

The PRESIDING OFFICER. On this vote, the yeas are 52, and the nays are 47.

The motion is agreed to.

#### EXECUTIVE CALENDAR

The PRESIDING OFFICER. The clerk will report the nomination.

The senior assistant legislative clerk read the nomination of Andrew Lynn Brasher, of Alabama, to be United States District Judge for the Middle District of Alabama.

The PRESIDING OFFICER. The Senator from Texas.

#### RAPE KIT BACKLOG

Mr. CORNYN. Mr. President, from time to time, our country has listened with empathy and heartbreak as survivors of various forms of sexual abuse come forward, men and women alike, who have bravely shared their stories, reviving a national conversation about sexual violence and inviting others to share their stories after years or even decades of silence. We know that these cases aren't limited to any class, place, age, gender, or circumstance. We have heard from major public figures and close friends alike, highlighting an issue that has for too long hidden in the shadows.

Some of the most disturbing allegations are those that take place against our children in school. Last month, Senator HASSAN and I introduced the Jenna Quinn Law, which would help educators and caregivers identify and prevent child sexual abuse. It literally teaches people how to recognize the symptoms, what children are saying, when they are not vocalizing their plight, by the way they act. It would allow the use of grant funds for specialized training to ensure that teachers and school personnel are prepared to recognize and report child sexual abuse.

This legislation is named after a brave Texan, a child abuse survivor herself, and has been modeled after successful State legislation. It is an important step in our efforts to stop sexual abuse, and I hope we can take these reforms, which have been adopted now by more than half the States, and make them nationwide.

Of course, protecting students from sexual abuse doesn't end after high school, as we know. In recent years, our country has followed high-profile cases involving students even at our colleges and universities. We all remember 2011, when the now notorious Penn State football coach, Jerry Sandusky, was arrested and charged with 52 counts of sexual abuse of boys. What happened next was a combination of support for the survivors and disgust with those who knew about the allegations but did nothing. Employees, ranging from a graduate assistant to the university president himself, were aware of the allegations but remained silent.

Then there is Larry Nassar, an employee at Michigan State University

and a former USA Gymnastics national team doctor. He was accused of molesting hundreds of young athletes under his care, and more than 250 women shared their testimony at his sentencing last year. Despite numerous complaints about Nassar's behavior, some dating back to the 1990s, university officials kept quiet. Law enforcement was never informed, and his disgusting abuse was allowed to continue unreported for years.

Sadly, these are not the only instances of university officials turning to avert their gaze from sexual misconduct. It has happened at other major universities across the country, including one in Texas. In each of these cases, university leaders did not take action against the abusers despite the fact that official title IX or external investigations had been conducted. Some of them said: "We just simply didn't read the results of the report."

These stories of abuse are difficult to hear, but they have led to positive changes by highlighting the ineffective and sometimes nonexistent policies to handle these types of abuse.

That is why last month, along with my colleagues from Michigan, Senator PETERS and STABENOW, I introduced the Accountability of Leaders in Education to Report Title IX Investigations Act, or ALERT Act for short. The purpose of this legislation is to ensure greater accountability by requiring colleges and universities to submit an annual certification to the Secretary of Education, to include the following:

First, it would affirm that the university president and the board members have reviewed all title IX and Clery Act sexual offense reports of an employee involving sexual misconduct. This would compel administrators to take this matter more seriously and thoroughly examine all the allegations.

Secondly, it would require that the university certify that the president or board members had not interfered with or inappropriately tried to influence an ongoing investigation.

In any educational institution, especially those that receive taxpayer funds, administrators should be held accountable for their actions and place the health and well-being of their students above all else.

The public conversation regarding these abuses has encouraged more victims to confront their abusers and pursue justice.

Throughout my career, dating back to my time as Texas attorney general, it has been my privilege to work with advocates for victims' rights and to help provide them with the resources they need in order to heal and recover. But what if we could do more to prevent people from becoming victims in the first place? What if we could improve accountability on college campuses related to reports of sexual assault perpetrated by their employees? Well, it seems to me the answer is obvious. While there is nothing we can do to turn back the hands of time and pre-

vent these young men and women from being taken advantage of in the first place, we can take action to hold universities accountable for employee sexual misconduct that they already know about and stop abusers from continuing to harm students.

I hope this bill can work its way quickly through the regular order through Congress, the House and the Senate, and make its way to the President's desk so we can begin to improve accountability on college campuses all across our country.

While we continue our work to prevent sexual abuse in all its forms, there is more we need to do to support victims. Tomorrow, the Senate Judiciary Committee will vote on what I have no doubt will be a major bipartisan achievement for the 116th Congress.

We see many pieces of legislation that divide Members of the Senate, and sadly those are often the ones that get the most attention. But the Debbie Smith Act is the type of bill we should be talking about and celebrating. The namesake of this legislation is an incredibly courageous woman whom I have had the pleasure of working with over the years.

Debbie Smith is an ardent advocate for eliminating the rape kit backlog and expanding the DNA database to provide victims with answers and peace of mind. Sadly, her personal advocacy was borne from experience. In 1989, Debbie was home doing laundry when a stranger broke into her house. He blindfolded her, abducted her, and took her to a wooded area behind her home, where he robbed and repeatedly raped her. Debbie reported the crime to the police and went to the emergency room for a forensic exam, but because of the nationwide backlog, there were no immediate answers. Her rape kit was not even tested right away, as it should have been.

Although exact numbers are difficult to estimate, experts believe that as many as 400,000 rape kits remain untested in the United States. We really don't know with any precision. Each one of them represents a story of a sexual assault victim and holds the key to identifying and apprehending a vile criminal. Like every other victim whose DNA evidence sat or still sits on a shelf, Debbie simply had to wait. In her case, it took 6½ years before she finally got the answers she had been looking for when a cold hit revealed the identity of her rapist.

Debbie knows the fear and uncertainty that comes upon victims just by not knowing the answers to who did it and how we make sure justice is served. She made it her mission to eliminate the backlog. She has become a trusted voice for sexual assault victims all across this country and, of course, works the Halls of Congress on a bipartisan basis to make sure we don't lose sight of this important goal, which is to eliminate the rape kit backlog.

The Debbie Smith Act was signed into law in 2004 and provides local and

State crime labs with resources they need to end the backlog of unsolved crimes. So far, more than \$1 billion has been provided to forensic labs because of this law and has led to some pretty incredible results.

One reason it is important that the Federal Government assumes part of this responsibility is because many jurisdictions—small police departments, rural counties—simply don't have the tax base, don't have the money, and don't have the expertise to be able to solve this problem of untested rape kits. Since 2005, thanks to Debbie Smith, more than 860,000 DNA cases have been processed because of the Debbie Smith Act, accounting for 43 percent of all forensic profiles in the FBI's DNA database.

Though the primary goal is to reduce the rape kit backlog and identify their assailants, processing this DNA evidence can assist investigations for non-violent crimes as well. Similar to criminal fingerprint databases, this DNA evidence can help convict people who commit other crimes.

The Debbie Smith Act of 2019 will re-authorize this important funding that supports testing of these rape kits so we can eliminate the backlog and ensure it will not grow again in the future. This law also authorizes important training for law enforcement, correctional personnel, forensic nurses, and other professionals who assist victims of sexual assault.

So I am grateful to Debbie for her courage and the courage of countless other survivors who have shared their stories publicly—it can't be easy—and who continue to advocate for reforms to eliminate the backlog. Two other inspiring survivors from Texas, Lavinia Masters and Carol Bart, have also been strong advocates in my State and at the Federal level. It has been my privilege to know them and work with them on this issue.

This legislation is undoubtedly stronger because of the input of these and other brave survivors who are champions for victims all across the country. I admire these women who have given their voice to the voiceless and continue to fight for these reforms.

I thank Chairman GRAHAM and Ranking Member FEINSTEIN of the Senate Judiciary Committee for quickly moving this important legislation through the committee, and I hope we will soon be able to vote for it on the Senate floor.

I yield the floor.

I suggest the absence of a quorum.

The PRESIDENT pro tempore. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

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

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

#### MEDICARE

Mr. BARRASSO. Mr. President, during the last week I was home in Wyo-

ming, traveling the State, visiting with people, talking to constituents, listening to what they had to say. I had the chance to attend a couple of health fairs in Rawlins, WY, and Mountain View, WY. The health fair is a gathering of the community. It is based on prevention and early detection of problems as ways to help lower the cost of care. For many years, I was the medical director of the Wyoming Health Fairs bringing low-cost health screening to people of Wyoming. At the fair, people come out. There are booths from the heart association, diabetes association, the American Cancer Society. People learn information about diseases, how they work, and how they affect their bodies. It can aid in early detection of problems. People can get their blood drawn and visit with healthcare providers from the community to go over blood results. All of this is aimed at prevention, early detection, and early treatment.

It is interesting that during the same time Democrats running for President have been traveling the country talking about healthcare as well, and specifically Senator BERNIE SANDERS has talked about “BernieCare”—Medicare for All.

To me, Medicare for All is going to drive up costs for Americans in terms of taxes, and it is also going to take away the kind of choice people look for when I talk with them at Wyoming health fairs.

I come to you today to talk on the floor about the real problems I see with this so-called Medicare for All, and I come to it as a doctor who has practiced medicine in Wyoming for 25 years, taking care of patients for decades. When I go to health fairs, more people refer to me as Dr. BARRASSO rather than Senator BARRASSO.

I also want to talk as the husband of a breast cancer survivor. My wife, Bobbi, has had three operations, chemotherapy twice, and is now disease-free for 15 years, but I know how critically important it is as a doctor as well as a husband to make sure that people with preexisting conditions are protected.

I also speak as the son of a 96-year-old mother, and she is a motivating force in our lives. She is a constant reminder to me that we must do everything we can to care for our seniors. So as I have been listening to the Presidential candidates talk about this Medicare for All proposal, whether it is Senators HARRIS, WARREN, GILLIBRAND, or BOOKER, all of them back what Senator SANDERS has been proposing. I am just not sure most Americans understand what Medicare for All means and what it would mean for them personally. Maybe some of the Presidential candidates don't even want people to know what it means.

Senator SANDERS has claimed that Medicare for All is, as he said, “a struggle for the soul of who we are as a nation.” Let's be clear. Americans are facing a critical choice. It is a choice between a big, government-run

healthcare system and a system that gives Americans access to quality, affordable care that they can choose that is right for them and their families. That, to me, is the choice we are facing.

Medicare for All essentially means a complete government takeover of all healthcare in this country. Central planners in Washington, DC, would then be in control of the healthcare for all of us.

Medicare for All would enroll every American in a government-run healthcare system. It will take away America's healthcare choices. Senator HARRIS talks about, perhaps, a supplemental plan, but the legislation I have read that has been introduced is crystal clear—Medicare for All outlaws private health insurance plans. The only exception, Senator SANDERS says, is some limited insurance for cosmetic surgery—he says procedures like nose jobs.

With about 180 million Americans getting insurance through work, currently covered through their employers, people who get insurance through work like the insurance they have. All of them will lose their coverage under what is proposed under the Medicare for All legislation. All of them will be forced onto this new government program—every one of them. Never mind that 71 percent of Americans covered through their employer actually say they like their current plan. A single-payer Medicare for All proposal says, basically, if you like your current healthcare plan, you cannot keep it. The government will take it away and make it illegal.

Seniors are going to suffer, too, and, actually, I think seniors may end up suffering the most. I am talking about people who are already on Medicare because this legislation threatens the 60 million Americans who currently get their healthcare as part of Medicare. They get their healthcare today through Medicare. Medicare is already expected to run out of money by 2026. It was confirmed by last month's trustee report, but the Democrats' proposal will even outlaw Medicare Advantage, a program that 22 million Americans currently use for their healthcare. It is called Medicare Advantage because there are advantages to being on this program in terms of preventive care and coordinated care. There is a reason people sign up for Medicare Advantage. All 22 million would lose that as well under the Democrats' Medicare for All plan.

Healthcare programs benefiting military families and children will also be eliminated. Democrats plan to abolish servicemembers' TRICARE and the Children's Health Insurance Plan. All of that goes away under what the Democrats' radical proposal is talking about.

Perhaps the greatest deception of Medicare for All is the suggestion that government-run care would be free. Let me say to the American people: Do not