

I want to thank our chair, Chair MURRAY, and Ranking Member BURR for supporting Rita Landgraf's nomination out of the Senate HELP Committee with strong bipartisan support.

I urge my colleagues today to join me in confirming Rita Landgraf to serve as Assistant Secretary of Aging and Administrator of the Administration for Community Living.

With that, I ask unanimous consent that the Senate consider the following nomination: Calendar No. 966, Rita M. Landgraf, to be Assistant Secretary for Aging, Department of Health and Human Services; that the Senate vote on the nomination without intervening action or debate and that the motion to reconsider be considered made and laid upon the table; and that any statements related to the nomination be printed in the RECORD.

The PRESIDING OFFICER. Is there objection?

The Senator from Tennessee.

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

As I mentioned a moment ago, I have been asking for a commitment from my Democratic colleagues that any future reconciliation legislation in this Congress will not incorporate policies that will reduce access to care in my home State of Tennessee. Reiterating, my concern is that the reconciliation legislation that the House passed last fall included provisions that cut DSH payments and uncompensated care pool payments for nonexpansion States which would result in less healthcare for vulnerable populations in my State, accelerate hospital closures, and disadvantage rural communities. These are places and populations for which we are trying to secure more quality healthcare, not less.

Because I have still not received confirmation that these provisions will not be included in any future reconciliation bill, I cannot consent to expediting confirmation of this nominee, and I object.

The PRESIDING OFFICER. Objection is heard.

The Senator from Delaware.

Mr. CARPER. Mr. President, if I could speak momentarily, I had an opportunity to speak briefly with our colleague from Tennessee with respect to his concerns and the reasons that led him to object to what I think—and he may agree—is actually quite an excellent nomination. And my hope is to better understand those objections that he has voiced and to see if they can be objected to in a way that would allow us to go forward with the nomination of Rita Landgraf to serve as Assistant Secretary for Aging for the Department of Health and Human Services.

I yield the floor.

The PRESIDING OFFICER (Mr. MARKEY). The Senator from Rhode Island.

SUICIDE PREVENTION

Mr. REED. Mr. President, I would like to talk today about a health epidemic that is claiming the lives of tens

of thousands of Americans each year. I am speaking about the epidemic of suicide.

I will talk more about this in detail in a moment, but if there is one thing I would like those listening to my remarks to remember is the number 9-8-8-9-8-8, because 9-8-8 is a three-digit number for the National Suicide Prevention Lifeline.

If you need help, please dial 9-8-8.

Over the last several years, we have all observed the increasing mental health needs in our country. Indeed, the isolation of the COVID-19 pandemic made those needs more pronounced, particularly among children, adolescents, and young adults.

In October 2021, the American Academy of Pediatrics, the American Academy of Child and Adolescent Psychiatry, and the Children's Hospital Association—organizations representing experts in children's mental health—declared a national emergency in child and adolescent mental health. According to these organizations, "Rates of childhood mental health concerns and suicide rose steadily between 2010 and 2020 and by 2018 suicide was the second leading cause of death for youth ages 10-24. The pandemic has intensified this crisis: across the country we have witnessed dramatic increases in Emergency Department visits for all mental health emergencies including suspected suicide attempts."

According to the National Alliance on Mental Illness, nearly 20 percent of high school students report serious thoughts of suicide, and about 9 percent have tried to take their own lives.

During the pandemic, children faced challenges we couldn't have imagined just a few years ago. Children isolated from their friends and family members to limit the spread of COVID-19. But this meant that many children were separated from loved ones and other trusted adults like teachers who can help keep kids safe. And kids were isolated from their peers, impeding social learning and development. And in these tough times, rates of domestic violence and child abuse tend to increase. On top of all these challenges, more than 140,000 children in the United States lost a caregiver to COVID-19. And it is no wonder that so many of our children and young adults are in crisis.

These hardships are not unique to young people. Adults are feeling them as well. Regrettably, suicide remains the leading cause of death in the United States. In 2020, suicide claimed the lives of 45,979 Americans, according to the latest data from the CDC. This is about one death every 11 minutes. More people died by suicide in 2020 than in motor vehicle accidents. The number of people who think about or attempt suicide is even higher. In 2020, an estimated 12.2 million American adults seriously thought about suicide, 3.2 million planned a suicide attempt, and 1.2 million attempted suicide.

Now, there are no easy solutions, but there are things we can do to prevent

suicide and improve access to mental health treatment. And we have made some progress. Almost two decades ago, we passed legislation to ensure parity in insurance coverage for mental and behavioral health. We have more work to do to enforce the law, but it was an important first step. And one of the most significant investments we have made in mental healthcare was in passing the Affordable Care Act. We expanded health insurance coverage for millions of Americans and made sure that coverage included mental and behavioral care, which was often excluded from health insurance before the ACA.

We need to do more though. More and more people need mental and behavioral healthcare and do not have the resources to get such care. And those with the resources find that there aren't enough providers to see them, even with good healthcare insurance. There simply aren't enough clinicians for the need. And lastly, we need to better help people in crisis. We can't get people into effective care for the long term if we haven't stopped the immediate crisis. That is why suicidal prevention efforts are so critical.

As I alluded to earlier, last weekend, the National Suicide Prevention Lifeline made the switch from its longstanding 10-digit number to an easy-to-remember 3-digit number, 9-8-8.

In 2019, I joined my colleagues Senators TAMMY BALDWIN and JERRY MORAN and former Senator Cory Gardner in introducing legislation requiring this switch. Our bill was signed into law the next year, and we have been working since then to make sure that 9-8-8 has the funding to be able to handle the influx of new callers. It is estimated that the Lifeline will receive millions more calls with the new number, so we need trained people on the other end of the line ready to get people the help that they need.

When we started this effort, the Lifeline only received about \$7 million in Federal funding each year. Last year, with the help of President Biden, Chair MURRAY and Chairman LEAHY, we were able to secure nearly \$300 million for the Lifeline, and we are working to get the number up to \$700 million next year. This level of funding will help ensure that calls are answered quickly and locally so that people calling can talk to someone from their State who will know exactly where to find nearby resources. We are also working toward a system in which mobile response teams can respond in real time and be deployed to help people in crisis who call.

While the switch to 9-8-8 over the weekend was a huge step forward, we are just beginning to build a much broader system to help people in crisis across the country. I introduced the National Suicide Prevention Lifeline Improvement Act with Senator MORAN last year to help move the Lifeline toward a more comprehensive system. The Health, Education, Labor, and

Pensions Committee passed this bipartisan bill unanimously almost a year ago. It is time for the full Senate to take it up and pass it.

Senator MORAN, I must point out, has been a true leader in these efforts. Recently, we have teamed up in introducing the Suicide Prevention Act to try and intervene with those who may be in crisis but may not know to call 9-8-8 or reach out otherwise. The Suicide Prevention Act would fund prevention programs in hospital emergency departments to better screen for suicide or mental health crises. This is important because over 90 percent of people who attempt suicide have seen a healthcare provider—often a visit to a hospital, particularly an emergency room—in the weeks and days prior to their attempt. As these people are accessing the healthcare system, the mental health issues that really are driving them to seek medical attention are often overlooked. There are evidence-based strategies that healthcare professionals can employ to intervene before it is too late, but they need the training and the resources in order to do so. The bill would also strengthen data collection on suicide so we can better direct resources where they are needed most.

We also need to respond to the challenges facing young people. Back in 2004, I joined my former colleague Senator Gordon Smith in introducing the Garrett Lee Smith Memorial Act, which was named for his son Garrett, who tragically lost his life to suicide the day before his 22nd birthday. This tragedy drove home the realization that suicide and mental health crises are so common among young people.

Our legislation authorized new funding for youth suicide prevention programs in States and on college campuses. Since it was first enacted, the Garrett Lee Smith Memorial Act has delivered roughly \$750 million in suicide prevention funding nationally. And I am pleased that Senator LISA MURKOWSKI, another longstanding partner and champion on this issue, joined me in introducing the reauthorization of this law so we can continue funding programs to support youth and young adults.

Mental health and suicide have for too long been subjects that have been difficult to talk about, much less confront. In meeting the challenge of this mental health crisis, we must be relentless. We cannot just do one thing or even a few things because there is no single solution.

A few days ago, President Biden signed the Bipartisan Safer Communities Act, which included new resources for mental healthcare, including an additional \$150 million for implementation of 9-8-8 and billions of dollars for other mental health services such as the nationwide expansion of the Certified Community Behavioral Health Clinic model. But that cannot be the end of our work.

Each of the efforts and bills I have mentioned represent our continuing

and unfinished work. They would add another layer to help prevent suicide and strengthen our mental healthcare system.

So I urge my colleagues to work with me and my colleagues like Senator MORAN and Senator MURKOWSKI to pass the Suicide Prevention Act, the National Suicide Prevention Lifeline Improvement Act, the Garrett Lee Smith Memorial Act reauthorization, and to undertake many other efforts spearheaded by my colleagues. We should move forward with these measures without delay to prevent another 45,000 Americans from falling victim to suicide.

I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

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

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

SEMICONDUCTORS

Ms. CANTWELL. Mr. President, I know we are expecting a vote soon here, and I know that our colleagues know that we will have two votes—one on a nominee and the second one on a motion to proceed to what has been known as the Innovation and Competition Act. I just wanted to say, because I know there have been a few people out here on the floor—and I won't spend a lot of time now—that, hopefully, we will proceed on the motion to proceed and that we will have a much larger discussion.

I do want to clarify that today's vote is really about whether we are going to stop shipping jobs overseas and instead invest in American R&D. If we invest in American R&D, then we will see the plant, like is being talked about in Ohio, get built instead of getting immediately built in Europe. We will see other companies make investments in States like Texas and Arizona and Idaho and in many other parts of the United States. We will help build an ecosystem here in the United States of technology and next-generation development.

I encourage my colleagues to vote for a bill that makes an investment and competes with the next-generation semiconductors so that we can go even faster with innovation than we are currently doing because so much of that development is happening overseas. It is happening in Taiwan, and it is happening in Korea. They have had "game on" for a while. They have had "game on" and have literally taken a page out of what the United States has done to attract and keep industry here. Innovation is in the DNA of Americans, and if we want to create the economy of the future, we need to invest in the R&D of today. That means passing this next motion to proceed, getting on the bill, and passing as much of it as we can today. That way, we can be assured

that we are not going to lose out in this round of investment that is, yes, very challenging on a global basis.

We should be really realistic. We have a chip shortage today, and it is costing our economy, and it is increasing inflation. We know that there is going to be a chip demand that is going to be threefold from where we are today in the very near future. That means, if we don't start building here, we are not going to catch up. More importantly is the national security element of making sure that the United States is making the most advanced semiconductors.

So today's vote is to say to our colleagues that we believe in the R&D ecosystem of the United States—we believe in the NSF; we believe in our universities; we believe in the DOE—and that we believe that we can do translational science and help our manufacturing base be more competitive whether it is autos or airplanes or other aspects of the tech sector.

This underlying bill invests in 10 key technology areas that we need to make investments in, and it makes sure that we in the United States of America are saying: We want to see that innovation here. We want to see these in tech hubs and in tech centers. We want our universities to translate that science faster and keep our patents and make sure that we are, obviously, continuing to lead the world in innovation. If we fail to do this, I guarantee you that more jobs are going to go overseas.

American R&D can create the hub of innovation that we would like to see for the future. We have done it many times over. We just need to proceed to make sure that we are aware of the competition that exists around the globe. The United States is up to it; it is capable of competing; and this institution is also capable of making decisions and proceeding by working together. Trust me. That is what people are looking at around the world. Whether they are in Europe or Asia, they want to know whether we know how to get things done.

Let's show them that American innovation is here to stay; that it is the top of the game; and that we can compete with anyone given the right investments in STEM, job training, education, and in taking that ecosystem that is so unique and making an investment in it.

I yield the floor.

NOMINATION OF JULIANNA MICHELLE CHILDS

Mr. DURBIN. Mr. President, this week, the Senate continues its work confirming experienced and fair-minded nominees to the Federal judiciary.

Today, we will vote to confirm Judge Julianna Michelle Childs to the U.S. Court of Appeals for the District of Columbia Circuit. With over 15 years of experience as a judge, Judge Childs is exceptionally qualified to serve on the D.C. Circuit. As a district court judge for the District of South Carolina since 2010, Judge Childs has presided over almost 5,000 civil and criminal matters,