

PROVIDING FOR THE USE OF THE CATAFALQUE SITUATED IN THE EXHIBITION HALL OF THE CAPITOL VISITOR CENTER IN CONNECTION WITH MEMORIAL SERVICES TO BE CONDUCTED IN THE HOUSE WING OF THE CAPITOL FOR THE HONORABLE ELIJAH E. CUMMINGS, LATE A REPRESENTATIVE FROM THE STATE OF MARYLAND

Mr. McCONNELL. Mr. President, I ask unanimous consent that the Senate proceed to the immediate consideration of S. Con. Res. 27.

The PRESIDING OFFICER. The clerk will report the concurrent resolution by title.

The legislative clerk read as follows:

A concurrent resolution (S. Con. Res. 27), providing for the use of the catafalque situated in the Exhibition Hall of the Capitol Visitor Center in connection with memorial services to be conducted in the House wing of the Capitol for the Honorable Elijah E. Cummings, late a Representative from the State of Maryland.

There being no objection, the Senate proceeded to consider the concurrent resolution.

Mr. McCONNELL. Mr. President, I ask unanimous consent that the concurrent resolution be agreed to and the motion to reconsider be considered made and laid upon the table with no intervening action or debate.

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

The concurrent resolution (S. Con. Res. 27) was agreed to.

(The concurrent resolution is printed in today's RECORD under "Submitted Resolutions.")

#### BUSINESS BEFORE THE SENATE AND APPROPRIATIONS

Mr. McCONNELL. Mr. President, this week the Senate has several opportunities to make headway on important matters facing our country.

First, we will tend to a pending treaty protocol on the accession of a new member to NATO and reaffirm the importance of the alliance to the security of U.S. interests around the world. Then, we will consider yet another of the President's well-qualified nominees to the diplomatic corps. But while the Senate can take care of some of these matters on their own, much of the pressing business of the American people requires coordination with our colleagues across the Capitol.

Unfortunately, the only thing that seems to really inspire House Democrats these days is their obsession with overturning the results of the 2016 election.

In the weeks since the Speaker of the House gave in to her far-left Members' demands for an impeachment inquiry, she and other prominent House Democrats have insisted over and over and over that impeachment will not stop them from making real progress on legislation.

They say their 3-year-old impeachment parade doesn't have to block traf-

fic and bring other important priorities to a standstill. That is what they have been saying, but actions speak louder than words. We have yet to see any actual indication that House Democrats intend to make good on that commitment.

For months, we have heard the Speaker claim that she would like to get to yes on the USMCA. We have heard that her caucus is "making progress," but nearly a year after this landmark agreement with Mexico and Canada was announced, the most significant update to the North American trade policy in a generation is still waiting for the House to take action. Billions of new dollars in economic growth and 176,000 new American jobs are still waiting on House Democrats.

And that is not all. So far, even something as completely basic as funding our Armed Forces—funding our men and women in uniform—has met the same fate. Democrats have elected to stall it and block it in order to pick fights with the White House. Notwithstanding our bipartisan, bicameral agreement to wrap up the appropriations process in good faith, Senate Democrats voted a few weeks ago to block funding for the Department of Defense. No critical resources for U.S. servicemembers, no predictable planning process for our commanders, no pay raise for our all-volunteer Armed Forces—none of that was allowed to travel through the Senate because our Democratic colleagues just don't care for the occupant of the White House.

Ironically, many of these same colleagues of ours have spent recent days making loud pronouncements on U.S. foreign policy. By the sound of their comments, it almost sounds as if they are coming around to Republicans' long-held views on the necessity of American leadership all around the world. But, once again, actions speak louder, and thus far our Democratic colleagues have not even been willing to get past partisanship for the sake of job No. 1—funding our military.

So this week we will offer our Democratic colleagues a clear test. Are all the declarations that they are willing to work on important legislation just empty talk or will Senate Democrats finally do their part to move the appropriations process forward?

Soon we will vote on advancing a package of domestic funding legislation. As I said last week, I am grateful to Chairman SHELBY and Senator LEAHY for their continued conversations and hopeful they can produce a substitute amendment that will fund a number of urgent domestic priorities. Then, once we complete that work, we will vote to move forward the funding for our national defense—two big votes, two big votes, two big opportunities for our Democratic friends to show the country whether their party's impeachment obsession leaves them any room at all for the pressing business of the American people.

#### MEASURE PLACED ON THE CALENDAR—S. 2644

Mr. McCONNELL. Mr. President, I understand that there is a bill at the desk due for a second reading.

The PRESIDING OFFICER. The leader is correct.

The clerk will read the title of the bill for the second time.

The legislative clerk read as follows:

A bill (S. 2644) to impose sanctions with respect to Turkey, and for other purposes.

Mr. McCONNELL. In order to place the bill on the calendar under the provisions of rule XIV, I object to further proceedings.

The PRESIDING OFFICER. Objection having been heard, the bill will be placed on the calendar.

Mr. McCONNELL. Mr. President, I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

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

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

#### 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

#### PROTOCOL TO THE NORTH ATLANTIC TREATY OF 1949 ON THE ACCESSION OF THE REPUBLIC OF NORTH MACEDONIA

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

The legislative clerk read as follows:

Calendar No. 5, Treaty document No. 116-1, Protocol to the North Atlantic Treaty of 1949 on the Accession of the Republic of North Macedonia.

Pending:

McConnell amendment No. 946, to change the enactment date.

McConnell amendment No. 947 (to amendment No. 946), of a perfecting nature.

The PRESIDING OFFICER. The Senator from Connecticut.

#### HEALTHCARE

Mr. MURPHY. Mr. President, I want to tell you a quick story about a woman from Atlanta. Her name is Dawn Jones. Dawn bought what is commonly referred to in the insurance industry as a short-term health insurance plan. She brought it from the Golden Rule Insurance Company,

which is a unit of UnitedHealth, and she needed it because she needed some coverage in between jobs. She was then diagnosed with breast cancer, and she went through a heartbreaking experience, trying to get her insurance company to cover her for her \$400,000 medical bill.

In the end, she could not get her short-term health insurance plan to cover her breast cancer treatments, and here is the reason why. The insurer didn't need to cover preexisting conditions. Short-term plans do not need to cover things we traditionally think of as healthcare insurance today. The protections of the Affordable Care Act require that insurance cover you regardless of whether you are diagnosed with a serious disease, but short-term plans don't need to cover you for those things.

This short-term plan didn't cover her breast cancer, despite the fact that she wasn't diagnosed with breast cancer until after she signed up for the plan. So you may ask: Why is that a preexisting condition if she wasn't diagnosed with breast cancer until she was on this short-term plan?

Well, the insurer in this case made a very innovative argument. It said that she actually had the cancer before she signed up for insurance. So even though she didn't know she had cancer and even though she hadn't been diagnosed with cancer, because she technically had cancer before she got the insurance plan, she had a preexisting condition, and, thus, they would not cover her.

This is a pretty typical story about what happens on these short-term insurance plans in this country. They are more commonly referred to these days as junk insurance plans because, for millions of Americans who sign up for short-term insurance, they find out that it really doesn't cover much of anything.

One Golden Rule plan excludes pregnancy and provides a lifetime maximum benefit of \$250,000. That is, by the way, an incredibly low amount of lifetime coverage—\$250,000. One hospital stay for a serious illness can be over \$250,000. And the icing on the cake—this particular junk plan from Golden Rule doesn't cover a hospital room or nursing services for patients admitted on a Friday or Saturday. So good luck if you get sick on a Friday or Saturday because you are not going to get coverage on those 2 days of the week. These are junk plans because they don't cover what you need, and you, by and large, don't find out about that until you actually need the insurance.

How about a gentleman from San Antonio who actually had his short-term plan for about 6 years? He had been paying it and paying it for 6 years. Because they are technically short-term plans, he was renewing them over and over and over again, and when he was diagnosed with kidney disease, they wouldn't cover him because they went

back to his medical records and found out that he had some blood work done earlier that had shown the initial signs of kidney disease, but he wasn't diagnosed until later on.

What they said—just as they did for the woman in Atlanta—was this: Because you had signs of kidney disease when you were insured with us a year ago, we are not going to cover you now because, technically, you are on a new plan.

He had been getting a plan every 6 months every year. He didn't have any gaps in insurance, but because he technically was signing up for short-term plan after short-term plan, he didn't get covered for his kidney disease.

Over and over, we hear these stories about individuals who go on these junk plans and then find out that they can't get insured for anything—can't get insured for hospital stays on Fridays and Saturdays, can't get insured for mental health treatment, no prescription drug benefits, no coverage for maternity, and all sorts of backbending activity to try to stop people from getting coverage for illnesses.

Yet these plans are becoming more and more prolific. Why is that? The reason is that the Trump administration is using an innovative method to try to get more Americans to sign up for these junk plans, and that is what I wanted to come to the floor and talk about today.

These junk plans are a nightmare for people who get on them and then find themselves on the outside of coverage. When you sign up for health insurance, you basically think it is going to cover a set of things like hospital stays on weekends and coverage for your cancer diagnosis, but these junk plans don't cover those things.

The administration has decided to use a section of the Affordable Care Act that was designed to strengthen our healthcare system and, instead, use it to weaken the healthcare insurance system by providing for more and more of these junk plans.

Here is a little bit of legislative history. There is a section of the ACA that was set up so that you could apply to the State for a waiver to improve coverage. The waiver says that you can do some innovative things in the ACA so long as you prove that whatever you are going to do is going to provide health coverage that is just as comprehensive as what is required under the ACA, that you are not going to cost consumers any more than what they are paying under the ACA, that the number of people who are insured under the ACA in your State isn't going to go down—it is going to stay stable or go up—and you are not going to increase the Federal deficit.

Well, President Trump, in October of 2018, issued new guidance that essentially guts all of those protections for these waivers. President Trump basically says that these short-term insurance plans can be approved, even if they cost people more, even if they

don't cover things like preexisting conditions, and even if they result in fewer people getting insurance.

This October 2018 guidance allowed for these junk plans to be sold in more States to more consumers. Even worse, the 2018 guidance said that these junk plans could be sold side by side with the Affordable Care Act plans right on the same web page, disguising the fact that some plans would actually cover you for your preexisting conditions and others wouldn't.

So, today, we have more and more of these junk plans available to individuals and more people who are vulnerable to all of the old abuses that used to happen left and right in the healthcare insurance system, largely to people who have pretty serious illnesses.

Now, 130 million Americans have a preexisting condition. In my State, over a half million people have some sort of preexisting condition. If they sign up for one of these junk plans—either because they were marketed the plan under the belief that it would cover them or by mistake because they didn't notice the difference between the ACA-regulated plans and the junk plans on the website that they went to—they are at risk of not getting covered for their preexisting condition.

It gets even worse than that because what economists tell us is that these junk plans, which cover very little, are admittedly going to be attractive to some people who are presently pretty healthy. Young people and people who don't have any preexisting conditions may sign up for those junk plans because it doesn't really matter to them at the time that they don't get coverage for much at all; the junk plans are going to have prices that are lower, in most instances, than the plans that cover basic healthcare services. In the short term, that might be OK for the people who are relatively healthy until, of course, they get sick and find out that their junk plan doesn't cover anything. But for the people who have preexisting conditions, who can't sign up for the junk plans, and who need to be on the plans that are regulated by the Affordable Care Act, their premiums are going to skyrocket.

This is health insurance 101. As more healthy people go to the junk plans, leaving behind on the Affordable Care Act plans folks who have these preexisting conditions, their prices will go up.

The Trump administration's junk plan rule is, frankly, bad news for a lot of people who are on junk plans if and when they actually need healthcare insurance, but it is also really terrible news for the 130 million Americans who have preexisting conditions, who are likely going to see their insurance rates skyrocket.

Next week we are going to have a vote on the floor of the U.S. Senate, a vote on a resolution of disapproval for the administration's junk plan guidance. I have listened for a long time to

Members of the Senate on both sides of the aisle talk about how the one thing we agree on is that we need to protect people with preexisting conditions, and though many of our Republican colleagues might not support the Affordable Care Act, they do agree that we should support people with preexisting conditions, which I generally read to mean that we should make sure we don't pass legislation and we don't let the administration do anything that will make it even harder than it already is to live with a cancer diagnosis or a diagnosis of serious heart disease.

Yet it is completely clear that the Trump administration's guidance is going to make life a lot worse for people with preexisting conditions, for those who go on the junk plans, and for those who stay behind.

Here is a quote from an article in *The Atlantic* magazine, which did a summary of these junk plans and what they are like and, frankly, how important they are to insurance companies. The article says that these short-term junk plans "make up a high-profit portion" of the insurance industry's business.

They are largely designed to rake in premiums, even as they offer little in return. And even when they do pay for things, they often provide confusing or conflicting protocols for making claims. Collectively, short-term plans can leave thousands of people functionally uninsured or underinsured without addressing or lowering real systemwide costs.

That is the story of junk plans. They are a pretty good deal for the insurance industry, which is why they have been pushing the Trump administration to allow more of these junk plans to be sold. They are a good deal for the insurance companies because ultimately they don't require the insurance companies to pay out a lot in benefits, but they ultimately make a ton for the insurance companies in the premiums they collect.

It is time for everybody in this body who has stood up and said that they support individuals with preexisting conditions to vote that way. Next week, we will have an opportunity to stop in its tracks the Trump administration's rule allowing for more of these junk plans to be sold to consumers. Because we know the House of Representatives will join us, we now have the chance to actually do something about it and stop this erosion of healthcare for people with preexisting conditions before it is too late.

I get that the country and this Congress are rightly consumed with the ongoing scandal surrounding the impeachment inquiry and the recent heartbreaking, unconscionable events in Syria, but that doesn't mean folks in our States are as concerned with those headline-grabbing issues as we are. They still have to make their budgets balance every single month, and they are deeply worried—at least those families I talked to in Connecticut who are still struggling with serious illnesses—about our ability to

make sure the protections for preexisting conditions, which were a lifeline for millions of Americans when we passed the Affordable Care Act, are not undermined by this President. We have a chance to step up and do something about it next week.

I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The bill clerk proceeded to call the roll.

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

The PRESIDING OFFICER (Ms. ERNST). Without objection, it is so ordered.

#### RECOGNITION OF THE MINORITY LEADER

The Democratic leader is recognized.

#### APPROPRIATIONS

Mr. SCHUMER. Madam President, before I get into my main remarks on Syria, I just heard the majority leader, Leader MCCONNELL, say that he wants to see if we can do appropriations bills, that he will see if the Democrats want to legislate. Give me a break. Since we have started to legislate, we have been waiting for 6 months, 9 months. It is well-known in the country that the Senate is the legislative graveyard, that Leader MCCONNELL has not put on the floor bill after bill on major issues that affect the country and that demand attention. Most everybody knows that he is proud that he is the Grim Reaper. So now, in his asking if the Democrats want to legislate, it is all up to Leader MCCONNELL.

On the appropriations bills, of course, we want to legislate when it is being done in a fair way. There are some bills that came out of the Appropriations Committee in a bipartisan way. I think there are four of them that the leader is thinking of putting on the floor, and we would like to move forward on those and have a vigorous process as we go forward.

There are certain bills that were not done with any consultation—the taking of money out of things like MILCON and HHS and putting it for a wall that he knows the Democrats will not go for. Those kinds of things we can't legislate until they become bipartisan, until we work together. There are certain bills—HHS, Defense, MILCON, DHS—that we can't move forward on until we have some bipartisan agreement. Yet, on the bills on which there is agreement, we would be happy to move forward. Of course, that doesn't solve the problem.

After that happens, our House colleagues—Speaker PELOSI, Chair LOWEY—have since suggested that there be a 302(b) conference because even the 302(b)s are different than these bills, and that is the right place to go once the Senate passes these less controversial bills.

I hope we can move forward. I hope we can. The first package of bills—four of the five—is not controversial. The fifth, they didn't even bring to the

floor of the Committee on Appropriations—MILCON. Yet, on those four, moving forward would be a fine thing. Hopefully, we could work out an amendment process whereby Members could offer amendments.

So we will finally legislate after 9 months, not just move judges and other appointees, and that is a good thing. I am glad that Leader MCCONNELL has finally, maybe, felt the pressure and wants to legislate.

#### TURKEY AND SYRIA

Madam President, let's go to Syria.

Saturday night, President Trump announced on Twitter that he was reversing his decision to host next year's G7 summit at his golf resort in Doral, FL. The President's original decision was the textbook definition of self-dealing—an outrageous move that provoked immediate and rightful condemnations. Over the weekend, multiple outlets reported that the President decided to back down only after hearing of intense opposition from members of his own party, many of whom told him privately they would not defend him on the issue.

It is obvious to almost everyone in America that you don't suggest a resort that you own as the place to have a conference. It makes no sense. Is the President so interested in making a few extra dollars—reports are that he brags what a multibillionaire he is—that he would risk violating the rules and laws of this country, the emoluments clause? It makes no sense.

It is unfortunate that this wasn't the only decision that made no sense. There is an obvious parallel between the President's decision about the G7 and his decision to precipitously withdraw our forces from Syria. Both were done in a sort of whimsical way whereby, from all reports, the President didn't consult with the experts in this latter case—with the military, the State Department, and the CIA.

Both have resulted in condemnation from across the political spectrum. In fact, last week, over 120 House Republicans voted in favor of the resolution criticizing the President's Syria policy. Leaders MCCARTHY, SCALISE, and CHENEY are hardly moderates, in the middle, who always seek compromise. These are pretty hard-nosed people, and they voted to condemn it, so it must be pretty bad. Of course, it is. Former military commanders and some of the President's staunchest allies in the Senate have echoed those sentiments.

Just like the President reversed course on the G7 after a torrent of criticism from his own party, President Trump must dramatically and drastically rethink his policy in Syria, which is far more dangerous because of one word above all else—"ISIS." By his abruptly having pulled troops out of northern Syria, the President has betrayed and deserted our partners and