

consideration in a few weeks. That is the first time we have ever heard that guarantee.

The same energy and spirit that the bipartisan group put into forging a compromise this weekend ought to be committed to finding a bill on DACA that will pass this body with 60 votes.

I support the bipartisan group. In fact, as some of our Members on the Democratic side had plans for it, I encourage them to join it and form it. I have had very good conversations with both leaders—Senator MANCHIN, a Democrat; Senator COLLINS, a Republican—and what they are doing is very good for the body. Speaking as Democratic leader, I encourage these kinds of groups to come forward.

I remember the old Senate. I remember that individual Senators were involved in negotiating very important and very difficult issues. It made the Senate a better place, it made the Members feel more fulfilled, and it made our ability to get things done much, much more likely.

Our task is different from the task last week. The Senate must find consensus. For that reason, we need to start from a new place. My negotiations with the President shouldn't dictate talks here on the Hill. That was then; this is now. It was a hope that last Friday the President would have reached out and supported something, that he wanted to get something that we wanted and he proclaimed to want too. It didn't happen. Now the group has to start in a new way, with no preconceptions, and come together and find a bill that can garner 60 votes. That is a job for these Senators who came together so well in the last few days.

Protecting the Dreamers is our moral obligation. The Senate is now in the spotlight. The eyes of the American people, who overwhelmingly sympathize with the Dreamers—90 percent, a majority of Republicans—believe in these Dreamers. They don't go for these calls of amnesty. These people have worked hard. They have been trying so hard to be Americans. They came across the border when they were little, and now they are in our Armed Forces, they are in our factories, they are in our schools, and they are in our offices. To say that allowing them to become Americans is amnesty is nasty—nasty.

Protecting the Dreamers is our moral obligation. The Senate is in the spotlight. The eyes of the American people, who sympathize with the Dreamers—the vast majority of Republicans, as well as Democrats, sympathize with Dreamers, and all of their eyes are on us. We need to get the job done.

REPUBLICAN TAX BILL

Mr. President, finally, a word on the Republican tax bill. Republicans promised that the massive corporate tax cut they passed would unleash unprecedented economic growth, raise wages, and boost jobs. We already have evidence that big corporations are not

turning their new tax cut into jobs for the middle class.

There was a lot of hoopla when AT&T said they would give bonuses. Do you know what they did at the same time? They announced plans to fire more than 1,000 workers, starting early this year, despite the tax cut. Macy's announced that it would be cutting 5,000 jobs, despite the tax bill. Kimberly-Clark plans to cut up to 5,500 jobs and close or sell about 10 plants, saying the savings from the tax bill gave them flexibility to make these reductions. Is President Trump going to claim credit for that one? Carrier—a company the President promised to save—continues to bleed jobs. They are a metaphor. A lot of nice announcements, a lot of blitz and glitz, but actually the condition of the American worker is getting no better and many times, worse.

Meanwhile, what are most companies doing—so many of them—with these big tax breaks, these massive tax breaks they got? They are announcing stock buybacks. That benefits the CEO. It raises their stock and doesn't help anybody else. Mastercard, \$4 billion; Bank of America, \$5 billion; Pfizer, \$10 billion; Wells Fargo, \$22 billion; and many, many more. One hundred billion dollars has been announced in stock buybacks since the Senate passed its tax bill.

When the American people learn that some of them are not getting anything, that some of them are getting raises and the rest are getting crumbs and big corporations and wealthy individuals are getting nice, fat pieces of pie, they are going to be outraged. They are already.

My friend the majority leader will not come to the floor and brag about the stock buybacks. He will, however, announce when a company gives a bonus to its workers. Let's hear both sides and let the American people judge. The bonuses are a good thing, but the truth is, these one-time bonuses are a drop in the bucket compared to what corporations could be doing for their workers.

By the way, let me announce a few other things these corporations did after they got the tax breaks. When Bank of America announced \$5 billion in stock buybacks, it also announced that it started charging low-income customers for free checking. When Pfizer announced its \$10 billion buyback, it said it would no longer research for Alzheimer's or Parkinson's, laying off 300 people. Wells Fargo announced \$22 billion in stock buybacks, helping its wealthy shareholders at the same time it is closing 800 branches.

Here is a paragraph from yesterday's New York Times.

Bank of America's bonuses will cost the bank \$145 million in 2018, or about 5 percent of the nearly \$2.7 billion in savings it is expected to reap in 2018 from a lower, 21 percent corporate tax rate. Apple's bonuses will cost \$300 million, a fraction of the \$40 billion, at least, that the tech giant is saving from a single provision in the law, which allows it to return earnings held overseas at less than

half the rate it would have paid under the old system. And two days before Walmart snagged glowing headlines for handing out \$400 million in bonuses and lifting its minimum wage at a cost of \$300 million, the nation's largest retailer by sales unveiled a plan to buy back company-issued debt. . . . \$4 billion.

Minimum wage, they pay out \$300 million; stock buyback, \$4 billion.

I am glad these workers are getting bonuses. They deserve them. But it seems that recently, these bonuses are token efforts to give corporate executives something to point to while they reap huge benefits for themselves and their shareholders.

A CNBC survey found that "cuts in corporate taxes haven't yet had a meaningful impact on American companies' plans to boost investment or raise workers' pay." That is CNBC.

Yes, we could have imagined tax reform that was deficit neutral, that closed loopholes while lowering rates, that lowered corporate taxes but actually stipulated that the money be put into wage increases and new jobs instead of what many companies are doing now—one-time bonuses and massive stock repurchasing programs. Many middle-class families have waited so long for better wages and more jobs. A tax bill properly constructed could have helped deliver that to them. Instead, Republicans squandered their once-in-a-generation opportunity on an extraordinary tax break for big corporations and the already wealthy, and we are already seeing the consequences.

I yield the floor.

The PRESIDING OFFICER (Mr. SULLIVAN). The Senator from Washington.

Mrs. MURRAY. Mr. President, almost a year ago, as Republicans were jamming through the confirmation of Tom Price as Secretary of Health and Human Services, I rose to object to his nomination. I voiced my very deep concerns about whether Secretary Price would be committed to protecting healthcare for our families, committed to putting evidence and sound policy over partisanship and ideology, and whether he would be committed to addressing the many ethical questions about his investments Republicans allowed to go unanswered. Well, he was not.

Today, Secretary Price is infamous for two signature accomplishments: first of all, undermining healthcare access for millions of people; and, second, resigning in scandal and disgrace.

In the wake of Secretary Price's resignation, President Trump had another opportunity to get this right. I believe families in Washington State deserve a Health and Human Services Secretary who will finally put patients ahead of politics.

Unfortunately, after meeting with Alex Azar, hearing his testimony, and carefully reviewing his record and his qualifications, I do not believe Mr. Azar is an acceptable choice to lead the Department, and I will be voting against his confirmation.

From President Trump's first day in office, he has been focused on undermining healthcare coverage by putting up barriers to obtaining care, shortening our enrollment period, expanding loopholes for corporations, and making every effort to throw the entire system into chaos. After a year of President Trump's healthcare sabotage, there were over 3 million more people uninsured in our country. We need a voice to stand up and defend the healthcare our families rely on.

I am alarmed by Mr. Azar's statements, including cheerleading healthcare repeal efforts, predicting that the Affordable Care Act was "circling the drain," even though enrollment stayed strong across the country this year, and detailing specific steps to, as he said, hasten the demise of patients' and families' healthcare.

While President Trump continues to call the opioid crisis a public health emergency, he has yet to treat it like one. So far, his administration has proposed cutting the budget for the Office of National Drug Control Policy by 95 percent. It is focused on gutting Medicaid, which provides critically needed substance use disorder treatment, and they have failed to provide any new funding or resources to support the communities that are fighting this crisis.

Local leaders in my home State of Washington and across the country need a voice at the Department of Health and Human Services committed to bringing more resources, not fewer, to address the opioid epidemic. I am alarmed by Mr. Azar's refusal to support more funding for communities that are hard hit by the opioid epidemic.

President Trump's Department has also shown a concerning pattern of undermining evidence-based policies in favor of ideology. When it comes to undermining evidence, political appointees at Health and Human Services have asked their career staff not to use the terms "evidence-based" and "science-based" because they view them as "essentially meaningless."

When it comes to favoring ideology, not only has the Department taken steps to restrict access to care for women and transgender patients, leaders have also sought to effectively ban words like "transgender" and "diversity" and "vulnerable" among their Department employees—ban the words, and they have not just cut important words, they have gutted valuable, evidence-based programs like the Teen Pregnancy Prevention Program.

This program has provided useful insight on what works to address high teen pregnancy rates. It has been recognized by the bipartisan Commission on Evidence-Based Policymaking for its rigorous approach to evaluation. Yet President Trump's administration chose to unilaterally shorten that program's grants.

We need a voice there who will reject such damaging ideology decisions and

to champion evidence and science and sound policymaking. I do not believe Mr. Azar is that champion—quite the opposite, in fact.

I am alarmed Mr. Azar believes a woman's employer should be able to decide, based on ideology, whether or not her birth control should be covered. I am alarmed by his extreme and out-of-touch views on *Roe v. Wade*, as shown by his support for legislation and political candidates who would undermine the constitutional rights enshrined in this important decision, and his use of ideological rhetoric in discussing the rights guaranteed to women by that landmark case.

Unfortunately, Mr. Azar is the latest in a string of ideologically driven healthcare appointees from President Trump. We cannot tolerate one more nominee overseeing a woman's healthcare programs who is more focused on undermining them than on advancing them.

Finally, I am alarmed by his track record at the pharmaceutical company Eli Lilly. As a nominee, Mr. Azar has said we need to fight to lower drug prices, but during his time as president of Lilly, that company tripled the price of insulin, and Mr. Azar personally approved significant price increases for dozens of the company's drugs.

As a nominee, Mr. Azar may try to assure us that he will fight for patients and protect the health of our communities, but after looking at his record, after reading his past statements, and after discussing these issues with him, I am alarmed he might not stand up for women and families, I am alarmed he might not stand up to the pharmaceutical industry, and I am alarmed he might not stand up to President Trump's agenda, driven by sabotage and ideology.

After months of Republicans putting politics ahead of funding healthcare for children, and as Republicans continue to put politics ahead of funding for community health centers like those in rural Washington State and those across the country that help to serve underserved communities, and as they continue to ignore other primary care programs that bring medical professionals to populations in need like teaching health centers in Spokane, we have to have strong leadership at the Department of Health and Human Services that will demand that we put public health first, not partisanship.

I urge my colleagues today to vote against this nomination.

I thank the Chair.

I yield the floor.

The PRESIDING OFFICER. The Senator from New Jersey.

Mr. MENENDEZ. Mr. President, I come to the floor to voice my concerns about the nomination of Alex Azar to lead the U.S. Department of Health and Human Services.

The American people deserve a Secretary of Health and Human Services who actually believes in the agency's work and mission, which is to help

America's families, children, and seniors lead healthier and more productive lives.

Nothing in Mr. Azar's record gives me any reason to believe he will do anything other than advance the Trump administration's mission to take healthcare coverage away from millions of Americans and leave everyone else with higher costs.

Instead of working to help more families get the care they need, I fear he will devote most of his time to imposing a harmful, rightwing ideology on patients, on women, and on families.

Mr. Azar will continue the Trump administration's reckless assault on the reproductive rights of women; he will support the far right's relentless war on science- and evidence-based health policy; and he will put the needs of powerful special interests ahead of patients and families.

It is hard to believe the Trump administration has only been in office a year because already it has broken so many of the promises the American people were fed on the campaign trail. During his campaign, President Trump promised he would replace the Affordable Care Act with something truly great, something way better, but under President Trump's watch, things have only gotten worse. Premiums are up, deductibles are up, and for the first time since 2012, the number of Americans with healthcare coverage has gone down.

Now, this is no accident. It is the result of the Trump administration's relentless assault on the Affordable Care Act. That is right. Thanks to this administration's deliberate efforts to sow chaos in our health insurance markets, and subsidies that reduce sky-high deductibles, and give consumers less time to shop for insurance, 3.5 million fewer Americans have coverage compared to 1 year ago. In my State, the number of New Jerseyans enrolled in the marketplace dropped by 5 percent.

Mr. Azar says the Affordable Care Act is "circling [down] the drain," when the reality is, Republicans have done their best to drown it. The Trump administration has no plan to help the growing number of Americans without coverage, and Mr. Azar has offered no solutions to protect their health and financial security. In fact, he believes the paltry tax credits Republicans propose in their Affordable Care Act alternative to buy insurance are too generous—too generous. If I said that to any one of my constituents, they would laugh in my face.

Nothing in Mr. Azar's record gives me any confidence that he will change course. That is because, like former Secretary Tom Price, Mr. Azar lives in an alternative universe, where health insurers will suddenly put the well-being of patients ahead of their stock prices; that if we just scrap the Affordable Care Act, the free market will magically begin covering the sick, caring for families, and protecting our seniors.

Well, we know that is patently false. We already tried letting health insurance companies run the show, and it didn't work because, in America, healthcare doesn't ever go on sale. If it did, people would be banging down doors like Best Buy on black Friday to schedule their heart surgeries and cancer treatments.

Mr. Azar seems to forget that we need commonsense protections to ensure Americans with preexisting conditions have access to coverage; that before the Affordable Care Act, health insurance companies routinely denied coverage for cancer survivors and people with chronic challenges like MS; that children with preexisting conditions like asthma or heart murmurs were blacklisted by insurers for life; that thousands of people were bankrupted by medical bills each and every year, and women were charged higher premiums for the same exact insurance policies as men.

Mr. Azar seems to forget that before programs like Medicare and Medicaid, seniors who worked hard their entire lives languished without care and lived in abject poverty. Do we really want to see seniors backsliding into poverty in 2018?

Now, I know Mr. Azar is a very wealthy man—it almost seems to be a prerequisite in order to serve in the Trump Cabinet—but I encourage him to try to imagine what it is like to work a low-wage job that doesn't provide healthcare benefits and what it is like for parents in New Jersey to go to work every day knowing they are one illness or injury away from ruining their family's financial future.

These men and women are among the 11 million Americans who depend on the Affordable Care Act's Medicaid expansion, including well over half a million in New Jersey alone. Yet Mr. Azar believes he has a mandate to turn programs like Medicare into vouchers that shortchange seniors. He supports turning Medicaid into a block program, which is a way of ultimately dramatically cutting the program and a fancy way of saying States should be allowed to block millions of people from getting the care they need—no matter how much money they make, what ZIP Code they come from, or what healthcare challenges they face.

The American people deserve a Secretary of Health and Human Services who is prepared not only to defend these stalwart programs but is committed to building on their success. After a year of higher costs, less coverage, and empty promises by the Trump administration, the American people want Congress to turn the page. We have the chance to do that by rejecting Mr. Azar's nomination.

It is time we demanded the administration nominate a leader who is truly devoted to helping all Americans get the care they need no matter how much money they make, what Zip Codes they come from, or what healthcare challenges they face.

I yield the floor.

The PRESIDING OFFICER. The Senator from New Hampshire.

Mrs. SHAHEEN. Mr. President, I join my colleagues on the floor to speak in opposition to the nomination of Alex Azar to head the Department of Health and Human Services.

I believe Mr. Azar is, first and foremost, a product of the pharmaceutical industry, with a long, consistent track record of sharply increasing drug prices during his tenure at Lilly USA.

Furthermore, his nomination makes clear that President Trump did not mean it when he said repeatedly during the campaign that pharmaceutical companies are "getting away with murder" and that he as President would dramatically reduce drug prices for seniors and all Americans. Mr. Azar's nomination is yet one more example of the Trump administration putting special interests above the public interest and public safety.

Mr. Azar has long opposed any Federal intervention in prescription drug pricing, things like allowing Medicare to negotiate for drug prices. Of course, his former company has profited handsomely from the government's hands-off approach. When Mr. Azar became the president of Lilly USA, he also became the chair of its pricing committee and had a major say in price increases for all domestically sold Lilly drugs from 2012 to 2014. During that time, the list and net prices of Lilly's drugs that were sold in the United States increased by double-digit percentages each year.

As cochair of the Senate's Diabetes Caucus, I am especially troubled that during Mr. Azar's time with the company, Lilly more than tripled the price of insulin—jacking up the price from \$74 to \$269. Much of that increase occurred during Mr. Azar's years as chair of the pricing committee. These price increases are not only exorbitant but have caused real hardship to many of the nearly 30 million Americans who live with diabetes. As Candidate Trump would have put it, Lilly, under Mr. Azar's leadership, was "getting away with murder."

I am also concerned that Mr. Azar will continue and even ramp up the Trump administration's across-the-board campaign to sabotage our healthcare system. We are now 1 year into this administration's efforts to undermine the Affordable Care Act. Regrettably, it is working. The uninsured rate rose in 2017 by 1.3 percentage points. That was nearly 3.2 million more people who were without health insurance.

Already, the administration has eliminated those payments that allow insurance companies to keep down premiums and reduce copays and deductibles, and that has created further hardship on people who desperately need health insurance. Without reason or justification, the administration cut the open enrollment period by half. It slashed the budget for

open enrollment ads on TV, radio, and the internet by 90 percent, which shut down most efforts to inform consumers about their enrollment options.

Despite these efforts, they were not successful in dramatically reducing the number of people who tried to enroll in the Affordable Care Act because enrollment for 2018 was 8.8 million people compared to 9.2 million the year before. It shows how desperately people want to have health insurance. Of course, we know that since that enrollment period, the Republican leaders in Congress have used the tax bill to repeal the individual mandate. Meanwhile, in an interview, Mr. Azar spoke of his desire to "hasten [the Affordable Care Act's] demise." Apparently, he doesn't appreciate that the Affordable Care Act and Medicaid expansion, in particular, have been absolutely critical tools in the fight against the opioid epidemic.

I urge Mr. Azar and President Trump to read the front page story in Sunday's New York Times. The story is about the devastating consequences of the opioid epidemic in my State of New Hampshire. The article is titled "How a 'Perfect Storm' in New Hampshire Has Fueled an Opioid Crisis." It was accompanied by an even more compelling article, titled "1 Son, 4 Overdoses, 6 Hours," which profiles the life of Patrick Griffin of Pembroke, NH. In shocking detail, the article documents how Mr. Griffin, who has struggled for years with a substance misuse disorder, overdosed four times within a 6-hour period. Twice within those 6 hours, emergency medical responders came to his house and revived him with Narcan, the antidote that reverses opioid overdoses.

In reading that article, some people will ask: Why can't he just control his substance use disorder? They don't understand this is a disease, that it changes people's brain makeup—the chemistry of an individual's brain. Just like heart disease or diabetes or any other chronic illness, there is a physiology that is involved with that that affects a person's ability to get better.

One of the things that saves people like Patrick when one is overdosing is the drug Narcan, or naloxone, which is the official name. It has been used so much in New Hampshire that most people refer to it as Narcan. We have seen that the pharmaceutical industry has dramatically increased the price of Narcan as this epidemic has spread.

The price of the drug that is needed by so many to save their lives has increased dramatically. A two-dose package of Narcan, manufactured by Evzio, cost \$690 in 2014. It is \$4,500 today. Generic doses of Narcan have increased between 95 and 129 percent since 2012. Bear in mind, it often takes multiple doses to revive people who have overdosed, so this has an impact on our healthcare system. In New Hampshire, it has had an impact on families, on municipalities, on first responders—all of those people who are trying to save people who have overdosed.

As we all know, the opioid epidemic is a nationwide crisis, with some 63,000 Americans having been killed by drug overdoses in 2016. New Hampshire has been especially hard hit. The demise of the Affordable Care Act, which Mr. Azar says he wants, would mean that thousands of Granite Staters would lose access to treatment, with there being devastating consequences. That is true not just in New Hampshire but in States across this country. I think it is unconscionable that a Secretary of Health and Human Services would take away one of our most valuable tools for combating substance use disorders and that he would actively oppose access to healthcare for millions of Americans.

For me, between Mr. Azar's coziness with the pharmaceutical industry and his disdain for the Affordable Care Act, which is the law of the land and which Mr. Azar would be charged with administering as Secretary, I think he is the wrong person to serve in the critically important post of Secretary of Health and Human Services. I intend to vote against his confirmation, and I hope my colleagues will do the same.

I thank the Presiding Officer.

I yield the floor.

The PRESIDING OFFICER. The President pro tempore.

(The remarks of Mr. HATCH and Mr. ALEXANDER pertaining to the introduction of S. 2334 are printed in today's RECORD under "Statements on Introduced Bills and Joint Resolutions.")

CHILDREN'S HEALTH INSURANCE PROGRAM

Mr. HATCH. Mr. President, earlier this week, the Senate voted to pass a continuing resolution to reopen the government. This came after weeks of acrimony and no shortage of hostility here on the Senate floor and elsewhere. While most of the recent debate has been focused on the future of immigration policy, another vitally important priority—and a bipartisan priority, no less—was also addressed this week.

I am talking, of course, about the 6-year extension of the Children's Health Insurance Program, which was included in the funding bill. It is a shame, really, that this bipartisan accomplishment has, in some respects, been overlooked while more attention has been given to partisan squabbling over other divisive issues.

Since its inception, CHIP has been a bipartisan program. In 1997, Senator KENNEDY and I came together to create CHIP in order to provide health insurance to vulnerable children. It was a Republican-controlled Congress working with a Democratic President that brought this program into existence.

The year before, that same Republican Congress and Democratic President worked together to produce another landmark welfare reform bill that sought to replace a culture of dependency with an emphasis on work. S-CHIP became a necessity for those families making the transition.

Prior to the introduction of the original CHIP bill, I came across a number of families with parents who worked

but still could not afford private coverage for their children. Yet they made too much to qualify for Medicaid. Senator KENNEDY and I designed our bill to fill this gap and meet those needs.

Today, the CHIP program provides health insurance for about 9 million needy children every year. While the program isn't perfectly designed—though few programs are—it is widely considered to be one of the most efficient and cost-effective healthcare programs. For that reason, Members from both parties have been supportive of the program since the day it was signed into law.

Last year, with an extension deadline approaching, Senator WYDEN, the ranking member of the Finance Committee, and I went to work on drafting another bipartisan CHIP bill, one that would make needed improvements to the program and extend it for an additional 5 years. We were successful. We introduced our bill in September and, shortly thereafter, the Finance Committee marked it up and reported it by voice vote.

We have been working to pass our bill since last September, and, thankfully, that time came earlier this week. When we voted to pass the CR, we also voted to successfully extend CHIP for 6 years. That is the longest CHIP extension in the history of this program.

Other than that extra year of funding, the bill we passed was identical to the one Senator WYDEN and I introduced last year. I know we have colleagues already talking about adding additional years, and I know a number of stakeholders would like to see that as well. I am definitely open to having a conversation with my colleagues on how we might move forward to support an additional 4 years of funding for CHIP.

In my view, if we can work together to pass a bill adding 4 years to the 6 already in place, that would be simply fantastic, but for this moment, let us not overlook the success we have achieved this week. A 6-year CHIP extension gives security and certainty to millions of American families and allows States to plan their budgets for several years into the future. That is a big deal. Let us keep that in mind as we look for ways to do more.

I would like to thank Senator WYDEN, my partner on the Finance Committee, for his efforts in developing this legislation. I would like to thank other members of the Senate Finance Committee who supported us all the way. Thank you to our distinguished majority leader and his team, as well as the leaders in the House who worked alongside us. I also thank the stakeholders across the country—the Governors, care providers, and of course the families who depend on CHIP for making their voices heard throughout this endeavor. I look forward to working with all of you going forward so we can make sure we do right by the children who benefit from CHIP.

Now, Mr. President, I would like to turn to a related issue in the healthcare space. The Senate will soon vote on President Trump's nominee for Secretary of Health and Human Services. I can think of very few others—and I have only been here 42 years—but I can think of very few others as qualified to take the helm of this very large ship than Mr. Alex Azar.

As Secretary of Health and Human Services, Mr. Azar would be responsible for trillions of dollars in spending, liabilities, and contracts that make up the backbone of our healthcare system.

What is more, Health and Human Services is still in the process of off-ramping many of the poor decisions made throughout the 8 years of the Obama administration. Unfortunately, many of those policies, regulations, procedures, and practices remain in place, continuing to undermine the sustainability of programs like Medicare and Medicaid, and artificially propping up the so-called Affordable Care Act.

The good news is, Mr. Azar brings with him nearly two decades of experience in the healthcare system, working in both the private and public sectors. Mr. Azar spent several years as a senior official at Health and Human Services, holding key positions overseeing Medicare Part D and Medicare Advantage. He also led Health and Human Service's responses to the anthrax victims shortly after 9/11, the SARS and monkeypox crises, Hurricane Katrina, and many others.

Clearly, Mr. Azar has seen both the good and the bad at Health and Human Services and knows how to manage them. I don't think there is anyone here, even on the other side of the aisle, who would contest that. In fact, in the past, Mr. Azar has actually been confirmed twice. With experience both on the company side and the government side of healthcare, he is now only more experienced and knowledgeable.

I think the broad exercise will serve him well, particularly at this critical time when the Health and Human Services Secretary will need to be intensely focused on the opioid epidemic and other major problems facing our country. No doubt all of these are reasons why we reported Mr. Azar out of the Finance Committee with a bipartisan vote. If we set aside the partisan and the preconceived notions some have about certain industries, Mr. Azar would likely get a near-unanimous vote.

I hope at least some of our Democratic colleagues will vote to confirm him. I urge all of my colleagues to join me in doing so.

I yield the floor.

Ms. CANTWELL. Mr. President, today the Senate will vote on the nomination of Alex Azar, President Trump's nominee for Secretary of Health and Human Services. I join many of my colleagues in expressing concerns about this nominee.

First, I believe Mr. Azar will accelerate the Trump administration and