

LEGISLATIVE SESSION

MORNING BUSINESS

Mr. MCCONNELL. Madam President, I ask unanimous consent that the Senate proceed to legislative session and be in a period of morning business, with Senators permitted to speak therein for up to 10 minutes each.

The PRESIDING OFFICER. Without objection, it is so ordered.

TRIBUTE TO DAVE ADKISSON

Mr. McDONNELL. Madam President, it is my pleasure today to salute a transformative leader in my home State of Kentucky, Dave Adkisson. At the end of October, Dave will retire as the president and CEO of the Kentucky Chamber of Commerce, ending nearly 15 years of representing our Commonwealth's employers and signature industries. His talent for advocacy and consensus-building have benefited Kentucky, and I would like to thank him for his many achievements for our State.

Dave began his career at his hometown chamber of commerce in Owensboro, KY. His creativity and successful management won him a lot of fans early on, and he was elected the mayor of Owensboro at the age of 34. Championing several development projects and attracting new businesses to the city, Dave was reelected to a second term without opposition.

Leaving public service, Dave accepted an offer to lead the Birmingham, Alabama, Chamber. The career move took Dave's talents out of Kentucky, but he wouldn't be gone for long. He returned home and began his current role leading the statewide chamber. At the helm of our Commonwealth's largest business association, Dave has grown the organization and expanded its reach. Now, it represents more than 3,800 businesses in Kentucky.

As the leader of the Kentucky Chamber, Dave has made a positive and lasting impact on the public policies enacted both in Frankfort and in Washington. His organization helped lead the charge to pass a right-to-work law in Kentucky, giving workers more freedom over their paychecks and drawing new investment into the Bluegrass State. Dave was also a key ally in our drive to pass comprehensive Federal tax reform and cut burdensome regulations. Kentucky's strong economy is a result, in part, of Dave's leadership.

He has also been recognized nationally among his peers for his important work. In 2017, the Kentucky Chamber was named the top chamber in the country, and Dave has lent his expertise to several national business associations. To foster future innovators, Dave cofounded Leadership Kentucky, a highly selective program to equip prominent Kentuckians with the skills to excel. It is just one example in a long list of contributions Dave has made to improve our State's bright future.

As Dave leaves the Kentucky Chamber, I am glad to know he will continue leading various projects around the Commonwealth. I am sure our communities will continue to benefit from his talent and guiding hand. I am also reassured to know that, while Dave is spending some well-deserved time with his wife Bonnie and their family, the Kentucky Chamber will be in the capable hands of its new president, Ashli Watts. A seasoned advocacy veteran, Ashli can build upon the years of success and help the Kentucky Chamber continue to be a strong voice for our state's job creators.

So, Mr. President, I would like to thank Dave for his years of leadership in Kentucky. As an elected official and a public policy advocate he has created a legacy of accomplishment that will be enjoyed for years to come. It is a privilege to pay tribute to my friend today, and I ask my Senate colleagues to join me in honoring Dave Adkisson and wishing him a fulfilling retirement.

NATIONAL HISPANIC HERITAGE MONTH

Mr. CARDIN. Madam President, during National Hispanic Heritage Month, we are called to honor the contributions of a critical community—that of Hispanic Americans. Now accounting for 60 million individuals in the United States, these men and women are an essential pillar of our society. Although this group has grown significantly in recent decades, individuals of Hispanic descent and culture have been with our Nation since its very founding.

Hispanic identity is a complex concept, at least with respect to how many in the United States traditionally understand race and ethnicity. The word "Hispanic" stems from "Hispanic," the Latin name for the ancient Roman colonies on the Iberian Peninsula that also serves as the origin for the modern state of España, or Spain. It was there that the Spanish or Castilian language, culture, and people developed out of the convergence of Phoenicians, Greeks, Romans, Celts, Basques, Visigoths and Arabs, in addition to Christians, Muslims, and Jews.

The story does not end there. Along the hallowed walls of the U.S. Capitol Rotunda are two paintings by John Vanderlyn depicting key historical scenes. In 1492, the Spanish Catholic Monarchs King Ferdinand and Queen Isabella agreed to sponsor the journey of Christopher Columbus in search of a passage to the East Indies. Columbus failed at this goal, but, as the Landing of Columbus illustrates, he did land in the island now named San Salvador in the Bahamas. This voyage prompted the Spanish exploration and colonization of the Americas, including North America, reaching as far as Mississippi in 1541, as depicted by William Henry Powell's Discovery of the Mississippi by De Soto, and even deep into the Pacific Northwest.

Even then, however, we are still missing other key elements of the story. The Spanish were not alone. They encountered vast empires, the Aztecs and the Incas, in addition to hundreds of other peoples, from the Mapuche in Argentina to the Maya in Guatemala. Colonization was a bloody process that uprooted and killed millions of indigenous people. Moreover, the Spanish brought millions of Africans to the Americas as part of the Atlantic slave trade. Men, women, and children had to struggle in cruel and terrible conditions as the property of others. Nevertheless, it is undeniable that the indigenous and African communities have helped make the Hispanic community what it is today, whether it's in culture, art, music, food, language, or even the genetic makeup of the people themselves. Significant portions of the Hispanic community can trace their descent to these two groups—at least in part, if not entirely.

The exploration and colonization that would lead to the creation of the Hispanic world in the Americas would, in turn, set the stage for English to do the same later, beginning with the first permanent settlement in Jamestown, VA, in 1607. Eventually, these English colonies would sever themselves from the British Empire and form the United States of America. But Spanish colonies would continue to influence our Nation throughout our history. Multiple territories, such as Florida, Texas, California, and Puerto Rico, became integral parts of our country. Others, inspired by the principles of the Enlightenment and the examples of the American and French Revolutions, became their own independent countries. They have since been our neighbors in the Western Hemisphere and some of our most critical partners in trade, security, and championing the virtues of democracy.

Congress established National Hispanic Heritage Month from September 15 to October 15 in recognition of the pivotal contributions and legacy of this community that traces its roots to Spain, Mexico, Central America, South America, the Caribbean, and further beyond. Millions, such as the Hispanics of New Mexico and the Tejanos of Texas, are the descendants of settlers who have been on these lands for centuries. Starting in the twentieth century, millions of individuals from across the Hispanic world have come to our Nation as immigrants. Since 2000, the Hispanic population in Maryland has more than doubled, now accounting for half a million people, or nearly 10 percent of all Marylanders. Our State is home to a diverse community of individuals with origins from across the Hispanic world, with sizeable populations of Mexicans, Puerto Ricans, Guatemalans, Salvadorans, and Peruvians.

Yet we must recognize that this community faces distinct challenges. Instability continues to hamper the abilities

of already fragile states in our hemisphere, and dangerous conditions abroad prompt many to leave everything behind to pursue a safer existence. As the Hispanic-American population has grown, racism, hatred, and naked xenophobia have unfortunately grown with it. Given these trying circumstances, we must recognize the obligations that arise from our shared humanity to assist those in need and to welcome and celebrate our differences.

Hispanic Americans have done so much to support and make the United States of America the exceptional nation that it is today. They have made groundbreaking discoveries and innovations in science and technology. They have shown us new ideas, art and music, and cuisine. They have created new products and jobs as entrepreneurs and business owners, and they have led our communities as dutiful elected representatives of the people. They have fought and are fighting today to protect our way of life and to promote our interests and ideals abroad. During National Hispanic Heritage Month, we celebrate this community's countless contributions, but not necessarily as something new. Hispanic Americans have played an important role in the American story since its very beginning.

PARKINSON'S DISEASE

Mr. VAN HOLLEN. Madam President, today I wish to discuss the impact of Parkinson's disease in the U.S. and across the world.

While significant progress has been made in managing certain symptoms and identifying potential risk factors, we still lack a clear understanding of the underlying causes of Parkinson's disease. To that end, I continue to support the strongest funding possible for biomedical research under the National Institutes of Health and its Brain Research through Advancing Innovative Neurotechnologies—BRAIN—Initiative, as well as the Parkinson's Research Program at the Department of Defense. These investments are necessary to sustain efforts by our Nation's scientists at the helm of innovative research and discovery, with the hope and resolve that we will one day find a cure.

I would like to highlight a recent study entitled "The Economic Burden of Parkinson's Disease," which was brought to my attention in a meeting with constituents led by Dan Lewis, a longtime advocate for Parkinson's research. Commissioned by the Michael J. Fox Foundation for Parkinson's Research, this study places the annual economic impact of Parkinson's at \$52 billion in 2017, nearly double the previous estimates. Approximately half of that total reflects the medical costs of Parkinson's patients, primarily paid by Medicare.

The other half reflects the real indirect costs shouldered by patients with Parkinson's, their caregivers, and our

society. The effects of living with Parkinson's disease permeate so many aspects of patients' lives, from personal finances to workforce participation to caregiver time and effort. With a rising aging population, the burden will only grow from here; the number of people with Parkinson's disease is projected to double by 2040.

By shedding light on the human and societal impact of Parkinson's, this study illustrates the critical need for sustained research toward better treatments and a cure. I ask unanimous consent that this study be printed in the CONGRESSIONAL RECORD and encourage all Senators and staff to review it.

Thank you.

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

[From the Lewin Group, July 5, 2019]
ECONOMIC BURDEN AND FUTURE IMPACT OF
PARKINSON'S DISEASE
EXECUTIVE SUMMARY

Parkinson's disease (PD) is a slowly progressive neurodegenerative disorder that affects approximately one million Americans. In addition to the debilitating symptoms of PD itself, patients also experience a number of comorbidities, such as anxiety, depression, increased rates of infection, cardiac and gastrointestinal diseases, and injuries from falls. As a result, individuals with PD have higher medical needs, often miss work, retire early, and require the assistance of a caregiver. As such, the direct and indirect economic burden of PD is likely to be significant.

As part of its initiative to understand the economic burden of PD, the Michael J. Fox Foundation commissioned The Lewin Group to estimate the economic impact of PD in the U.S. in 2017. This study aims to provide the most comprehensive assessment of the total burden of PD to date, including filling the knowledge gap in some of the less well-understood cost components, such as future earnings loss due to premature death, productivity loss in both the labor market as well as in social life, and caregiver burden.

STUDY HIGHLIGHTS

This study provides the most comprehensive assessment of the economic burden of PD in the U.S. in 2017. The estimated total economic burden of PD in 2017 was \$51.9 billion, including a direct medical cost of \$25.4 billion and an additional \$26.5 billion in indirect and non-medical cost. These findings show that the true impact of PD has been previously underestimated in the literature (see the Discussion section).

Another highlight of the study is the Social and Financial Impact of Parkinson's Disease Survey (i.e. the PD Impact Survey). This primary survey was specifically designed and administered for this study to deepen the understanding of the full spectrum of PD impact. The survey was able to collect detailed data on a broad set of indirect and non-medical costs of PD that were previously unavailable, especially the impact of PD on unpaid caregivers. This survey was one of the largest surveys conducted so far on relatively rare neurodegenerative diseases and received almost 5,000 responses from the PD community.

STUDY FINDINGS

PD prevalence estimated using nationally representative surveys for younger and elderly U.S. populations revealed a much higher prevalence than previous literature. Exhibit ES-1 shows the estimated PD prevalence:

An estimated 1.04 million individuals in the U.S. have PD in 2017.

PD is much more prevalent in the 65 population than in the younger population. More males than females have PD.

PD prevalence rate is more than double among non-Hispanic White compared to other groups, although this result is not risk-adjusted and is subjected to small sample size limitations.

Vast majority (89%) of the persons with PD are eligible for Medicare. Among the estimated 919,000 individuals eligible for Medicare coverage, 82,000 (9%) are younger than age 65.

PD is associated with significant amount of excess medical cost: \$25.4 billion in 2017, higher than the previous U.S. based estimates. Exhibit ES-2 shows the estimated direct medical cost of PD.

The vast majority of the medical cost of PD is borne by populations with Medicare coverage (90%), 7% by those with private insurance, and 3% by those with other insurance including Medicaid, other insurance, or no insurance. Note: the five-year combined MEPS data identified a total of 20 PWPs who are in the Other group, the small sample size prevented further breakdown.

On average, the excess medical cost of PD is \$24,439 above not having PD. Average per person excess cost is \$22,671 and \$19,489 for the privately insured and Other group of persons with PD who are younger than 65 years of age, respectively; and \$24,811 for the Medicare beneficiary population with PD.

Hospital inpatient care, non-acute institutional care (including SNF, nursing home, hospice, etc.), and outpatient (including ancillary care) are the three largest cost categories.

The estimated total indirect and non-medical cost of PD is \$26.5 billion in 2017, with near \$20 billion to persons with PD and another \$6.6 billion to unpaid care partners. Exhibit ES-3 shows the estimated indirect and non-medical cost of PD:

Average indirect and non-medical cost per PWP is \$19,242 for PWP only and \$25,558 for PWP combined with caregiver burden.

Total indirect cost is \$14.2 billion with the combined PWP and caregiver absenteeism cost being the largest share, followed by presenteeism cost and premature death related earnings loss. The cost of absenteeism and presenteeism for the care partners even surpass those for the PWPs.

Total non-medical cost is \$7.5 billion with the paid non-medical daily care being the largest share, followed by home modification cost.

Disability income, although considered transfer cost, is approximately \$4.8 billion.

The full report can be found at <https://www.michaeljfox.org>.

ADDITIONAL STATEMENTS

TRIBUTE TO DR. MICHAEL CHERINGTON

• Mr. GARDNER. Madam President, today I wish to honor and celebrate Dr. Michael Cherington of Castle Rock, CO. This fall, Dr. Cherington is reaching the age of 85. He has lived a full life and helped many others to do the same.

Born in Pittsburgh, PA in 1934, Michael, who often went by the nickname "Mickey" showed initial greatness at age 10 when his father arranged for him to play against the American chess champion, Arnold Denker. Arnold defeated all the adult opponents in the room. Mickey's game ended in a draw.