

awareness, and disseminate suicide prevention best practices. They are, literally, on the frontlines.

But, as you can imagine, this isn't an easy job. This is a hard job, and there are reports that many of these prevention coordinators throughout the VA system are overworked and unable to keep up with their many responsibilities. What we are focused on here is that we want to make sure that the people who are helping our veterans are also taken care of and adequately resourced so that they can do the best job in terms of helping our veterans.

The VA must have a skilled and resourced workforce available, trained to recognize the warning signs of a veteran in crisis, and then be able to work with that veteran, hopefully successfully, to connect them with lifesaving resources before it is too late.

That is what the Support for Suicide Prevention Coordinators Act requires. That is what Senator TESTER and I worked on together to bring this out of the Veterans' Affairs Committee, and, hopefully, if we get that right, then, it has a positive impact on lessening this high rate of suicide among our veterans.

Senator TESTER mentioned what is in this, but it is not just additional resources. It is also a comprehensive study by the GAO to make sure that our coordinators are resourced and have a strategy to make sure they can do their jobs most effectively to impact our veterans.

It is an overall look at the VA system of preventing veteran suicide with a focus on these frontline coordinators who do really, really important work. They are not always recognized.

For those who are doing that work, I commend you, the Senate commends you, and I think we are going to have an overwhelming vote here in a couple minutes that will make sure of your ability to do this really, really important job for our veterans and for our Nation and that you are going to be able to do it better.

I applaud the leadership on both sides of the aisle for bringing this bill to the floor, and I encourage my colleagues to vote in favor of this legislation. Let's get it on the President's desk for his signature soon, and we can take another step—another step—to make sure that we are taking care of our veterans and are trying to address this horribly tragic situation where far too many veterans in America are taking their own lives.

## LEGISLATIVE SESSION

### SUPPORT FOR SUICIDE PREVENTION COORDINATORS ACT

The PRESIDING OFFICER (Mr. LANKFORD). Under the previous order, the Senate will proceed to legislative session to consider H.R. 2333, which the clerk will report.

The legislative clerk read as follows:

A bill (H.R. 2333) to direct the Comptroller General of the United States to conduct an assessment of the responsibilities, workload, and vacancy rates of Department of Veterans Affairs suicide prevention coordinators, and for other purposes.

Thereupon, the Senate proceeded to consider the bill.

The bill was ordered to a third reading and was read the third time.

The PRESIDING OFFICER. The bill having been read the third time, the question is, Shall the bill pass?

Mr. SULLIVAN. Mr. President, I ask for the yeas and nays.

The PRESIDING OFFICER. Is there a sufficient second?

There appears to be a sufficient second.

The clerk will call the roll.

Mr. THUNE. The following Senator is necessarily absent: the Senator from Kentucky (Mr. PAUL).

Mr. DURBIN. I announce that the Senator from Colorado (Mr. BENNET), the Senator from New Jersey (Mr. BOOKER), the Senator from Vermont (Mr. SANDERS), and the Senator from Massachusetts (Ms. WARREN) are necessarily absent.

The PRESIDING OFFICER. Are there any other Senators in the Chamber desiring to vote?

The result was announced—yeas 95, nays 0, as follows:

[Rollcall Vote No. 390 Leg.]

#### YEAS—95

Alexander	Gillibrand	Peters
Baldwin	Graham	Portman
Barrasso	Grassley	Reed
Blackburn	Harris	Risch
Blumenthal	Hassan	Roberts
Blunt	Hawley	Romney
Boozman	Heinrich	Rosen
Braun	Hirono	Rounds
Brown	Hoeven	Rubio
Burr	Hyde-Smith	Sasse
Cantwell	Inhofe	Schatz
Capito	Isakson	Schumer
Cardin	Johnson	Scott (FL)
Carper	Jones	Scott (SC)
Casey	Kaine	Shaheen
Cassidy	Kennedy	Shelby
Collins	King	Sinema
Coons	Klobuchar	Smith
Cornyn	Lankford	Stabenow
Cortez Masto	Leahy	Sullivan
Cotton	Lee	Tester
Cramer	Manchin	Thune
Crapo	Markey	Tillis
Cruz	McConnell	Toomey
Daines	McSally	Udall
Duckworth	Menendez	Van Hollen
Durbin	Merkley	Warner
Enzi	Moran	Whitehouse
Ernst	Murkowski	Wicker
Feinstein	Murphy	Wyden
Fischer	Murray	Young
Gardner	Perdue	

#### NOT VOTING—5

Bennet	Paul	Warren
Booker	Sanders	

The bill (H.R. 2333) was passed.

### EXECUTIVE CALENDAR—Continued

The PRESIDING OFFICER. Under the previous order, the Senate will proceed to executive session to resume consideration of the VanDyke nomination.

The Senator from Texas.

UNANIMOUS CONSENT REQUEST—S. 1416

Mr. CORNYN. Mr. President, as all America knows, climbing healthcare

costs continue to keep the American people up at night. A Kaiser Foundation poll in September found that the No. 1 health concern of the American people is prescription drug pricing. A whopping 70 percent of those polled think lowering prescription drug costs should be a top priority—a top priority—for Congress, making it the No. 1 item on our to-do list, but our friend and colleague from New York, the minority leader, objected last time I offered unanimous consent to take up and pass a bill, which I will describe here momentarily.

I hope, given the intervening time and further reflection, he will not do so today, and we can get this bill passed and address this top priority of the American people.

The good news is, Republicans and Democrats both agree we need to do something about it. I have the honor of serving on both the Finance and Judiciary Committees, where we have been looking into this problem and some of the potential solutions.

There are pharmaceutical CEOs who earn big bonuses as sales go up. I am not opposed to them receiving compensation, but pharmacy benefit managers who negotiate backdoor rebates that drive up out-of-pocket costs are a problem because of the lack of transparency.

What I find very seriously concerning as well is anti-competitive behavior when it comes to patents by drug manufacturers. There are two practices, in particular, that the legislation I intend to offer a unanimous consent request on would address.

One is called product hopping, which occurs when a company develops a reformulation of a product that is about to lose exclusivity. Let me just stop a moment and say that one of the ways we protect the investment and the intellectual property of American innovators is to give them exclusivity over the right to sell and license that intellectual property, including drugs. That encourages people to make those investments. In turn, it benefits the American people and the world, literally, by creating new lifesaving drugs, and that is a good thing. There is a period of exclusivity, and after that expires—after that goes away—then it opens that particular formulation up to generic competition; meaning, the price will almost certainly be much lower and more affordable to the American people.

This issue of product hopping is gamesmanship, as I will explain. First of all, before the drug loses exclusivity, the manufacturer pulls the drug off the market. This is done not because the new formula is more effective, but it will block generic competitors.

The second issue is patent thicketing, which occurs when an innovator uses multiple, overlapping patents or patents with identical claims that make it nearly impossible for competitors to enter the market. This is nothing more and nothing less than

abuse of our patent system, and it is coming at a high cost for patients who rely on affordable drugs.

Earlier this year, I introduced a bill with our friend and colleague from Connecticut, Senator BLUMENTHAL, who happens to be a Democrat, to address these anti-competitive behaviors. Our bill is called the Affordable Prescriptions for Patients Act, and it streamlines the litigation process by limiting the number of patents these companies can use in court. So companies are spending less time in the courtroom and, hopefully, more time innovating these new lifesaving drugs, while opening up these drugs once they lose their exclusivity to generic competition and more and more affordable prices for consumers.

This legislation does not stifle innovation; it doesn't limit patients' rights; and it doesn't cost taxpayers a dime. In fact, the Congressional Budget Office estimates it would lower—lower—Federal spending by more than a half a billion dollars over 10 years. This is just savings to the Federal Government for Medicare and Medicaid. Undoubtedly, it would show significant savings for consumers with private health insurance as well.

I am sure it comes as no surprise, then, that this legislation passed unanimously out of the Judiciary Committee; not a single Senator opposed it. That happened in June. This is December, and there has been no movement since then.

We have tried to be patient because we know there are other bills coming from the Health, Education, Labor, and Pensions Committee. There is a bill coming out of the Finance Committee on which the Presiding Officer and I sit. My hope is that we would have been able to make progress on a larger package, but here we are at the end of the year, and there has been no movement. We have been more than patient, but I think there comes a time when patience ceases to be a virtue, particularly when it comes to providing something that would benefit the American people.

There are no concerns about the policies laid out in the bill, as you can see by some of the comments reflected in this chart. Again, our colleague, the Democrat from Connecticut, Senator BLUMENTHAL, said: "This bill offers a positive, solid step toward ending abuses in the use of patents."

Senator DURBIN, who is the Democratic whip, a member of leadership, said:

It is a bipartisan measure that passed the Senate Judiciary Committee. I not only voted for it, I cosponsored it, and I believe it should pass and should become the law of the land.

So imagine my surprise when the Democratic leader objected to a unanimous consent request to pass it a couple of weeks ago. He even went so far as to call this "a manipulative charade" and "a little game," which is strange because he also called it a good

bill. His biggest criticism was it didn't do enough, but as I pointed out then, if you sit around waiting for the big bill to get passed, nothing happens in the meantime, and it is a loss to the American people.

I think it is past time for us to take up this legislation, get it passed, get it signed by the President. Our friends in the House of Representatives have already passed two bills, which, put together, essentially reflect the same policy.

I can't think of any other reason for the Democratic leader to object than pure politics. He doesn't want anybody to get a "win." That also goes for the Senator from Iowa, when she had offered a bill to reauthorize the Violence Against Women Act. She happens to be on the ballot in 2020 as well. The only rationale I can possibly think of that the Democratic leader would continue to object to these bipartisan consensus bills is just that he doesn't want somebody to be able to score a point on this side because he feels like that will disadvantage his candidates in the next election and advantage us.

There comes a time when we need to put those election considerations to the side and focus on making good policy. I happen to believe good policy is good politics.

The truth is, the Democratic leader, in objecting to the passage of this legislation, does have one very big and powerful cheerleader behind him; that is, the drug companies. The drug companies love it when bipartisan legislation gets blocked on the Senate floor for whatever reason. The truth is, they hate this bill, and they don't want to see anything done on this issue. Inadvertently or not, the Democratic leader seems to be providing them a lot of cover right now.

My constituents didn't send me to Washington to play these endless games. They sent me here to get results, and that is exactly what I aim to do.

Mr. President, I ask unanimous consent that as in legislative session, the Senate proceed to the immediate consideration of Calendar No. 132, S. 1416. I ask unanimous consent that the committee-reported substitute be withdrawn; that the Cornyn amendment at the desk be agreed to; that the bill, as amended, be considered read a third time and passed; and that the motion to reconsider be considered made and laid upon the table.

The PRESIDING OFFICER. Is there objection?

Mr. SCHUMER. Mr. President, reserving the right to object.

The PRESIDING OFFICER. The Democratic leader.

Mr. SCHUMER. Mr. President, my good friend, the Senator from Texas, is just engaged in a gimmick to cover up all that he hasn't done on making drug costs lower. Now, 99 percent of what the public wants is not being allowed on the floor by his leadership when he was the whip, by this leadership, and

now he wants to get well with a bill that is very small.

Open up the floor to debate. We will debate all the big things that will really reduce prices, which people want, and we will debate his bill. I object.

The PRESIDING OFFICER. Objection is heard.

The Senator from Texas.

Mr. CORNYN. Mr. President, I point out to my friend from New York, I am not the leader or the floor manager of legislation. That is up to Senator MCCONNELL, the Senator from Kentucky. Obviously, there has been foot-dragging on important things like appropriations bills, the USMCA—the important trade agreement with Canada and Mexico—and now there is impeachment mania that has consumed the House of Representatives and has crowded out our ability to get other things done; hence, my loss of patience after waiting since June to get this bill passed.

This isn't a case of my wanting to get well; this is a case of wanting to make the American people well by providing them access to low-cost generic alternative drugs and preventing Big Pharma from engaging in the sorts of gamesmanship that keep drug prices up and keep the American consumer down.

I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

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

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

Mr. CASEY. Mr. President, I ask unanimous consent to speak as in morning business.

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

#### HEALTHCARE

Mr. CASEY. Mr. President, I rise this morning, or I guess this afternoon, to talk about a couple of issues. I will start with healthcare and talk about the Supplemental Nutrition Assistance Program, as well as another piece of legislation we are considering in the next couple of days.

Let me start with healthcare. There is a lot to talk about here. We don't have time for all of it today, but a number of things are happening on the healthcare front that I think most Americans are aware of but maybe have not heard a lot about recently.

I would argue there are three basic threats to healthcare right now—not just healthcare for some but, in large measure, healthcare for all. One is a lawsuit, which is being litigated in the Fifth Circuit Court of Appeals. It is a lawsuit that would wipe out the Affordable Care Act, and that lawsuit has already prevailed at the district court level. It is now before the appellate court, and if that lawsuit were to prevail, the Affordable Care Act—or I