

that is what happens. And that is not OK.

Nationwide, 90 percent of our schools and summer programs count on the funding and flexibility that is currently in place—90 percent of our schools. All of this in red, 90 percent—over 90 percent—count on the flexibilities, they count on the funding that we put in place during the pandemic that is still needed because of the challenges going on. This is who is counting on us to act to be able to help them feed children.

Starting July 1, 22 days from now, that is going to stop for many schools. I have been told that if we don't act, one-third of our schools will be in such a dire situation that they may not be able to continue the National School Lunch Program at all. Let me repeat that. One-third of our schools may not be able to provide healthy meals to our most at-risk children through the school lunch program at all if we don't come together and do something to help them. And we know what to do. We just need the bipartisan support to do it. This is a shocking failure of our country's responsibility to provide for our children and set them up for success.

Throughout the pandemic, Democrats and Republicans have come together to make sure that schools and summer meal programs have the tools they need to feed hungry kids. We need Republicans to join us again. We are working to return to normal, but we aren't there yet. It is so urgent that we pass my Support Kids Not Red Tape Act right now. I am extremely grateful that we have every Democratic Member of the U.S. Senate and Independent Members and two of our Republican colleagues leading the way: Senator MURKOWSKI and Senator COLLINS. It is a bipartisan, broadly supported way to make sure our kids aren't going hungry. But time is running out, and we only need eight more Republican colleagues to join us. We have 52; we need 8. We need eight more Republican colleagues to join us to be able to provide support for our children and support for our schools throughout the next year as we are working our way through all of these supply chain issues and so on that are getting in the way.

Our kids are counting on us. Twenty-two days—twenty-two days—that is what we are talking about. We have got 22 days before all of the support, all of the funding to be able to make sure that as many children are getting healthy food in the summer as possible, the children who need it—and in the schools that we have a school lunch program and that we are able to provide healthy meals so that kids can focus on learning, they can focus on being kids, they can focus on being successful—not just how they are going to manage their hunger through another day.

Twenty-two days, Mr. President. Our kids are counting on us. We need to act.

I yield the floor.

The PRESIDING OFFICER (Mr. WHITEHOUSE). The Senator from Vermont.

HONORING OUR PACT ACT OF 2021

Mr. SANDERS. Mr. President, I rise today in strong support of the PACT legislation that we are now considering.

As a former chair and longtime member of the Senate Veterans' Committee, one of my highest priorities is to make certain that every veteran in this country, people who have put their lives on the line to defend us, get the quality healthcare and benefits that they have deserved.

This is an important piece of legislation, and I want to congratulate Senator TESTER, chair of the committee, and Ranking Member MORAN for their hard work on this. This legislation will improve healthcare, research, and resources for veterans who were exposed to deadly toxic substances and environmental hazards, including open-air burn pits, during their military service. This legislation will finally recognize and treat toxic exposure as a cost of war for the millions of veterans Congress has ignored for far too long. And we do that by adding 23 burn pit and toxic exposure-related conditions to the VA's list of service presumptions. This will mean that some 3.5 million veterans will now be eligible for VA healthcare, and that is very, very important.

It goes without saying that in the wealthiest country on Earth, where we spend more on defense than the next 11 nations combined, no veteran should be without the healthcare that they are, in my view, entitled to. I understand there is not the political support for this in Congress right now, but I happen to believe that in a world in which nation after nation guarantees healthcare to all of their people as a right—in fact, we are the only major country on Earth not to do that—that the very least we could do is to make certain that every man and woman who has put the uniform of the United States of America on, put their lives on the line, are, in fact, entitled to healthcare because they served our country. That is my view. This bill does not do that, but this bill does at least enroll 3.5 million more people for VA healthcare, and it is a step forward.

In terms of this bill, clearly, it is unacceptable that we have exposed our military members to toxic burn pits and other dangerous substances on the battlefield. For decades, the Pentagon has utilized open-air burn pits to dispose of a wide variety of waste, including medical, human, and hazardous waste.

Way back in 2009, when he led the U.S. Central Command, GEN David Petraeus sounded the alarm “about the effects of burn pits and airborne toxins on our servicemembers and civilians.” Despite those concerns, DOD continued to expose U.S. forces to burn pits, leaving the VA with the responsibility of

dealing with the consequences of these dangerous and deadly actions.

So the bottom line is, I am deeply supportive of this legislation. It is a step forward. But we can significantly improve this bill, and that is why I have introduced four amendments to this important bill that I hope will be supported by the Senate.

First, this first amendment that I have offered will expand permanent access to VA healthcare to members of the National Guard and Reserve who are not otherwise eligible. Right now, National Guard men and women who are activated on Presidential orders are eligible for VA healthcare, and that is good, but that turns out to be only a very small percentage of people who are in the National Guard and Reserve. And I happen to believe that if you are in the National Guard or Reserve and you could be called up at any moment to put your life on the line, I think you should be entitled to VA healthcare. And that is what that amendment does.

The second amendment deals with—what can I say—a pathetic and laughable bureaucratic nightmare that currently exists in the VA. And Rube Goldberg would have a hard time coming up with a system like this. This is really quite amazing. And that is, within the VA bureaucracy, which is itself difficult to overcome for many veterans, you have a system which now has over 3,000 income eligibility standards based on ZIP Codes.

So a veteran out there watching this says: You know, I would like to apply for VA healthcare. I served my country honorably. How do I do it?

Well, it turns out that, depending on your income and depending on the ZIP Code that you live in, you may or may not be eligible for VA healthcare. So, in other words, in Vermont you can have one veteran with an income of X living across the street from another veteran who has an income of Y, \$3,000 more or less. One veteran will be eligible for VA healthcare; another will not. In a large State like California, you have literally hundreds of different income eligibility standards that veterans are going to have to overcome.

So if people go to a service officer in the VFW or the American Legion and ask: Am I eligible, it takes a lot of research to determine whether you are eligible. Look at the eligibility standards for San Francisco versus Los Angeles, for example. There are many, many thousands of dollars in differential. So you could be eligible in San Francisco—rather, eligible in Los Angeles and not in San Francisco. It really makes no sense. It is a nightmare.

This amendment simplifies it. It simply says that every State in the country takes the highest level of income eligibility and that is the standard. So you will have 50 standards rather than 3,000 standards, and I think that will make it a lot easier for veterans to access VA healthcare.

My third amendment is a pretty simple one. It says that the VA should

maintain a dental clinic in every State in the country to provide necessary dental services for veterans. Right now, there are very few States that do not have at least one dental clinic. My own State of Vermont is one of those States, and I think every State should have that.

My fourth amendment again deals with the issue of dental care. One of the many, many crises facing the American dysfunctional healthcare system is that, by and large, we do not recognize dental care as being healthcare, and the result of that in the general public is there are many, many, many millions of people who cannot afford the outrageously high cost of dental care. These are people, including many seniors, who literally lose all of the teeth in their mouth; they can't chew their food properly. For younger people, they can't go out and get a job successfully because if you open your mouth and you don't have any teeth in it, it is kind of hard to get hired under those conditions.

Currently, out of the 8.9 million veterans enrolled in VA healthcare, only 16 percent—or 1.4 million veterans—are eligible for dental care, and that is because, within the VA, almost the only people eligible for dental care are those with service-connected problems. In other words, if you have a service-connected issue with your mouth, with your teeth, you are eligible for VA healthcare, but if you don't, if you are simply a veteran whose teeth are rotting in his or her mouth, sorry, you are not eligible.

And the limitations of that approach are not only that dental care should be considered as healthcare in general; if somebody is suffering with poor dental care, we should take care of that person because it is healthcare. But there is no question that dental problems, oral problems—infections, et cetera—have an impact on our overall health.

According to the VA, there are roughly 3.9 million veterans who have chronic diabetes and heart disease who are enrolled in the VA—3.9 million. Most of the veterans diagnosed with diabetes were exposed to Agent Orange during their service in the Vietnam war. Furthermore, the overwhelming healthcare consensus is that poor oral health worsens the symptoms of diabetes and heart disease. So what that means in English is that you have veterans out there who are struggling with diabetes, struggling with heart disease, and their problem is exacerbated by poor dental health, poor oral health; and yet they can't get the dental care they need, which not only should be an end in itself, but it also impacts their overall health.

So, without going into great detail, I would say that providing dental care to veterans not only eases pain, not only addresses overall healthcare concerns, but it ends up being a very cost effective approach. In a 2019 report to Congress on the cost of expanding dental care—something that I asked for—the VA stated—and I quote:

... the provision of dental services could result in some reduction in total health care costs.

Neglecting oral health can contribute to health problems including bacterial pneumonia, cardiovascular disease, and oral cancer.

In other words, when you treat oral problems, you are treating overall health issues; and you can keep people healthier and not have to expend a whole lot of money dealing with the health problems of those veterans.

During a VA briefing earlier this month, the VA's office of dentistry stated unequivocally that "dental care is essential to overall health care" while simultaneously advocating to maintain VA's dental eligibility status quo.

The bottom line is that it is not complicated; dental care is healthcare. By ignoring dental care, we cause other healthcare problems and we increase expenses to the VA.

So those are the four amendments, and I hope the Senate will give them serious consideration.

Mr. President, I yield the floor.

The PRESIDING OFFICER. The Senator from Kansas.

BORDER SECURITY

Mr. MARSHALL. Mr. President, I want to talk today about one of the most disturbing human catastrophes in the world. Now, I have recently visited the Ukraine border, and I have done medical mission work around the world from Haiti to Honduras to Africa. I have seen malnutrition and starvation. I have seen trauma. I have seen the consequences of the lack of potable water and sewage.

I describe this so when I say our southern border—yes, our own southern border—is a humanitarian crisis, you know I am not speaking in ignorance or hyperbole. And this crisis, this humanitarian nightmare, has been created by our own President's policies.

You see, when he was elected, he sent a loud invitation to the whole world; and more recently, when he said he was ending title 42, it was like turning on a stronger magnet. It was like sending a flare, a signal. It was like a giant Times Square billboard telling all the world: Come now, come to the United States. Amnesty is waiting for everyone.

As for the cartels—the people traveling, they paid no mind to the court ruling. Instead, they kept coming. And as we speak, the largest caravan to date is on its way, with more than 15,000 people—bigger than my hometown of Great Bend.

This invitation, this magnet has made an already treacherous, inhumane situation worse. Our President is, indeed, inviting people to their own peril, to their own harrowing, life-threatening journey.

Let me share with you what I saw just 16 days ago on my fourth visit to the border.

Upon our arrival and a short drive to the river, we found the Border Patrol

and our National Guard hard at work with some 30 migrants in line waiting to be processed. They had turned themselves in. And within moments, within minutes, that line was over 100 people. And at the front of the line were two beautiful young sisters, ages 7 and 9. They were unaccompanied—no parents and no families. I can only imagine what it would have been like traveling over 1,000 miles from Central America to the Rio Grande River without your parents or without a family member. I can only imagine what might have happened to them on that trek.

From the river, we traveled to a detention center where the migrants were held for 2 to 3 days.

I have to again compliment our Border Patrol; they are doing an incredible job in a humanitarian crisis by providing showers, shelter, clothing, healthcare, and meals. The challenge is 80 percent of our Border Patrol officers are having to function like they are like running a restaurant, like running a hotel, functioning as social workers while our borders are left unguarded.

And the get-aways—we haven't talked about the get-aways. Let me tell you the story of one young lady I met. Let's say she was probably 17 years of age from Central America. She or her family paid the cartel some \$3,000 to get from Central America through Mexico across the river and into the United States. Now, I don't know if she was raped or violated, but this certainly is a very common situation—all too common during this trek. We do know that some people in her group were asked to smuggle drugs across the border as part of their thoroughfare.

Now, after crossing this treacherous river, she was abandoned by her coyote. She was already dehydrated, had dysentery. She was malnourished. She hadn't slept for days. And she was no doubt frightened. Eventually she found refuge at a cartel stash house on the Texas side of the border. Yes, now the cartel has cartel members living in America along the river and, as I later found out, all across America.

Next the cartel arranged—of course, for a price—for her to be smuggled via car from a border city to a checkpoint some 60 miles away. Now these journeys, too, are treacherous, as migrants are often placed in containers, in the backs of trucks, or in the trunks of cars. And when they are chased by sheriffs, the drivers recklessly place their own human cargo in peril.

But this person wasn't done yet. About 5 miles short of the checkpoint, the human smugglers let her out of the car. Then she had to walk around the checkpoint—probably a journey of 15 to 20 miles—through the Texas heat, scrub brush, and rattlesnakes. In fact, many days now Texas Rangers find dead, decayed bodies of migrant workers or migrant folks who had not made the trek successfully.

So this journey around the checkpoint would take 3 to 4 days. She was