

S. 4179

At the request of Ms. KLOBUCHAR, the names of the Senator from Virginia (Mr. KAINE) and the Senator from North Dakota (Mr. CRAMER) were added as cosponsors of S. 4179, a bill to update the blood donation public awareness campaign of the Department of Health and Human Services to include public awareness on plasma donation.

S. 4192

At the request of Ms. WARREN, the names of the Senator from New Hampshire (Ms. HASSAN) and the Senator from Arkansas (Mr. COTTON) were added as cosponsors of S. 4192, a bill to increase portability of and access to retirement savings, and for other purposes.

S. 4201

At the request of Mr. PORTMAN, the names of the Senator from South Carolina (Mr. GRAHAM) and the Senator from Minnesota (Ms. SMITH) were added as cosponsors of S. 4201, a bill to direct the Federal Communications Commission to take certain actions to accelerate the Rural Digital Opportunity Fund Phase I auction, and for other purposes.

S. 4233

At the request of Ms. COLLINS, the name of the Senator from North Carolina (Mr. TILLIS) was added as a cosponsor of S. 4233, a bill to establish a payment program for unexpected loss of markets and revenues to timber harvesting and timber hauling businesses due to the COVID-19 pandemic, and for other purposes.

S. 4258

At the request of Mr. CORNYN, the names of the Senator from Oregon (Mr. WYDEN), the Senator from Maine (Ms. COLLINS), the Senator from Connecticut (Mr. BLUMENTHAL) and the Senator from Michigan (Mr. PETERS) were added as cosponsors of S. 4258, a bill to establish a grant program for small live venue operators and talent representatives.

S. 4262

At the request of Mr. MENENDEZ, the name of the Senator from Michigan (Mr. PETERS) was added as a cosponsor of S. 4262, a bill to direct the Secretary of Health and Human Services to develop an action plan, make targeted grants, and develop public awareness campaigns with respect to COVID-19 and the disproportionate impact of the COVID-19 pandemic on racial and ethnic minorities and other vulnerable populations.

S. 4275

At the request of Mr. THUNE, the name of the Senator from Pennsylvania (Mr. TOOMEY) was added as a cosponsor of S. 4275, a bill to require recipients of Pandemic Unemployment Assistance to provide employment documentation, and for other purposes.

S. RES. 524

At the request of Mr. CARDIN, the name of the Senator from Mississippi (Mr. WICKER) was added as a cosponsor

of S. Res. 524, a resolution condemning the practice of politically motivated imprisonment, calling for the immediate release of political prisoners in the Russian Federation, and urging action by the United States Government to impose sanctions with respect to persons responsible for that form of human rights abuse.

#### STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTION

By Mr. ROMNEY (for himself, Mr. MANCHIN, Mr. YOUNG, Ms. SINEMA, Mrs. CAPITO, Mr. JONES, Mr. ALEXANDER, Mr. KING, Mr. PORTMAN, Mr. WARNER, Mr. PERDUE, Mr. CORNYN, Ms. MCSALLY, Mr. ROUNDS, and Mr. SULLIVAN):

S. 4323. A bill to save and strengthen critical social contract programs of the Federal Government; to the Committee on Finance.

Mr. ROMNEY. Mr. President, I rise today to propose the TRUST Act of 2020. This is bipartisan legislation. It is sponsored by 14 other Senators, both Democrats and Republicans, and supported by 30 Members from each party from the House.

Its purpose is to preserve the Social Security and Medicare trust funds, among others, both of which have been pushed closer to bankruptcy due to the pandemic. The Committee for a Responsible Federal Budget projects that Medicare Part A will now become insolvent in only 4 years, and the Social Security retirement trust fund by 2031.

Under the law, insolvency would trigger drastic benefit cuts, or, if approved by a future Congress, draconian tax hikes. Our TRUST Act is designed to save these trust funds in addition to other vital Federal trust funds.

The TRUST Act also addresses our ballooning national debt, a burden which has become even greater due to the COVID-19 crisis. The CBO projects that the Federal budget deficit will be \$3.7 trillion this year. Our national debt will exceed \$27 trillion. That could eventually mean backbreaking interest payments, runaway inflation, or national financial calamity.

Modeled loosely after the Simpson-Bowles fiscal commission, the TRUST Act would create a process to rescue these funds. Under the bill, an individual rescue committee would be created for each of the trust funds. Each committee would be tasked with drafting bipartisan legislation that would provide for its solvency.

Members of the rescue committees would come equally from the House and the Senate and equally from each party. If the majority of a committee supported a solvency plan and if at least two members from each party endorsed that plan, it would be brought, on an expedited basis, to the floor.

The TRUST Act has strong bipartisan consensus among Senators and Members of the House, as well as policy advocates across the political spec-

trum, from Freedom Works to the Brookings Institution, as well as from Alan Simpson and Erskine Bowles.

This is the right time to act. Our trust funds are approaching insolvency even more rapidly due to the pandemic. More importantly, if we don't act now, it will never happen before we face an overwhelming crisis. One of the lessons the COVID-19 crisis has taught us is that it is far better to prepare and hopefully prevent a crisis than to wait for a crisis to fall upon us.

The TRUST Act is the only bipartisan, bicameral solution that has been proposed to save our trust funds and to restore fiscal stability. I urge this body to work in good faith to advance this proposal as part of additional pandemic relief.

By Mr. SCHUMER (for himself, Mrs. MURRAY, Mr. BROWN, Ms. BALDWIN, Mr. DURBIN, Mr. CASEY, Ms. ROSEN, Mr. MENENDEZ, Mr. LEAHY, Mr. REED, Mr. VAN HOLLEN, Ms. SMITH, Mrs. FEINSTEIN, Mr. BLUMENTHAL, Ms. KLOBUCHAR, Mr. KAINE, Ms. WARREN, Mr. HEINRICH, Ms. HARRIS, Mr. UDALL, Mr. MARKEY, Mr. MERKLEY, Mrs. GILLIBRAND, Mr. WHITEHOUSE, Mr. CARDIN, Ms. STABENOW, Mr. BOOKER, Mr. WYDEN, Ms. DUCKWORTH, Mrs. SHAHEEN, and Mr. BENNET):

S. 4328. A bill to require the Comptroller General of the United States to conduct a study and report on data quality, sharing, transparency, access, and analysis; to the Committee on Health, Education, Labor, and Pensions.

Mr. SCHUMER. Mr. President, I ask unanimous consent that the text of the bill be printed in the RECORD.

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

S. 4328

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,*

#### SECTION 1. PROTECTING DATA QUALITY, SHARING, TRANSPARENCY, ACCESS, AND ANALYSIS.

(a) INQUIRY AND SUBMISSION OF FINDINGS.—

(1) IN GENERAL.—Not later than 7 days after the date of the enactment of this Act, the Comptroller General of the United States (referred to in this section as the “Comptroller General”) shall initiate an inquiry into any changes or interruptions in data quality, sharing, transparency, access, and analysis resulting from the changes to COVID-19 hospital data reporting requirements initiated by the White House Coronavirus Task Force and the Department of Health and Human Services on July 13, 2020.

(2) SUBMISSION OF FINDINGS.—Not later than 45 days after initiation of such inquiry, the Comptroller General shall present its findings to the Committee on Health, Education, Labor, and Pensions of the Senate, the Committee on Energy and Commerce of the House of Representatives, and the Department of Health and Human Services, in oral briefings, which shall detail—

(A) what is known about any changes or interruptions in data quality, sharing, transparency, access to data, and analysis or access to relevant analytics, including whether such changes increased, decreased, expedited, or delayed such quality, sharing, transparency, access, and analysis or access to relevant analytics, for—

- (i) the public;
- (ii) State, local, Tribal, and territorial health departments;
- (iii) hospitals; or
- (iv) Federal agency officials, including officials within the Department of Health and Human Services and Centers for Disease Control and Prevention; and

(B) what is known about whether there was any impact to, or interruptions in, delivery of supplies, including personal protective equipment, ventilators, and COVID-19 therapeutics, to States or other entities resulting from changes to COVID-19 hospital data reporting requirements described in paragraph (1).

(b) **ACCESS TO REPORTING SYSTEM.**—For purposes of the review required under this section or any other audit, evaluation, or investigation authorized by law, the Secretary shall, within 7 days of the date of enactment of this Act, provide the Comptroller General with direct access to the systems used for the reporting of information referred to in this section, including to all information collected, stored, analyzed, processed, or produced in or through such systems used for such purposes. For purposes of this subsection, the term “direct access” means secured access to the information technology systems maintained by the Department of Health and Human Services that enables the Comptroller General to independently access, view, download and retrieve data from such systems.

(c) **ADDRESSING ISSUES.**—Not later than 7 days after the Comptroller General submits the findings to Congress under subsection (a)(2), the Secretary of Health and Human Services shall address data quality, sharing, transparency, access, and analysis, and access to relevant analytics for the public; State, local, Tribal, and territorial health departments; hospitals; and Federal agency officials, including officials within the Department of Health and Human Services and Centers for Disease Control and Prevention, to fully correct any decreases or delays reported under subsection (a)(2) by the Comptroller General and ensure that data quality, sharing, transparency, access, and analysis or access to relevant analytics are equal to or better than they were as of July 12, 2020.

(d) **REPORT.**—Not later than 18 months after the date of enactment of this Act, the Comptroller General shall submit to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Energy and Commerce of the House of Representatives, a report regarding the impact of changes to COVID-19 hospital data reporting requirements initiated by the White House Coronavirus Task Force and the Department of Health and Human Services on July 13, 2020. In preparing such report, the Comptroller General shall collect information from relevant stakeholders, as appropriate. Such report shall—

(1) detail any known changes or interruptions in data quality, sharing, transparency, access, and analysis or access to relevant analytics for the entities described in subsection (a)(2)(A), including whether such changes ultimately increased, decreased, expedited, or delayed data quality, sharing, transparency, access, and analysis or access to relevant analytics;

(2) describe challenges faced by hospitals, States, localities, Indian Tribes (as defined in section 4 of the Indian Self-Determination

and Education Assistance Act (25 U.S.C. 5304)), urban Indian organizations (as defined in section 4 of the Indian Health Care Improvement Act (25 U.S.C. 1603)), territories, Federal agencies, and the public resulting from such changes;

(3) describe the extent to which such changes may allow for manipulation of the data in a manner that results in hospitals, States, localities, Indian Tribes (as defined in section 4 of the Indian Self-Determination and Education Assistance Act (25 U.S.C. 5304)), urban Indian organizations (as defined in section 4 of the Indian Health Care Improvement Act (25 U.S.C. 1603)), territories, Federal agencies, and the public receiving different information than what was provided to the Department of Health and Human Services;

(4) assess the extent to which such changes increased or decreased the number of hospitals reporting data and the completeness and quality of data reported by hospitals;

(5) determine whether any States deployed the National Guard to assist in hospital data reporting, as suggested in communications from the White House Coronavirus Task Force and the Department of Health and Human Services on July 13, 2020, and whether any such deployment had a measurable effect on the speed, content, or quality of such reporting;

(6) describe the decision-making process within the Department of Health and Human Services that led to the changes initiated on July 13, 2020, including—

(A) the role of the Centers for Disease Control and Prevention in such decision-making;

(B) any analysis conducted by the Department of Health and Human Services or the Centers for Disease Control and Prevention that assessed the quality and completeness of different data streams (including the National Healthcare Safety Network, Tele-Tracking, data reported by States to the Protect System of the Department of Health and Human Services), prior to July 13, 2020;

(C) any external input into the decision-making process, including from other Federal agencies, States, localities, Indian Tribes (as defined in section 4 of the Indian Self-Determination and Education Assistance Act (25 U.S.C. 5304)), urban Indian organizations (as defined in section 4 of the Indian Health Care Improvement Act (25 U.S.C. 1603)), territories, or hospitals;

(D) the public health justification for the changes; and

(E) any other justification for such changes; and

(7) assess the process used to address any decreases or delays in data quality, sharing, transparency, access to data, and analysis and access to relevant analytics as required under subsection (c).

(e) **INTERIM REPORT.**—Not later than 6 months after the date of enactment of this Act, the Comptroller General shall submit to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Energy and Commerce of the House of Representatives an interim report providing information on initial findings under subsection (d).

## SUBMITTED RESOLUTIONS

### SENATE RESOLUTION 658—CALLING FOR A FREE, FAIR, AND TRANSPARENT PRESIDENTIAL ELECTION IN BELARUS TAKING PLACE ON AUGUST 9, 2020, INCLUDING THE UNIMPEDED PARTICIPATION OF ALL PRESIDENTIAL CANDIDATES

Mr. DURBIN (for himself, Mr. CARDIN, Mr. RUBIO, and Mrs. SHAHEN) submitted the following resolution; which was referred to the Committee on Foreign Relations:

S. RES. 658

Whereas long-term president Alyaksandr Lukashenko has ruled Belarus as an undemocratic dictatorship since the first presidential election in Belarus in 1994 and is running for a sixth term in office;

Whereas the presidential elections in Belarus have been neither free nor fair and have been rejected by the international community as not meeting minimal electoral standards;

Whereas Belarus abolished presidential term limits in a referendum in 2004, and Lukashenko affirmed in November 2019 that he plans to run again in 2025;

Whereas, in the most recent 2010 and 2015 presidential elections, Lukashenko arbitrarily disqualified or jailed key opponents ahead of and after the elections;

Whereas, in March 2011, the United States Senate unanimously passed a resolution condemning the Belarusian elections as illegitimate and calling on the Belarusian regime to immediately release all political prisoners;

Whereas, according to the Department of State 2019 Country Report on Human Rights Practices for Belarus, Lukashenko has consolidated his rule over all institutions since his first term as president and undermined the rule of law through authoritarian means, including manipulated elections and arbitrary decrees, such that all subsequent presidential elections fell well short of international standards;

Whereas the law of Belarus provides citizens the ability to choose their government in free and fair periodic elections held by secret ballot and based on universal and equal suffrage, but the Government of Belarus has consistently denied citizens that ability;

Whereas flawed referendums in 1996 and 2004 amended the Constitution of Belarus to broaden the powers of Lukashenko, extend his term in office, and remove presidential term limits;

Whereas appearances by opposition politicians on state media have historically been limited and such restrictions have been strongly criticized by the Office for Democratic Institutions and Human Rights of the Organization for Security and Co-operation in Europe (OSCE/ODIHR), which has not recognized any elections in Belarus as free and fair since 1995;

Whereas authorities in Belarus routinely impede the activities and legal status of opposition political parties by refusing to register them, while allowing approximately 6 largely inactive but officially registered pro-Lukashenko political parties to operate freely;

Whereas the Central Election Commission of Belarus (CVK) disqualified the majority of potential candidates from the upcoming August 9, 2020, presidential election for politically motivated purposes;

Whereas, on June 30, 2020, the Central Election Commission barred Valery Tsepkalo, a