Iranians rightfully have said: Enough already; we are not going to take it anymore.

As Secretary Mnuchin said last week, here in the United States we shouldn't "hesitate to call out the [Iranian] regime's economic mismanagement, and diversion of significant resources to fund threatening missile systems at the expense of its citizenry." The Secretary is exactly right.

Meanwhile, the situation in North Korea remains precarious. That country—and I say this unequivocally—must denuclearize. That is why I recently introduced a resolution with many of my colleagues here in the Senate.

The purpose of the resolution is to expressly declare that Congress is unified in its condemnation of the increasingly hostile and intransigent behavior of the Democratic People's Republic of Korea.

Since Kim Jong Un took power 6 years ago, he has ordered at least four nuclear tests, including the September detonation of what his regime—and outside experts generally agree—said was a hydrogen bomb.

Despite great efforts made by the United States, including a recent Executive order by the President, North Korea's history as a bad-faith negotiator continues unabated on the world stage. It obstinately violates diplomatic norms and human rights at will and was recently redesignated, itself, as a state sponsor of terrorism.

The resolution I referred to a moment ago asserts that the United States, as well as the United Nations Security Council and our regional allies, should continue to implement the absolute strictest of sanction regimes in an effort to get the regime's attention and hopefully bring them to the table as part of this path forward toward denuclearization. We must continue to exhaust every reasonable diplomatic option necessary to achieve the complete, verifiable, and irreversible dismantlement of North Korea's nuclear weapons and ballistic missile programs.

Our resolution also recognizes that the President has the constitutional responsibility to protect the United States and our allies, but it emphasizes that congressional authorization is necessary prior to committing U.S. forces to a sustained military operation on the Korean Peninsula. In other words, under the Constitution, the President has his responsibilities and duties, and Congress has its responsibilities and duties, and this resolution recognizes both. We look forward to working together closely with the President in a unified front this vear to confront North Korea, as well as rogue actors elsewhere.

President Trump, we know, does not take our national security threats lightly. He has a world-class national security team, with General Mattis, Secretary Tillerson, and Director Pompeo, just to name three. In an im-

portant speech last month, the President outlined the four pillars of his administration's national security strategy.

He said the first pillar is to protect our homeland. We can't secure our Nation if we can't secure our own borders, and we can't secure our borders unless we confront, both at home and abroad, the threat of terrorism and ideologies bent on doing us great harm.

Second, the President said that we need to promote American prosperity because the only way we are going to be strong militarily and at the homeland is if we have the resources and economy to pay for it. Economic growth at home is critical for our influence around the globe as well. We, of course, took a big step in this direction by passing tax reform last month, but a lot more needs to be done to continue to grow our economy and to return America to its historic prosperity—like updating and not scrapping the North American Free Trade Agreement and other trade agreements, for example, and rebuilding our national infrastructure, which was also on the agenda at Camp David this weekend.

The President's third pillar of the national security strategy is to preserve peace through strength. We usually attribute that concept to Ronald Reagan, but of course he is not the first or the last to recognize the joinder of peace and strength. President Trump said in his speech that "weakness is the surest path to conflict, and unrivaled power is the most certain means of defense."

I think he is exactly right—which means we have to end the defense sequester that started with the Budget Control Act of 2011. I supported our efforts to rein in discretionary spending, but the fact is, only about 30 percent of the money that the Federal Government spends is actually appropriated. and a little more than half of that is defense spending. I simply cannot in good conscience agree to continue those budget caps for defense spending without considering the increase in risks to our men and women in uniform and our country's national security generally. We have to continue to modernize our military, which we started last year by reauthorizing the Defense Authorization Act.

Fourth, the President's strategy asserts that we have to advance American influence in the world through strong alliances and by championing our core values without apology. As the President said:

A nation that does not protect prosperity at home cannot protect its interests abroad. A nation that is not prepared to win a war is a nation not capable of preventing a war. A nation that is not proud of its history cannot be confident in its future. And a nation that is not certain of its values cannot summon the will to defend them.

I couldn't have said it any better myself.

I yield the floor.

The PRESIDING OFFICER. The Senator from Michigan.

CHIP AND COMMUNITY HEALTH CENTERS

Ms. STABENOW. Mr. President, today marks a sad and, frankly, shocking day for too many of America's children and hard-working families because it has now been 100 days since funding for the Children's Health Insurance Program and community health centers expired.

History has shown us that there is a whole lot that can get done in 100 days. It took Thomas Jefferson only 17 days to write the Declaration of Independence; the brave allied forces who landed on D-day advanced through France and liberated Paris in only 80 days; and Congress managed to pass 15 major pieces of legislation during President Franklin Delano Roosevelt's first 100 days in office. Yet, here we are, 100 days past the deadline of September 30, and Congress still hasn't managed to pass long-term legislation to reauthorize what we call CHIP—the Children's Health Insurance Program—and to fund our community health centers.

We have a strong bipartisan bill funding CHIP, which was passed out of committee. I give our chairman and ranking member kudos for working together. I was proud to work with them. It came out of committee with only one "no" vote and has waited and waited and waited on the floor of the Senate. Senator BLUNT and I have a bipartisan bill to continue funding community health centers, and 70 Members of the Senate have signed a letter supporting long-term funding for community health centers, which expired September 30—100 days ago.

Right now, we are in a situation where 9 million children and their parents don't know what is going to happen long term. As soon as this month, 100,000 children and their families in Michigan have begun to get letters saying that their children will lose coverage, and they are trying to figure out what is going on.

Imagine being a parent who is working hard. A lot of folks I know are working two jobs, trying to hold it together. You don't have health insurance; you earn too much for your children to be able to get Medicaid health insurance, so the Children's Health Insurance Program is your lifeline. It is your lifeline. It gives you peace of mind to know that if your daughter falls and breaks her arm or your son gets a cough that won't go away, you can take them to the doctor.

What if those children have something worse than a broken arm or a cough? What if they are diagnosed with type 1 diabetes or asthma or cancer? Just imagine being that parent and getting a letter which says that your child may no longer have health insurance. It is not necessary. This is not necessary.

We could do this tomorrow. If we thought it was important enough to bring it to the floor, we could get a vote—and I believe it would be overwhelmingly bipartisan—tomorrow if

there were a sense of urgency, an understanding, about how these parents feel and how these children feel.

So what would you do if you got that letter? Would you tell your kids? You don't want them to worry about it. What would you do? I believe hardworking families—and we are talking about working families, people with jobs, working—deserve better.

Then we have community health centers that serve 25 million people across the country, including 300,000 veterans and 7.5 million children. Our health centers are doing a phenomenal job. At more than 260 sites across Michigan, our health centers are serving 681,000 people, including about 13,000 Michigan veterans.

This month, health centers that were supposed to receive a new 12-month grant are only getting a small amount of funding to get them through the next few weeks, not knowing what is going to happen again. By June, Michigan's community health centers will lose over \$80 million in funding, and over 99,000 patients will lose care.

Last month, I had the opportunity to visit two of our great Michigan community health centers, each of their networks operating more than one site—Hamilton Community Health Network in Flint and Western Wayne Family Health Centers in Inkster. Like clinics across Michigan, these centers are serving literally thousands of Michigan families every day—people of Michigan who don't have medical care for one reason or another. Now those thousands of people are at risk of having no place to go if they get sick or if they need preventative care so that they don't get sick.

Hamilton Community Health Network will run out of funding in April, and Western Wayne Family Health Centers will not get their full funding this month. They were asking me: Should they lay people off? How should they be planning for their centers? What should they be doing?

That means 15,500 people are wondering what will happen to them if they or their children get sick or slip on the ice—which there is a lot of in Michigan—and sprain an ankle.

Felicia knows what it is like to live under that cloud of fear. She wrote me a letter indicating that in 2011 she was an AmeriCorps volunteer serving in Lansing and didn't have health insurance. When she started feeling tired all the time and losing weight, she went to the Center for Family Health in Jackson, MI, another great center. The Center for Family Health, which served 29,000 patients in 2016, will run out of funding in March if we don't act.

Felicia was diagnosed with stage 4 Hodgkin's lymphoma—pretty scary stuff. The Center for Family Health helped her get her health coverage through Medicaid and care from the University of Michigan, including chemotherapy and later a stem cell transplant.

Felicia wrote me:

Now I am feeling awesome, I am cancerfree, and I am working part time while I am finishing up college. I feel that I owe my life to the Center for Family Health.

Felicia knows the importance of community health centers; one in Michigan saved her life. People like Felicia and children who are covered by the Children's Health Insurance Program, which we call MIChild in Michigan, shouldn't have to wait a day longer. They are counting on us to get this done. It has been 100 days of uncertainty that did not have to happen.

Let me say that again. We have a bipartisan bill reported out of the Finance Committee. The House has reported their version. There is no reason we can't immediately put a 5-year extension on the floor of the Senate.

Senator BLUNT and I and our cosponsors of our bill have always assumed that once CHIP came to the floor, we would be adding in community health centers, for which there is strong support, and we would be able to get this done. People would know that their neighborhood health center is there. Their children can go to the doctor instead of sitting for hours in the emergency room. They would be able to see their doctor if they got sick. It has been 100 days since funding has expired for community health centers and children's health insurance. That is 100 days too many.

I have been coming to the floor every week to say: Let's do it today. Let's do it tomorrow. We don't have to wait and hold them as bargaining chips in some bigger appropriations negotiation. These are families. These are kids. These are people who want to have confidence in us that we will do our jobs. This one can get done. It could have gotten done before the holidays. What a great Christmas present that would have been. It can get done now.

On behalf of the 25 million people who use those community health centers, the 9 million children and their parents who use the Children's Health Insurance Program, I call on all of us to have the sense of urgency and the leadership—the leader—to bring this up. We can get it done in a day. We would all feel good about it because it would be something we would be doing together instead of having these families wait and wait.

Mr. President, before yielding, I want to acknowledge our newest Senator, Mr. Jones, who is here, and thank him. Even as he was in his happiness, and rightly so, on the evening he found out he was going to be the next Senator, he mentioned CHIP. In listening to that acceptance speech, it did my heart good to know that children's health insurance was at the top of our newest Senator's mind at that important time, and it is a pleasure to see him on the floor this evening.

I believe the Senator from Arizona is here.

The PRESIDING OFFICER. The Senator from Arizona.

DACA

Mr. FLAKE. Mr. President, over the past couple of months, we have seen a lot of effort with regard to immigration reform and in particular to address the situation of the so-called DACA kids, the Dreamers who were brought here through no fault of their own and are now protected—many of them—through the DACA Program. But those protections will run out on March 5. In fact, some have lost their protections already. So there is a great impetus and urgency to deal with this program.

I have said from the beginning that in order to establish a long-term resolution and to provide regulatory certainty, a true DACA fix must be a bipartisan solution. Over the past year, the two big items this Chamber and the Congress have dealt with—healthcare reform and tax policy—have been done under rules of reconciliation, meaning that if we could get a bare majority of Republican votes, that would be enough, if we could keep all the Republicans together. That is no longer the case with our approach to DACA. We are not under rules of reconciliation. It will require 60 votes, meaning that only a bipartisan solution will do. That is why I have been working on such a measure with my Republican and Democratic colleagues in Congress, as well as the White House.

As I have said repeatedly, on this issue, I believe that the President's instincts are better than some of the advice that he gets. I truly believe that he does want a solution for these young immigrants. I hope we can get there. We will have a meeting tomorrow at the White House—a bipartisan meeting—to try to get a little farther down the road.

Let me stress that a lot of words that are highly charged are thrown around this immigration debate. No word is perhaps more highly charged than the word "amnesty." That has been thrown around by a number of my colleagues. I would suggest that is not the case here with the DACA kids. Amnesty, by definition, is an unconditional pardon for a breach of law. I don't think a child who was brought across the border by the parents has committed a violation of the law-not the child; certainly the parents but not the child. To provide relief for those kids and to allow them to stay in the only country they know I don't think should be called amnesty. Yet that highly charged word is often used. To suggest that anyone pursuing a bipartisan solution is proposing amnesty I think is misleading, and it sets back the cause of trying to fix the situation.

A proposal that we are drafting—this bipartisan group—offers a pathway to citizenship for only a specific group of young immigrants—as I mentioned, those who were brought here through no fault of their own. These are immigrants who are serving in the military, who are seeking education, who are holding good jobs. They will be required to continue to do so before they