

families if Washington mostly stays out of the way.

We needed the Federal Government to stop creating so many economic headwinds and start creating a few tailwinds. So we achieved historic tax reform, major regulatory reform, and all kinds of economic policies geared toward helping workers and middle-class families earn more and then send less to the IRS.

The way Republicans see it, these ideas are actually no-brainers. So as long as you believe in the promise and potential of American workers and small businesses, this is clearly the way to go, and the results continue to speak for themselves.

RESERVATION OF LEADER TIME

The PRESIDING OFFICER. Under the previous order, the leadership time is reserved.

CONCLUSION OF MORNING BUSINESS

The PRESIDING OFFICER. Morning business is closed.

EXECUTIVE SESSION

EXECUTIVE CALENDAR

The PRESIDING OFFICER. Under the previous order, the Senate will proceed to executive session and resume consideration of the following nomination, which the clerk will report.

The senior assistant legislative clerk read the nomination of Daniel Aaron Bress, of California, to be United States Circuit Judge for the Ninth Circuit.

The PRESIDING OFFICER. The Senator from Illinois.

MAJOR LEAGUE BASEBALL PARK SAFETY

Mr. DURBIN. Madam President, if you are a baseball fan, and many of us are, this is a big day—the day of the All-Star game.

I would like to spend just a few moments reflecting on an important issue for the fans of baseball across America.

Thirty-five million people every year enjoy one of America's great summer experiences—seeing a game at a Major League Baseball park. Fans join their friends and family to eat hot dogs, nachos, peanuts, and so much more. We sing the national anthem together at the start of the game and “Take Me Out to the Ball Game” at the seventh inning stretch, a tradition started by a man named Harry Caray in a place called Wrigley Field.

Some—the more dedicated fans—keep scorecards of home runs, RBIs, and earned run averages. Sadly, there is another statistic that has been seeing more and more attention lately—injuries to fans.

A Bloomberg report from 2014 estimated 1,750 fans suffer injuries in Major League Baseball parks every

season. Some are hit by balls; others are injured trying to escape being hit by a ball. This is far too many.

On May 29, a 2-year-old girl was hit by a foul ball at Houston's Minute Maid Park. She suffered bleeding, bruises, and brain contusions from the ball's impact. Her skull was fractured. She continues to suffer seizures.

What makes her injuries even more disturbing is that they likely could have been prevented had the safety netting behind homeplate been extended.

Cubs outfielder Albert Almora, who hit the ball, was so devastated by the little girl's injuries that he could barely speak. One will never forget the image of his head bowed, crying, when he saw the damage that was done to this innocent little 2-year-old girl by a foul ball that he hit.

What did he say afterward? “I want to put a net around the whole stadium.”

In the weeks following, we have seen more injuries in the stands. On June 10, a woman was struck by a line drive at Guaranteed Rate Field in Chicago. Two weeks later, a young woman was hit by a foul ball at Dodger Stadium in Los Angeles.

A survey by the polling organization FiveThirtyEight found that 14,000 more foul balls were hit in 2018 than 1998, and there is just no way—no way—for fans to entirely protect themselves. Here come these baseballs at 105 miles an hour off the bat. Even if you are watching it intently, you just can't protect yourself or the people you love who are watching the game with you. Bryant Gumbel made that point on his cable TV show on this very subject.

If fans can't do more, baseball teams can. In 2017, after a child was hit by a line drive at Yankee Stadium in New York, I wrote a letter to Major League Baseball commissioner Rob Manfred. I urged the league to extend safety netting at all Major League Baseball stadiums past the home plate to the far edge of each dugout. To their credit, the league did exactly that.

It is now clear, however, that is not enough. The little girl at Minute Maid Park was 10 feet beyond current netting.

In June, the Chicago White Sox became the first Major League Baseball team to announce it is going to extend netting to the foul poles. Let me tip my hat to Jerry Reinsdorf, the owner of the Chicago White Sox, for leading the way with this safety measure. The Washington Nationals, the Texas Rangers, and the Pittsburgh Pirates are all planning to do the same, and the Los Angeles Dodgers are conducting a study before making a protective strategy permanent.

I commend all these clubs for their leadership and commitment to fan safety, but I think we need more. We need a leaguewide standard.

Last month, my colleague from Illinois, Senator TAMMY DUCKWORTH, and I wrote to Commissioner Manfred calling

on all 30 Major League Baseball teams to extend the protective netting to the right- and left-field corners.

Folks who complain that extending the safety netting to the foul poles will create an obstructed view ignore the obvious—right now, the most expensive seats in baseball are behind the nets, and people don't complain. It is something you get used to, and you can get used to the safety of it as well. We should be reminded that the most expensive and popular seats have been behind netting for decades.

In 2002, a 13-year-old girl named Brittanie Cecil died after being struck in the head by a hockey puck at a National Hockey League game in Columbus, OH. The National Hockey League responded quickly, ordering protective netting behind the goal. Major League Baseball should show equal concern for its fans.

Ensuring the safety of fans at baseball stadiums is a tradition that stretches back to 1879, when the Providence Grays put up a screen behind homeplate to shield fans from the area that was called “the slaughter pen” at that time.

The increasing number of fans hit by balls makes it clear that new safety standards are needed at ballparks.

Today, we will see Major League Baseball's finest players at the All-Star game. Baseball fans deserve the best too. I urge Commissioner Manfred and all baseball teams to extend safety netting at Major League Baseball parks to the foul poles. Let's not wait until next season. Increasing fan safety is a win for everyone.

PRESCRIPTION DRUG COSTS

Madam President, if you ask the American people about issues they truly care about, let them volunteer what they think about, what they worry about, the No. 1 item on the list is the cost of prescription drugs.

We all know the problem. You reach a point where you need a drug or someone in your family needs a drug, and then you face the reality of what it is going to cost. If you are lucky, and you have a good health insurance plan, it covers the cost—no worries—but for many people, that is not the case. They have copays and deductibles or sometimes no real coverage when it comes to the cost of prescription drugs.

Of course, the prices of these drugs are way beyond our control. You go to a drugstore, and you are shocked to learn that what sounded like a great idea in the doctor's office turns out to be a very expensive idea at the cash register. For some people, it is an inconvenience, an annoyance, but for other people, it is a burden they just can't bear. They can't pay the cost. It is just too much.

Some of these drugs are just not minor additions to your life; they may be matters of life and death. In those circumstances, what are you to do?

I am reminded of people I have met across my State of Illinois as I have talked about this issue. One group

stands out because there are many of them—people who are suffering from diabetes.

Of course, they know that using insulin and taking care of themselves is the way to have a good, normal life, but it turns out that the cost of insulin has gone up dramatically.

Did you know that insulin was discovered in Canada almost 100 years ago? The researchers who discovered this drug—this life-saving drug for diabetes—said at the time that they were going to surrender their legal patent rights to sell the drug for \$1, give it away for \$1. Do you know why? They said it was because no one should make a profit on a life-or-death drug. That was almost 100 years ago. But what are we faced with today? We are faced with a dramatic increase in the cost of insulin, a life-or-death drug.

I have sat down with parents and their children and talked about what they go through to have enough insulin so that their diabetic daughter can survive. It is incredible. Mothers in retirement go back to work to take a job to pay for the daughter's insulin.

The cost of insulin has gone up dramatically. In 1999, Humalog—a very common form of insulin made by Eli Lilly—ran about \$39 a vial. What has happened to the cost of that drug in 20 years? It has gone up to \$329, a dramatic increase on a drug that was discovered 100 years ago.

At the same time, Eli Lilly is selling that drug in Canada for \$39—\$329 in the United States. Why? Because the Canadian Government has said to Eli Lilly: That is the most you can charge in our country. We are going to fight for the people who live in Canada to have affordable drugs.

Let me ask an obvious question. Who is going to fight in the United States for affordable drugs for our people, for those sons and daughters with diabetes—and not just for diabetes but so many other conditions for which life-and-death drugs are now being priced way beyond the reach of ordinary Americans? Do you know who is supposed to fight? We are supposed to fight for it. That is why we were sent here—Members of the U.S. Senate and the House of Representatives—to pass legislation to bring these under control.

Now we have legislation coming forward from the Senate HELP Committee on the issue of healthcare, and many of us had hoped that committee would use this opportunity to put in provisions to bring the cost of prescription drugs under control. Unfortunately, with only one exception, the bill is silent on the major issues.

The measures coming out of the Senate Judiciary Committee, where I serve, don't go to the heart of the matter. They really will not make a big difference on the insulin scandal that we are now facing or on the cost of drugs in general.

I had a simple measure that I introduced with Republican Senator CHUCK

GRASSLEY last year. Think about this. Have you ever seen an ad for drugs on television? If your answer is no, it is because you obviously don't own a television. You can't turn it on without seeing a drug ad, right? And if you watch during the day, when many seniors are watching, it is one after the other after the other.

I have said with amusement here we have even reached the point at which we can not only pronounce but spell the word XARELTO. We see those ads so often for XARELTO and HUMIRA and so many other things that they just bombard us. Why? They bombard us with these ads in the hope that consumers watching those TV ads will go to the doctor and say: Doctor, I need XARELTO.

Well, XARELTO is a blood thinner. There are other alternatives that are much cheaper. But if you ask for that high-priced prescription drug and the doctor doesn't want to get in a debate with you and puts it on the prescription pad, guess what you have just done. You may have the right drug for you at the moment—maybe—but you may have just added to the cost of healthcare by putting the most expensive drug out as an option when another form would work just as well.

In all of the things they tell you about these ads, some of the things I think are the most amazing and amusing are claims like this: If you are allergic to XARELTO, don't take XARELTO. Excuse me. How will I know I am allergic to it? After I take it, maybe.

Those sorts of things and warnings about suicide and death and everything else come at us, but there is one thing that isn't included in those drug ads—one very basic thing. Excuse me, Eli Lilly; excuse me, Sanofi. How much does this cost? They don't tell you because it is shocking sometimes for them to tell you that some of these drugs cost thousands of dollars, and perhaps getting rid of that little red patch on your elbow of psoriasis will not be worth \$5,000 a month if you know the price.

So Senator GRASSLEY and I put this in the bill last year and passed it in the Senate. How about that? It happens so rarely around here. We passed in the Senate a bill that required the drug companies to disclose the actual list price that they list for the cost of the drug. It passed the Senate, and it got killed in a conference with the House when the pharmaceutical companies came in and said: We don't want to tell anybody what these drugs cost.

Then I got an interesting call from the Trump administration. Notice, I am on the Democratic side of the aisle, so I was surprised. Dr. Azar from Health and Human Services called me and said: We like your bill. The President wants to make your bill the law, so we are going to pass a rule that requires drug companies to disclose the cost of pharmaceutical drugs on their ads. Direct-to-consumer advertising

has to tell the cost of the drug. Well, that is progress—a rule in that direction.

Do you know what happened yesterday? In a Federal court hearing in Washington, the judge struck down that rule. The judge said: Congress, you haven't given this administration or any administration the authority to do that on its own. You have to change the law, giving it the authority, or you have to change the law itself to require the disclosure of drug pricing. Does it sound like a radical idea to people that we would disclose to them how much these drugs cost in the drug advertising itself? It isn't unusual for people to list the cost of items we buy every day. When it comes to lifesaving drugs, shouldn't we have that disclosure as well? Well, I hope we will. I hope this bill that is coming to the floor will consider that as well as several other aspects when it comes to prescription drug pricing.

For example, did you know that the Veterans Administration, on behalf of the men and women who have served our country, actually negotiated with the pharmaceutical companies to have lower prices for the drugs that are used in VA hospitals and clinics? They sit down with these same drug companies and negotiate lower prices for our veterans. Good. Our veterans deserve it. But why won't our Federal Government negotiate for those who are under Medicare? Why can't we use the same drug formulary and pricing for the VA when it comes to Medicare? If we want to give our veterans a break—and we should—why wouldn't we give our seniors a break?

I think we ought to have negotiated pricing in Medicare. I think the drug companies will get along just fine. Incidentally, they are pretty profitable today. If we had that commitment for renegotiating for Medicare, it could make a difference.

I also think we ought to take on this insulin issue head-on—head-on. A story on "60 Minutes" recently was about a heartbroken mother from Minnesota whose son was on her health insurance plan under ObamaCare until he reached the age of 26. Then he was on his own. He was managing a restaurant. He didn't have drug coverage, and he was diabetic. He couldn't afford to pay the thousand dollars that was being charged for his insulin, so he decided to ration the dosage himself. It cost him his life. He, unfortunately, died because he couldn't afford enough insulin at the high prices that are currently being charged.

We can change that. We can come to the side of consumers across America, to families who are trying to keep their kids alive, and many others. We can do that because we work in a place called the U.S. Senate, but in order to do that, we have to act like Senators. We have to say to the pharmaceutical companies: I am sorry, but there comes a point where you have pushed it way too far. There comes a point where we

have to step in on behalf of families and consumers in America and speak up on their behalf. Watch closely to see if that happens.

The gentleman who was on the floor, my colleague from Kentucky, will be the person who will decide that. Senator McCONNELL will decide whether we are going to challenge the pharmaceutical companies this year.

Do you remember how I started? It is the No. 1 issue that American families volunteer to us. So is it important? Yes. Secondly, will it make a difference? You bet—not just in Illinois but I bet in Kentucky as well. Many a family can step forward and talk about how tough it is to pay for these prescription drugs.

Do we have a chance to do it? You bet we do. There is a series of bills coming out of committee in the next couple of weeks. We could bring this to the floor of the Senate. Wouldn't that be amazing if the U.S. Senate, instead of doing a handful of nominations of people you have never heard of, ended up actually passing a bill, making a law that addresses the issue of prescription drug pricing in America? That, to me, is a reason we were sent here.

What I would like to see and hope to see is a bipartisan effort. We Democrats are ready to stand up, but there are certain things we believe in. First, we believe in keeping the Affordable Care Act on the books. People with preexisting conditions shouldn't be discriminated against. Families ought to be able to keep their kids on their health insurance plans until kids reach the age of 26. We are willing to fight for that even though this week there is a lawsuit by the Trump administration to do away with it.

Secondly, we believe we should negotiate prices under Medicare so that seniors get the price breaks that our veterans get today and many others do too.

Third, we need to do something about the overpricing by these drug companies, not just price disclosure on the ads but changing the patent laws to give American consumers a fighting chance. Canada is fighting for Canadians. When is America going to fight for Americans?

When it comes to pharmaceutical prices, this is our chance to do it, and we can get it done in the next 2 weeks. Who will decide that? The majority leader from Kentucky, MITCH McCONNELL. He will decide whether this comes to the floor, whether it is important enough to the people living in Kentucky, Illinois, New York, Mississippi, or wherever. It is his choice. It is in his power to make that decision. I hope the American people will reach out to him to encourage him to do that.

I yield the floor.

RECOGNITION OF THE MINORITY LEADER

The PRESIDING OFFICER. The Democratic leader is recognized.

U.S. WOMEN'S WORLD CUP VICTORY

Mr. SCHUMER. Madam President, yesterday, I sent a letter to U.S. soccer that officially invited the U.S. women's soccer team to come to the Senate to celebrate their outstanding World Cup victory. Happily, I heard last night that Megan Rapinoe, one of the team's cocaptains and stars of the tournament, has accepted our invitation. I greatly look forward to scheduling a time when these inspiring women can come to the Nation's Capital.

What they have accomplished on and off the pitch is a credit to our Nation. Millions of young girls and young boys look up to these players. Millions of women, sports fans or not, admire the light they have shown on the disparities between the men's and women's game—part of a broader fight for equal treatment and fair pay in the workplace for all women.

I believe it would be a fitting tribute to this great women's soccer team to bring legislation to the Senate floor that would make it easier for women to get equal pay in the workplace. The House has already passed a bill to do just that. I call on Leader McCONNELL, again, to bring that bill to the floor of the Senate, particularly in light of the great victory of the women's team and the knowledge that they get paid much less than the men, even though they work just as hard and bring, at least in recent years, even greater glory to the United States.

Wouldn't it be great if we could pass that bill while the women's national team is visiting the Chamber? Wouldn't that send a powerful message of our commitment to rooting out discrimination everywhere?

I urge Leader McCONNELL to consider it. Right now that bill lies in Leader McCONNELL's all-too-full legislative graveyard. Perhaps this great victory might spring it free so that we could do something for women's equality.

JEFFREY EPSTEIN

Madam President, on a much less happy note, this week, billionaire Jeffrey Epstein was indicted in New York on Federal sex trafficking charges. The newly released evidence of Epstein's behavior involving dozens of children is sickening, is appalling, is despicable.

Epstein should have been behind bars years ago, but, unfortunately, the Secretary of Labor, Alex Acosta, cut Epstein a sweetheart deal while Acosta was a U.S. attorney in Florida in 2008. While a Federal prosecutor, Acosta signed a nonprosecution agreement that allowed Epstein and his co-conspirators to remain free and evade justice, despite overwhelming evidence.

Mr. Acosta hid this agreement from Epstein's victims. No one can figure out why Mr. Epstein was able to persuade U.S. Attorney Acosta not to prosecute, other than that Epstein could afford high-powered, high-priced attorneys. As the Miami Herald editorial board wrote this morning, it was not just that Acosta failed to get it right in 2008; the evidence suggests "he didn't care to."

Accordingly, I am asking three things. First, I am calling on Secretary Acosta to resign. It is now impossible for anyone to have confidence in Secretary Acosta's ability to lead the Department of Labor. If he refuses to resign, President Trump should fire him. Instead of prosecuting a predator and serial sex trafficker of children, Acosta chose to let him off easy.

This is not acceptable. We cannot have as one of the leading appointed officials in America someone who has done this—plain and simple.

Second, I am calling on the Department of Justice's Office of Professional Responsibility to make public the results of its review of Acosta's handling of the Epstein case. Senators MURRAY and KAINE have called for these findings, but the Justice Department so far has stonewalled, has refused to make them public. This rebuke cannot be kept in the dark, and there should be hearings.

Third, the President needs to answer for the statements he has made about his relationship with Mr. Epstein. In 2002, he said he had known Epstein for 15 years and that he was a "terrific guy" who enjoyed women "on the younger side." Epstein was also reportedly a regular at the Mar-a-Lago Club for years. The President needs to answer for this, and "I don't recall" is not an acceptable answer in this case, particularly since President Trump appointed Mr. Acosta to such a powerful position.

HEALTHCARE

Madam President, on healthcare, today oral arguments begin in *Texas v. United States*, and the fate of our entire healthcare system hangs in the balance due to this nasty, cruel lawsuit led by President Trump's Department of Justice. If the courts ultimately strike down the law, the healthcare of tens of millions of Americans would be gone—gone. Prescription drug costs, high enough as they are, would go up even further. Protections for preexisting conditions that affect more than 100 million Americans would be eliminated. A mother or father whose child had cancer would have to watch them suffer because the insurance company could cut them off and say: We are not paying for this anymore.

We cannot tolerate that. Yet President Trump and his administration and 19 Republican attorneys general filed a suit that would do just that.

The case reveals the depth of the hypocrisy and cruelty of the Republican position on healthcare. Senate Republicans, come campaign season, express unequivocal support for protections for preexisting conditions, but they have repeatedly blocked our attempts to have the Senate intervene in this lawsuit and fight back against the Trump administration's position, which threatens to eliminate these very same protections.

I say to my Republican friends: You can't have it both ways. You can't say "Oh, I want to protect people with preexisting conditions," and then prevent