the money because of their income level. They don't have the money. Then they start getting all of these dunning statements saying: We are going to come after you financially, and we are going to put you into the poor house.

That is why I joined with my colleague in the House, Congresswoman CASTOR. We have a letter signed by half of the Florida delegation calling on CMS to reject this heinous provision that the State of Florida is asking for.

I ask unanimous consent that this letter be printed in the RECORD.

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

#### CONGRESS OF THE UNITED STATES,

*Washington, DC, May 10, 2018.*

Re Oppose Florida's 1115 Medicaid Waiver Amendment to Eliminate Retroactive Eligibility Due to Potential Extreme Harm to Older and Disabled Floridians

Hon. SEEMA VERMA,  
*Administrator, Centers for Medicare & Medicaid Services, Baltimore, MD.*

DEAR ADMINISTRATOR VERMA: As members of the Florida Congressional Delegation, we write to urge you to oppose provisions of the State of Florida's 1115 Medicaid MMA Waiver Amendment that would directly harm thousands of seniors and neighbors with disabilities in Florida.

Today, critical protections in Medicaid mean beneficiaries can get up to three months of retroactive coverage from the date they apply to enroll in the program as long as these individuals were eligible for Medicaid when they received care. In March, the state proposed eliminating this policy of retroactive eligibility by amending its ongoing Section 1115 demonstration. If approved, this decision could jeopardize the financial security of at least 39,000 of the most vulnerable Floridians and countless providers who treat them. It will also cut at least \$100 million from an already underfunded Medicaid program that is suffering from the state's continued choice to pass up more than \$66 billion in federal funds by refusing to expand its Medicaid program.

Retroactive eligibility is designed to protect Medicaid beneficiaries—including seniors, pregnant women, individuals with disabilities, and parents—and their families from the steep costs of medical services and long-term care. Importantly, this protection was also designed to minimize uncompensated care costs faced by hospitals and other health care providers who take care of our neighbors and are already challenged by the state's low reimbursement rates. Also important to remember is, even though retro-

active, folks who end up covered are unquestionably eligible for Medicaid and this existing policy and time frame protects those who are unaware—through no fault of their own—that they qualify.

Applying for Medicaid coverage can be a complicated and sometimes burdensome process, particularly when an individual or family member is dealing with securing admission to a nursing home, addressing a medical emergency, or seeking care for a worsening illness or injury. Leaving Medicaid-eligible applicants without financial protection simply because they have not enrolled is cruel and in direct conflict with the goals of the Medicaid program. This proposal will directly hurt Floridians with disabilities and seniors in nursing homes. If CMS approves this proposal in its current form, it would likely prevent vulnerable populations, especially seniors in nursing homes, from getting the care they need.

It is our duty to ensure eligible individuals have access to care without going into debt to obtain it, which is why retroactive eligibility is so vital. This proposal would not only wipe out many families' pocketbooks, but it would also place a financial burden on health care providers, the state and indeed all Florida taxpayers through increased uncompensated care costs. We fail to see how this proposal will "enhance fiscal predictability" as the state claims when it will increase costs across the board. If the state were serious about securing greater financial security, they should expand Medicaid and accept the \$66 billion in federal funds that Floridians have already paid for with their tax dollars and provide health care to about 700,000 Floridians.

Instead of building barriers to coverage, we need to focus on getting our uninsured and underinsured neighbors quality and affordable health coverage and reducing uncompensated care costs that hurt health care providers' ability to provide needed care and strain Florida's economy. That is why we urge you to reject the State of Florida's proposal to eliminate retroactive eligibility.

Thank you for considering our request.

Sincerely,

Bill Nelson, U.S. Senator; Frederica S. Wilson, U.S. Representative; Charlie Crist, U.S. Representative; Kathy Cas, U.S. Representative; Lois Frankel, U.S. Representative; Kathy Castor, U.S. Representative; Ted Deutch, U.S. Representative; Al Lawson, Jr., U.S. Representative; Stephanie Murphy, U.S. Representative; Debbie Wasserman Schultz, U.S. Representative; Alcee L. Hastings, U.S. Representative; Darren Soto, U.S. Representative; Val Butler Demings, U.S. Representative.

Mr. NELSON. Mr. President, it is our duty to ensure that folks—our folks, the people in our States—have access to care without having to go into debt to obtain that care. The State of Florida is attempting to take that away. In doing so, it is attempting to wipe out many families' pocketbooks and increase the strain on the healthcare providers—the doctors, the nurses, the hospitals—and all Florida taxpayers, who ultimately, on uncompensated care, are the ones who pick up the bill.

The State of Florida claims that this proposal will "enhance fiscal predictability." That begs the question: For whom? If the State really wanted to secure greater financial security, it would expand Medicaid and accept the \$66 billion of our Florida financial taxpayer money sitting on the shelf,

which Floridians have already paid for with their tax dollars, and provide healthcare for up to 800,000 Floridians who don't have it now.

Perhaps what is even more troubling is that the letter accompanying the State of Florida's request stated that the agency—get this—“was not aware of any concern or opposition raised by any member of either party regarding this provision during extensive budget debate.” So now not only is the State of Florida trying to harm thousands of Floridians, including many of our seniors and veterans—by the way, veterans are on the Medicaid Program as well. Don't forget that. All veterans are not taken care of under only the Veterans' Administration; there are a lot of veterans on Medicaid.

So the State is trying to harm these people, and I wonder now, in that letter that I just quoted from, if the State is misleading the Federal agency CMS in trying to get their waiver approved to cut the 90 days down to 30 days. Indeed, members of the Florida State Senate, the legislature, raised innumerable concerns and objections to the provision. Most recently, the Florida Senate minority leader called out the Governor's administration for the misleading claims.

Instead of making it harder to gain coverage, we ought to be focusing on getting our uninsured neighbors quality and affordable health coverage and reducing uninsured, uncompensated costs. We need to do what is good for the people of Florida.

Mr. President, I yield the floor.

The PRESIDING OFFICER. The Senator from Nevada.

#### YUCCA MOUNTAIN

Mr. HELLER. Mr. President, I rise today to reiterate my strong opposition to the House of Representatives' effort to restart licensing activities at Yucca Mountain and in particular the Nuclear Waste Policy Amendments Act, which passed the House just a few hours ago.

This bill, which is a complete and total waste of taxpayer dollars, is dead on arrival in the U.S. Senate. Not only will I place a hold on the bill now that it has passed the House, I will also object to the motion to proceed to the bill. This vote today proves my point that I am the only person in Washington, DC, standing between a pristine, beautiful Nevada or a Nevada dripping with nuclear waste. As I have said in the past, I will continue to serve as a roadblock to every effort to make Nevada our Nation's nuclear waste dump.

Despite the House of Representatives' repeated attempts to revive a failed project, I have been able to ensure that not a single dollar has been appropriated to restart licensing activities at Yucca Mountain. This vote is nothing but a failed exercise because as long as I am in the Senate, Yucca Mountain is dead. It is as simple as that. As I have previously said, under my watch, I will not let one more hard-

earned taxpayer dollar go toward the failed Yucca Mountain project. My State refuses to serve as our Nation's nuclear waste dump. That is why I am proud to say that because of my leadership, the Senate has repeatedly refused to pass a law funding the high-level nuclear waste repository—a position that was most recently confirmed in the most recent omnibus spending measure.

Because of my current work as Nevada's senior Senator and my bipartisan work with the former Senate majority leader, Yucca Mountain remains dead. I repeat, it is simple as that. But despite Yucca's clear and unquestionable death long ago, some of my friends on the other side of the Capitol continue to waste their time attempting to bring back life to this ill-conceived and fiscally irresponsible plan. Their efforts keep alive a longstanding fight over States' rights and distract us from the real task at hand, which is finding a viable, long-term nuclear waste storage solution that meets the needs of all Americans.

I will be the first person to recognize the important role nuclear power plays in a stable and secure “all of the above” energy strategy and that with nuclear energy comes the need to properly store spent nuclear fuel, but I firmly believe that our Nation cannot progress towards achieving viable and sustainable storage solutions for spent nuclear fuel and defense high-level waste without first abandoning Yucca Mountain.

I am not saying that we shouldn't come to the table to discuss our Nation's nuclear waste storage needs. We should, and I would. But I also believe States should have a say in the matter. That is why, in my opinion, consent-based siting presents the only viable path forward on this issue. Consent-based siting offers a means of addressing our Nation's high-level nuclear waste problem while at the same time respecting the sovereignty of States to object to becoming nuclear waste dumps. The Yucca Mountain proposal, however, represents the exact opposite of consent; it is a unilaterally imposed Federal mandate that goes against the will of the people it directly affects.

My colleagues have heard me raise the question many times that I and Nevadans are thinking: Why should a State without a single nuclear powerplant of its own be forced against its will to house all of our Nation's nuclear waste?

Let me repeat that. Why should a State without a single nuclear powerplant of its own be forced against its will to house all of our Nation's nuclear waste? This is a question that has never been answered—not from the Presiding Officer's seat, not from the Speaker of the House, nor from the author of this bill. And I think if we want an intellectually honest answer, it would be that it shouldn't have to.

Beyond the violation of the State sovereignty and the disregard for the

will of the local population, the Yucca Mountain proposal poses significant health and safety risks and potentially catastrophic financial risks that must be addressed before, not after, the proposal moves forward, should it move forward at all.

What are these risks? Well, for one, Yucca Mountain is located just 90 miles from the world's premier tourist and convention and entertainment destination of Las Vegas, NV. Last year, Las Vegas welcomed nearly 43 million visitors. Over the past decade, the greater Las Vegas area has been one of the fastest growing in the United States, with a population that now exceeds 2.1 million people, according to the latest U.S. Census Bureau numbers. Any issues with the transportation of nuclear waste to that site or issues with storage there would bring devastating consequences to the Las Vegas, NV, and national economies—issues that would inevitably result from shipping 9,500 rail casks in 2,800 trains and 2,650 trucks hauling 1 cask each to Yucca Mountain over the next 50 years. These shipments would use 22,000 miles of railways and 7,000 miles of highways and cross over 44 States.

To date, however, Nevadans have not received sufficient assurance from the Department of Energy or the Nuclear Regulatory Commission that their concerns about these risks will receive the procedural due process and thoughtful consideration they are owed under existing law. In fact, in my recent correspondence with the Nuclear Regulatory Commission, I continue to stress to the Commission the importance of procedural safeguards, such as local hearings and local adjudication, to ensure that parties directly affected by the proposal have the opportunity to air their concerns and have them considered in an open and reasonably close forum.

It is because of these and other unresolved concerns that I continue to stand with the State of Nevada in its strong opposition to restarting licensing activities at the Yucca Mountain repository.

Rather than forcing the State of Nevada to accept nuclear waste at a scientifically unsound site, taxpayer dollars would be better spent identifying viable alternatives for the long-term storage of nuclear waste in areas that are willing to house it. Finding alternatives is the commonsense path forward, as well as the fiscally responsible decision.

The Federal Government should not waste another taxpayer dollar on Yucca Mountain—waste that already amounts to nearly \$15 billion. According to Department of Energy estimates, an additional \$82 billion would be needed to license, construct, and operate Yucca Mountain through closure, bringing the total system life cycle cost for the project to around \$100 billion—an amount that would be probably 15 to 20 percent higher in today's dollars.