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## Senate

The Senate met at 11 a.m. and was called to order by the Honorable ROGER MARSHALL, a Senator from the State of Kansas.

### PRAYER

The Chaplain, Dr. Barry C. Black, offered the following prayer:

Let us pray.

Eternal God, we thank You for the progress we have made on this journey to reopen the government.

We refuse to give in to the fatigue of despair because You have fueled us with the buoyancy of hope. Lord, You know the hopes of the helpless. You bring justice to the oppressed. You see the troubles we face, for You are our all-wise King. Continue to shower us with Your blessings, instructing our lawmakers with Your wisdom as You use them for Your glory.

And, Lord, bless our veterans.

We pray in Your sovereign Name. Amen.

### PLEDGE OF ALLEGIANCE

The Presiding Officer led the Pledge of Allegiance, as follows:

I pledge allegiance to the Flag of the United States of America, and to the Republic for which it stands, one nation under God, indivisible, with liberty and justice for all.

### APPOINTMENT OF ACTING PRESIDENT PRO TEMPORE

The PRESIDING OFFICER. The clerk will please read a communication to the Senate from the President pro tempore (Mr. GRASSLEY).

The senior assistant legislative clerk read the following letter:

U.S. SENATE,  
PRESIDENT PRO TEMPORE,  
Washington, DC, November 10, 2025.

To the Senate:

Under the provisions of rule I, paragraph 3, of the Standing Rules of the Senate, I hereby appoint the Honorable ROGER MARSHALL, a

Senator from the State of Kansas, to perform the duties of the Chair.

CHUCK GRASSLEY,  
President pro tempore.

Mr. MARSHALL thereupon assumed the Chair as Acting President pro tempore.

### RESERVATION OF LEADER TIME

The ACTING PRESIDENT pro tempore. Under the previous order, the leadership time is reserved.

### CONCLUSION OF MORNING BUSINESS

The ACTING PRESIDENT pro tempore. Morning business is closed.

### LEGISLATIVE SESSION

CONTINUING APPROPRIATIONS AND EXTENSIONS ACT, 2026—Motion to Proceed

The ACTING PRESIDENT pro tempore. Under the previous order, the Senate will resume consideration of the motion to proceed to H.R. 5371, which the clerk will report.

The legislative clerk read as follows: Motion to proceed to Calendar No. 168, H.R. 5371, a bill making continuing appropriations and extensions for fiscal year 2026, and for other purposes.

### RECOGNITION OF THE MAJORITY LEADER

The ACTING PRESIDENT pro tempore. The majority leader is recognized.

### MEASURE PLACED ON THE CALENDAR—S. 3168

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

The ACTING PRESIDENT pro tempore. The clerk will read the bill by title for the second time.

The legislative clerk read as follows:

A bill (S. 3168) to appropriate funds for pay and allowances of Federal employees, contract employees, and members of the Armed Forces during a lapse in appropriations, and for other purposes.

Mr. THUNE. Mr. President, in order to place the bill on the calendar, under the provisions of rule XIV, I would object to further proceeding.

The ACTING PRESIDENT pro tempore. The objection is heard. The bill will be placed on the calendar.

CONTINUING APPROPRIATIONS AND EXTENSIONS ACT, 2026—Motion to Proceed

### GOVERNMENT FUNDING

Mr. THUNE. Mr. President, I am glad to be able to say that eight Democrats joined Republicans last night to take the first step to reopen the government. And in the very near future, we will be voting on a final package, a clean continuing resolution until January 30 and three bipartisan full-year appropriations bills.

These bills are the Military Construction-VA, Agriculture, and Legislative Branch appropriations, 3 of the 12 bills that Congress needs to pass on an annual basis.

What that means is that yearlong funding for SNAP, for WIC, for veterans, for essential farm programs, and for a number of other critical priorities will be met. I said that we will be voting on the final package in the very near future, and I am hoping that will be hours and not days.

We are on the 41st day of this shutdown. Nutrition benefits are in jeopardy, air travel is in an extremely precarious situation. Our staffs and many, many other government workers have been working for nearly 6 weeks without pay. I could spend an hour talking about all the problems we have seen, which have snowballed the longer this shutdown has gone on. But all of us, Democrat and Republican, who voted

• This “bullet” symbol identifies statements or insertions which are not spoken by a Member of the Senate on the floor.



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for last night's bill are well aware of the facts, and I am grateful that the end is in sight.

But I would encourage every Member of this body, Democrat and Republican, pro-bill or anti-bill, not to stand in the way of our being able to deliver the coming relief quickly. The American people have suffered for long enough. Let's not pointlessly drag this bill out. Let's get it done, get it over to the House so that we can get this government open.

As I have emphasized since being elected majority leader last November, I remain deeply committed to advancing full-year appropriations bills through regular order. And we have drafted this continuing resolution to extend to January 30, specifically, to give us more time to get this bipartisan work done.

I look forward to taking up additional appropriations bills on the floor in the near future. After 41 days, I am grateful to be able to say that we are close to getting the government reopened. And again, I ask all of my colleagues, on both sides of the aisle, of both parties, to make it possible to quickly pass this bill.

I yield the floor.

I suggest the absence of a quorum.

The ACTING PRESIDENT pro tempore. The clerk will call the roll.

The bill clerk proceeded to call the roll.

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

The PRESIDING OFFICER (Mr. CURTIS). Without objection, it is so ordered.

The majority whip.

#### GOVERNMENT FUNDING

Mr. BARRASSO. Mr. President, yesterday, the Senate took a major step forward on the path to reopening the government.

The bill before us is simple. It is clean. It is bipartisan. It is a continuing resolution, and it funds the government through January. It is paired with three full-year appropriations bills.

So let me repeat that: appropriations bills for the full next year.

Now, these are bills that have already passed the Senate with bipartisan support—broad bipartisan support, I would add—and they were negotiated on a bipartisan basis with the House.

They are fully funded in terms of veterans' care, and this is critical. Tomorrow is Veterans Day. Our veterans need to know that we stand behind them.

It is also fully funded on food assistance: SNAP and Women, Infants, and Children.

That is what we are debating here on the floor of the U.S. Senate. I believe it is reasonable, it is responsible, and it is ready to go.

Let's remember that this shutdown has caused serious pain to many, many American families. People have stood in line around the block at food banks

all across the country, and that is because 42 million Americans missed their SNAP payments.

Flights were delayed and canceled because control towers are understaffed. People there working are overworked. TSA agents and air traffic controllers have been working for the last 6 weeks without getting paid.

Yesterday, there were 2,300 flight cancellations. It looks like it may be even more than that today. Yesterday was one of the worst travel days in the last 2 years, and today may be worse.

This shutdown has hurt our economy, and it has hurt our country.

The government is finally on the path to reopening. It is the right result. This is what the American people need. They need certainty, and opening the government provides that level of certainty that the American people want, especially heading into the holidays.

I want to thank President Trump. I want to thank my colleagues in the Senate on both sides of the aisle who voted to support that.

The President stood strong when CHUCK SCHUMER stood here and demanded that tens of billions of dollars be sent from the Federal Treasury directly to the bank accounts of health insurance companies. President Trump's leadership protected taxpayers and continues to protect the country.

Let's be clear about what comes next. The Senate is going to use the next few months to pass the additional appropriations bills that will completely fund the government for a full year.

There is a pressing need to strengthen our economy, to secure our border, to invest in our military, to promote fiscal responsibility, and we have to do that after 4 years of high prices and an open border. That is what Republicans in this body and across the hall are fighting for.

Let's be clear. Republicans are making the appropriations process work again. Last year, Senator SCHUMER refused to bring a single appropriations bill to the floor even though the appropriations committees passed out bipartisan, many times unanimous appropriations bills. Yet the minority leader refused to bring them to the floor. That is no way to run the government. That is no way to run the Senate. That is not leadership.

The debate ahead is also about the many failures of the Obama healthcare law known as ObamaCare. This is a debate Republicans welcome. Healthcare in American is broken and is unaffordable, and it broke the day they passed ObamaCare. Costs have exploded. ObamaCare premiums have gone up 221 percent. That is what has happened since the law passed.

You recall President Obama at the time said that premiums for families would go down by \$2,500. It was all wrong. Democrats have no answer for that other than more direct subsidies

directly from the Federal Government directly into the bank accounts of the insurance companies. Republicans believe Americans deserve high-quality, affordable healthcare. Americans haven't gotten that since the day ObamaCare became law.

It is time to reopen the government because Americans have waited and suffered too long.

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

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

#### RECOGNITION OF THE MINORITY LEADER

The Democratic leader is recognized.

#### GOVERNMENT FUNDING

Mr. SCHUMER. Mr. President, the last 41 days have exposed the depths of Donald Trump's cruelty. He shut the government down longer than any President in American history. He took innocent kids, veterans, and Federal workers as hostages—political hostages—all because he refuses to do anything—anything—to fix the healthcare crisis and instead keeps pushing policies that will cut people's coverage even more.

Look no further than Donald Trump's war on SNAP. Last night, the First Circuit reaffirmed what lower courts have already said: Donald Trump cannot take 42 million hungry people as hostages. He cannot withhold the benefits they need for food for their families.

Even now, Donald Trump isn't satisfied. Today—even more cruel—he appealed to the Supreme Court yet again to try to get out of paying full SNAP benefits. The President has done a lot of cruel, nasty, mean things over the years, but going all the way up to the Supreme Court—not once but twice—to ensure kids go hungry is about as cruel a thing as he has ever done. Donald Trump would rather make hungry Americans suffer—make kids suffer, make veterans go hungry, and disabled individuals suffer—than do anything to lower healthcare costs for the American people. The American people will not forget Donald Trump's cruelty and heartlessness over the last 6 weeks.

Let me say something else: The American people have now awoken to Trump's healthcare crisis. Healthcare is once again at the forefront of people's minds. People now see their premiums are about to skyrocket. They are terrified about how they are going to pay for their insurance.

Democrats demanded that we find a way to fix this crisis and quickly, but Republicans have refused to move an inch. So I cannot support the Republican bill that is on the floor because it fails to do anything of substance to fix America's healthcare crisis.

The healthcare crisis is causing millions of families back home sleepless

nights because they don't know how they are going to afford health insurance that is so much needed by their families.

Doing nothing is unacceptable, but that is the choice the Republican side made in obeisance to Donald Trump. Republicans now own this healthcare crisis. They knew it was coming. We wanted to fix it. Republicans said no, and now it is on them.

When people's out-of-pocket costs double or triple very soon, Americans will know Republicans made it happen. When 60-year-old couples start paying \$20,000 a year for health insurance, they will know Republicans made it happen. When 4 million Americans lose insurance, when kids with cancer are priced out of coverage, when families face financial ruin, they will know Republicans made it happen.

The pain will only get worse as more and more people on ACA and with private insurance see their premiums go up and up and up. People out there are struggling. It is harder to make ends meet. Rent is up, groceries are up, people's electricity bills are going up, and now, thanks to Republicans, healthcare costs will spike dramatically.

The past few weeks have exposed with shocking clarity how warped Republicans' priorities truly are. While people's healthcare costs have gone up, Republicans have come across as a party preoccupied with ballrooms, Argentina bailouts, and private jets.

Republicans' breach of trust with the American people is deep and perhaps irreversible. Now that they have failed to do anything to prevent premiums from going up, the anger that Americans feel against Donald Trump and the Republicans is going to get worse.

Republicans had their chance to fix this, and they blew it. Americans will remember Republican intransigence every time they make a sky-high payment on health insurance.

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. DURBIN. 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. DURBIN. Mr. President, after a record government shutdown of 41 days and 14 rollcalls failing to reopen it, the situation was clear. Donald Trump and the Senate Republican leadership were unwilling to do anything to reduce skyrocketing health insurance premiums, a terrible problem facing some 24 million American families.

The shutdown of the government stopped paychecks for thousands of Federal workers, causing real hardship for their families, including our overworked and understaffed air traffic controllers and many other critical members of the Federal workforce.

Food pantries in my State and across the Nation were overwhelmed when

President Trump stopped SNAP food payments to 42 million Americans, one-third of whom were children. Food pantries were being overwhelmed as well by unemployed workers who had been laid off or furloughed because of the government shutdown.

So a group of Senators sat down to try to find a bipartisan resolution. After lengthy negotiations, an agreement was reached with the Republican Senate leader JOHN THUNE.

We will agree to reopen the government until January 30, 2026. During that time, we will pass three bipartisan appropriations bills that will fully fund SNAP, WIC, and all the veterans programs and finish our work on the remaining spending bills for this fiscal year.

The agreement would also reverse the Trump administration's mass firings during the shutdown and prevent future ones through January 30. We credit Senator KAINE of Virginia for this provision.

Leader THUNE has also promised the Democrats an opportunity before mid-December to present a Democratic bill on the floor with proposals to change the law and protect American families from dramatic healthcare premium increases. It is my fervent hope that this ends up being a bipartisan effort. It would be such an achievement of the Senate to finally return to that status.

I have served in the Senate for 29 years, and I have never seen that kind of offer from a Senate majority. During the historic rollcall last night, I walked across the aisle and met with Senator JOHN THUNE, the Republican leader. I told him that I was counting on him to keep his word on this agreement. He assured me he would.

The fate of this effort depends on both the Senate and the House of Representatives. After a 7-week absence, Speaker JOHNSON needs to call his Members back and join us in the hard work that lies ahead.

Many of my friends are unhappy. They think we should have kept our government closed indefinitely to protest the policies of the Trump administration. I share their opinions of this administration but cannot accept a strategy which wages political battle at the expense of my neighbors' paychecks or the food for their children.

I yield the floor.

The PRESIDING OFFICER. The Senator from Colorado.

Mr. BENNET. Mr. President, I appreciate the opportunity to come to address my colleagues today in the Senate.

During the course of this shutdown—what has now become the longest shutdown in American history—there are a lot of people around the country wondering about what has been at stake in this debate and in this argument. And I think, with every day that has gone by, it has become clearer and clearer what is at stake.

I have heard my Republican colleagues, including the leader of the Re-

publican Party in the Senate, come to the floor to say, over and over again, that not a single Republican in this Chamber, not a single Republican in the United States Congress, voted for the Affordable Care Act when we passed it in 2010.

And for them, that is a badge of honor. That is a badge of honor that they recall from the last extensive debate we had around here about healthcare.

I deeply regret the fact that they are so proud of not having voted for the Affordable Care Act. It is true that there was not a single Republican in the Congress that voted for that bill.

And that bill was far from perfect—I will admit that. Even at the time, I was leading the fight for a public option to be included as part of the Affordable Care Act because I thought it would be a very important part of constraining costs for the American people in our healthcare system. I will say more about that in a minute.

Mr. President, I ask unanimous consent that a letter dated February 16, 2010, to then-Leader Harry Reid about the public health insurance option be printed in the RECORD.

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

CONGRESS OF THE UNITED STATES,  
Washington, DC, February 16, 2010.

Hon. HARRY REID,  
United States Senate Majority Leader,  
Washington, DC.

DEAR LEADER REID: We respectfully ask that you bring for a vote before the full Senate a public health insurance option under budget reconciliation rules.

There are four fundamental reasons why we support this approach—its potential for billions of dollars in cost savings; the growing need to increase competition and lower costs for the consumer; the history of using reconciliation for significant pieces of health care legislation; and the continued public support for a public option.

A PUBLIC OPTION IS AN IMPORTANT TOOL FOR  
RESTORING FISCAL DISCIPLINE

As Democrats, we pledged that the Senate health care reform package would address skyrocketing health care costs and relieve overburdened American families and small businesses from annual double-digit health care cost increases. And that it would do so without adding a dime to the national debt.

The non-partisan Congressional Budget Office (CBO) determined that the Senate health reform bill is actually better than deficit neutral. It would reduce the deficit by over \$130 billion in the first ten years and up to \$1 trillion in the first 20 years.

These cost savings are an important start. But a strong public option can be the centerpiece of an even better package of cost saving measures. CBO estimated that various public option proposals in the House save at least \$25 billion. Even \$1 billion in savings would qualify it for consideration under reconciliation.

Put simply, including a strong public option is one of the best, most fiscally responsible ways to reform our health insurance system.

A PUBLIC OPTION WOULD PROVIDE AMERICANS WITH A LOW-COST ALTERNATIVE AND IMPROVE MARKET COMPETITIVENESS

A strong public option would create better competition in our health insurance markets. Many Americans have no or little real

choice of health insurance provider. Far too often, it's "take it or leave it" for families and small businesses. This lack of competition drives up costs and leaves private health insurance companies with little incentive to provide quality customer service.

A recent Health Care for America Now report on private insurance companies found that the largest five for-profit health insurance providers made \$12 billion in profits last year, yet they actually dropped 2.7 million people from coverage. Private insurance—by gouging the public even during a severe economic recession—has shown it cannot function in the public's interest without a public alternative. Americans have nowhere to turn. That is not healthy market competition, and it is not good for the public.

If families or individuals like their current coverage through a private insurance company, then they can keep that coverage. And in some markets where consumers have many alternatives, a public option may be less necessary. But many local markets have broken down, with only one or two insurance providers available to consumers. Each and every health insurance market should have real choices for consumers.

THERE IS A HISTORY OF USING RECONCILIATION FOR SIGNIFICANT PIECES OF HEALTH CARE LEGISLATION

There is substantial Senate precedent for using reconciliation to enact important health care policies. The Children's Health Insurance Program (CHIP), Medicare Advantage, and the *Consolidated Omnibus Budget Reconciliation Act of 1985* (COBRA), which actually contains the term 'reconciliation' in its title, were all enacted under reconciliation.

The American Enterprise Institute's Norman Ornstein and Brookings' Thomas Mann and Molly Reynolds jointly wrote, "Are Democrats making an egregious power grab by sidestepping the filibuster? Hardly." They continued that the precedent for using reconciliation to enact major policy changes is "much more extensive . . . than Senate Republicans are willing to admit these days."

THERE IS STRONG PUBLIC SUPPORT FOR A PUBLIC OPTION, ACROSS PARTY LINES

The overwhelming majority of Americans want a public option. The latest New York Times poll on this issue, in December, shows that despite the attacks of recent months Americans support the public option 59% to 29%. Support includes 80% of Democrats, 59% of Independents, and even 33% of Republicans.

Much of the public identifies a public option as the key component of health care reform—and as the best thing we can do to stand up for regular people against big insurance companies. In fact, overall support for health care reform declined steadily as the public option was removed from reform legislation.

Although we strongly support the important reforms made by the Senate-passed health reform package, including a strong public option would improve both its substance and the public's perception of it. The Senate has an obligation to reform our unworkable health insurance market—both to reduce costs and to give consumers more choices. A strong public option is the best way to deliver on both of these goals, and we urge its consideration under reconciliation rules.

Mr. BENNET. In the end, it was not included. In the end, we couldn't overcome the objections of the special interests who wanted to deny the American people that choice. But it was an important case to be made, and we made that case.

But I voted in the end for the Affordable Care Act even though the public option was left out of it because it did some really important things for the healthcare system in America. Most of those had to do with making sure that the insurance companies couldn't throw you off your insurance just because you got sick; that cancer and other conditions could no longer be a preexisting condition; that you could still get healthcare even if you had the misfortune, as I have had, of having cancer; that there would be no lifetime cap that would prevent you from being able to provide healthcare or mental health care for your children or for your family just because things had gotten expensive over a period of time.

These were really critical decisions that were made as part of that bill—in addition to the expansion of Medicaid across the country—to be able to ensure that more working people had the chance to be able to afford healthcare, which brings to mind one of the really unusual—sort of the unusual context in which we have had healthcare debates in America, which is that we are the only rich country in the world, we are the only industrialized country among all industrialized countries where healthcare is not a right of citizenship for everyone who lives in that country.

Notwithstanding the fact that we have less access to healthcare than any other industrialized country in the world, it costs twice as much in the United States. It costs twice as much for the Federal Government. It costs twice as much for our society. Most important, it costs twice as much for the people that we represent in our various States, including in the State of Colorado.

People in Colorado, as we meet here, are struggling with the cost of housing, the cost of food, the cost of President Trump's uncertain and unpredictable tariff policy. But they are also continuing to struggle with the cost of healthcare because we are spending twice what any other industrialized country is spending to get a worse result.

I know the President knows this. The President of the Senate knows this because he is a doctor. I have heard him talk about the condition of our healthcare system.

Today in the United States, our life expectancy is 6 years shorter than it is in any of those industrialized countries. What greater indictment could there be of this system? In the 1970s, we had the same life expectancy as the rest of these countries. In fact, we were in the middle. In the years since, we have fallen further and further and further behind as we have spent more and more and more money because the system we have is so shot through with benefits for special interests, among other things, and a complete lack of transparency, which is a fancy way of saying that literally nobody has any idea what anything costs in our healthcare system.

I know the Presiding Officer agrees with that. You can't tell what anything costs when you show up to fill a prescription, when you are in the emergency room. We worked together on the surprise billing issue, which is an important part of this. If you are a senior that is trying to get your prescriptions filled, you go from one pharmacy to the next to the next.

I will never forget as long as I serve in public office and probably for my lifetime the conversation I had with senior citizens in Pueblo where they basically were telling me that their entire retirement was spent fighting to get prescriptions filled that their doctors had prescribed them. Seniors in other industrialized countries don't spend their retirements doing that. Only in the richest country in the world do seniors have to do that, and that is because a lack of transparency, a lack of clarity is built into our healthcare system from top to bottom.

But we took some important steps in the Affordable Care Act. I wish it had included a public option. It didn't. I think that the rate of rise of our healthcare inflation would have been a lot less. By the way, that is what the people that have looked at that bill and scored that bill over the years have said. We have been fighting for it now for a decade and a half. They said that it would actually save the government money because it would lower healthcare costs; it would introduce some competition into our insurance market.

I will say this to the Presiding Officer. He will probably be amused by it. This is the one place where I really am a Bolshevik. I believe in universal healthcare for all Americans. I think we should provide that to people in this country as a right. There is no reason not to do it in the richest country in the world, especially if we can save half of the cost of healthcare that we are providing now.

Families all over my State, all over Colorado, are fighting to get their kid the mental health care they need, are fighting to get their parents the prescriptions they have been prescribed, are fighting to hold on to their own health insurance, because that also has become less and less affordable over the years. That is a fight that no one else in the industrialized world has to have.

I think it is important to point out that most of the people I am talking about—almost all of the people I am talking about are working for a living in this country and still can't afford healthcare, still can't afford the peace of mind that they know that if their kid breaks their leg on a hike or breaks their leg skiing or needs to have the benefit of a mental health counselor, that that is something our safety net provides. Healthcare should be a right. It is a right. And whether you get it or not shouldn't be determined by how wealthy you are or where you live.

I think, given the rhetoric I hear out here sometimes about makers and takers and all that other stuff, it is important to point out that almost all the people I am talking about are working or taking care of children or are retired.

We should have a universal healthcare system in this country, but in the meantime, we shouldn't be making matters worse, which is why this debate is so crazy.

When we passed the Affordable Care Act without a single vote from the Republican Party in the House or the Senate, they said that they were going to make President Obama a one-term President. They said that I was going to lose my Senate seat. In fact, I was asked on national television whether I would lose my Senate seat as a result of my vote on the healthcare bill, and I said: If that is the cost of being here for that period of time, it is worth it. I am happy to lose based on that vote.

They ran ad after ad after ad during that campaign attacking me for being the 60th vote for the Affordable Care Act. And because I survived and a couple other Senators barely survived, we were able to preserve that bill, and 30 million people who would have lost their health insurance in America didn't lose their health insurance.

Then the efforts in the House began to repeal the Affordable Care Act. They voted, I think—I lost count—I think it was 70 times to repeal the Affordable Care Act in the House of Representatives—at least 70 times. They never were able to do it. And the longer it was there, the more people came to see the benefits of the insurance protection, came to see the benefits of the expansion in Medicaid, came to see the benefits of at least having a little bit of comfort that they couldn't just throw you off your insurance because they felt like it.

Now we have found ourselves in a debate related to the tax credits that so many Americans rely on to make insurance just a little bit more affordable. I wouldn't say affordable. I would say a little bit more affordable. I would say barely affordable but somewhat more affordable.

At a moment when grocery prices are what they are, at a moment when rent is what it is, at a moment when we are dealing with the incredible uncertainty these tariffs are causing, it would seem the least we could do is not make matters worse. The least we could do is extend the tax credit so it is a little bit easier for people to buy insurance for themselves and for their families. But just like with the passage of the Affordable Care Act, when not a single Republican supported it; just like when they voted 70 times in the House of Representatives—70 times—to repeal the Affordable Care Act, during this period, this episode, this shutdown, the longest in American history, the Republicans have voted 15 times to take away those benefits from the American people that they are relying on just to make insurance a little bit affordable.

We have taken the position that we shouldn't make matters worse, and that is why I voted again against the budget that has been proposed by President Trump and the Republicans, because they refuse to extend the tax credits. They refuse to make things just a little bit better for the American people.

I can't say I am surprised by the position. Who could be surprised after a vote on the Affordable Care Act where nobody joined it; all those years of voting to repeal it; wanting to make President Obama, they said, a one-term President; and now the vote day after day after day to not provide the American people the benefit of those tax credits.

Before this debate closes, I just want to say again that the current system is in dire need of help.

The American people are hanging on by their fingertips when it comes to the cost and availability of healthcare. There is no rich country in the world that doesn't have a universal system of healthcare. There is no rich country in the world that doesn't routinely supply access to doctors and primary care, access to mental health care for families and for kids, prescription drugs that don't cost an arm and a leg. It is not a pain point for those people in the different phases of their lives, much less a pain point every single day, which it is for the people that I represent in Colorado.

Apparently, President Trump is going to get his way, and those tax credits are not going to be extended by the majority here. And the cost of health insurance in Colorado is going to increase by 200 percent for some people, 300 percent for some people, 400 percent for people that are living in rural areas in my State. That is thousands and thousands of dollars to a typical family that just doesn't have that kind of money.

I just want to remind everybody in this Chamber that when this debate is done, we still have a very important project that we need to be engaged in with the American people, and that is to be able to provide a healthcare system like other wealthy and industrialized countries have provided—where people can count on their healthcare; where they know it is not going to cost them an arm and a leg; where they know, in the course of their lifetime, there are other things they can worry about, like the cost of their rent and the cost of food. But the one thing we are going to do is take care of this problem, just as countries all over the world have taken care of it for their citizens.

I wish I could say that the politics around healthcare have gotten better over the years that I have been here. They really haven't. But I think that the debate that we have had in this moment is going to serve to clarify who is fighting to try to make the system better for the American people and who is not.

I guarantee you this, as long as we have President Trump in the White House and a majority of Republicans in this Chamber, we will never have political leadership that is fighting for universal healthcare, that is fighting for a public option that can be available to every single family in America.

By the way, that is my proposal. It relies on everybody in America to make the best choice for their family. It is not something that would be imposed from here. It would be the chance for every family to say: You know what? I will stay with the private insurance I have or, actually, I would rather be on a system that is run by Medicare, where I know I am going to have access to mental health care and healthcare for my family in a predictable way.

I can see my colleague from Massachusetts. I will close by saying that my heart especially aches for young people across this country, the people the age of my own daughters.

I had a young woman ask me the other day, a recent graduate of Western State in Gunnison, CO—she said: I am coming off my parents' insurance after I am 26.

You will remember that we put that in the healthcare bill. Before that, there was no opportunity for people to stay on their parents' insurance. We did it. We said you get to stay on until you are 26.

She said: Senator, what am I supposed to do, take two or three jobs to pay for my health insurance when I have to come off my parents' insurance?

I said: That is exactly the right question. That is a question that 26-, 27-, and 28-year-olds are not having to ask in any other industrialized country in the world. Only in the United States of America are we running a system where young people in their twenties have to decide between health insurance and their rent, or health insurance and food, or health insurance and the ability to put some money away to save for a house.

We should change that.

I believe strongly that if we ever get to the point where we are expanding Medicare in this country, we should do it for the younger kids that are in their twenties first because they have done absolutely nothing to design the system that they are inheriting.

I yield the floor.

The PRESIDING OFFICER (Mr. CASIDY). The Senator from Massachusetts.

Mr. MARKEY. Mr. President, our dedicated Federal workers deserve to get paid, and I am glad this deal means that the government will reopen, that public servants will be returning to work, and that they will receive their paychecks, including backpay.

I am also pleased that this deal will prevent Donald Trump from further delaying SNAP benefits for hungry children, senior citizens, and families. Using hungry people as political pawns,

which is what Donald Trump has been doing, is disgusting.

But this legislation does nothing—nothing—concrete to lower costs or

protect healthcare for millions of Americans from MAGA Republican attacks. There are 22 million Americans who are going to see dramatic in-

creases in their healthcare costs at the end of this year, 22 million Americans who are going to be very concerned about the healthcare of their families.

angry. They want to know who is on their side, and they are going to remember your vote. They are going to remember your vote if you do not solve this problem.

Thanksgiving is going to be the worst Thanksgiving ever for millions of families in their knowing that they are going to lose their health insurance, and the Republicans can do something about it. Unless and until they do so, then we are about to hit a healthcare tragedy that could have been avoidable and that the Republicans have, in fact, created.

This is a man-made crisis, and that man is the President of the United States, and the Republicans here on the floor of the Senate are following him blindly in a way that is going to result in harm to 22 million Americans and their families. So this is the moment. This is the time. This is the place. This is where people should be standing up to fight for those people.

Health is the first wealth. Health is the most important wealth. Without your health, you have nothing. You have nothing. Everything else is built on health—everything—and the Republicans are taking away that healthcare from 22 million Americans.

This is not the way to send families into Thanksgiving and Christmas. This is not the way we should be treating people. We are the wealthiest country in the history of the world. Yale University has made it very clear that 50,000 people additionally are going to die per year if all of Trump's healthcare cuts go into place. That is 500,000 people dying over the next 10 years if these healthcare premiums—Medicaid—are slashed. That is on this body. That is on this Senate. That is on the Republican leadership.

All I can say to you is that this is a mistake; it is a historic mistake; it is cruel; it is wrong; it is not what we should be doing to those who are the most vulnerable, to those who are the most in need in our country; and that is what the Republicans are about to perpetrate upon this country.

We are better than this. You can't have trillions of dollars in tax breaks for the wealthiest and then say we don't have enough money for those who are the sickest. If you have room for a tax break only after you have taken care of the sickest people—the people most in need of healthcare in our society—that is when you have room for tax breaks for billionaires. The Republicans are doing just the opposite: First, tax breaks for billionaires; then we will see what is left over.

"Oh," they say. "We can't afford healthcare for 22 million Americans. We can't afford to take care of their families because we don't have enough money."

Why don't you have enough money? Because you gave the tax breaks to billionaires. You gave the tax breaks to billionaires. That is why you don't have enough money.

And who are you going to take it out on? Are you going to say, all of a sud-

den, with your green eyeshades, that you are really concerned about the Federal budget deficit? And are you going to take it out upon those who are the least healthy? to those most in need of help in our society? No. We are better than that.

So this is a historic mistake, but just remember that Republicans have always harbored an ancient animosity toward Social Security and Medicare and Medicaid and the Affordable Care Act. They voted against all of those programs. Now, with Donald Trump, they have the ability to gut them, and that is what they are doing. That is what they are doing. When they have a chance to stand up and say, "No. Let's be reasonable. Let's keep the healthcare subsidies, which are most needed," they are just walking away right now.

Donald Trump operates under "The Godfather, Part 1" rules. He gives them offers they can't refuse. And we saw that with Senators who tried to stand up to say: No. The Medicaid cuts are too deep. The Affordable Care Act cuts are too deep.

Trump just called them and said: Your career is over. You will not be a Senator again.

So now we are seeing the remaining Senators who are here who are Republicans, and they are just saying: Whatever you want, Mr. Trump, whatever Russell Vought wants at OMB, and whatever Stephen Miller wants, we will do. We are not going to have a negotiation. We are not going to sit down.

Before they cut the Medicaid and the Medicare programs back in July, did they negotiate with us? No, they did not. They refused to negotiate with Democrats at all. That is who they are. They saw their one opportunity to slash it once and for all.

All I can say is that we are in an incredible moment. The Republican House Members still are not back in Washington. They have been in a 6-week witness protection program. They refuse to come back to Washington. They refuse to sit down. They refuse to negotiate. So we are witnessing Robin Hood in reverse. We are seeing money taken from the poorest and given to the richest—that is what this is all about—and what they are taking from the poorest and the middle class is their healthcare. It is their protection.

So, from my perspective, this is a mistake—it is a historic mistake—and it is a mistake that will come back to haunt the Republican Party at the ballot box next year.

With that, I yield the floor.

The PRESIDING OFFICER (Mr. RICKETTS). The Senator from Louisiana.

Mr. CASSIDY. Mr. President, I have been coming to the floor to speak about how we can go forward in a way that actually lowers the cost of having health insurance for those who are on the exchanges and begin to build a future where we lower the cost of health insurance and healthcare for everybody

whether you are on an ObamaCare exchange or have employer-sponsored insurance or you name it. We know there is going to be a vote—as part of this agreement to open the government—on what to do about the exchanges; so we need to be thinking and talking about the solutions that are out there that benefit the American people.

Of course, the issue underlying it is that people cannot afford their health insurance. They cannot afford their healthcare. Those are two different things, by the way. The cost of healthcare is what dictates, theoretically, at least, the price of health insurance. If you lower the cost of healthcare, then you lower the price of health insurance. I saw this as a physician when I was practicing in a hospital for the uninsured for 20 years—I should say the uninsured and the poorly insured. There were middle-income people who could not afford their insurance and/or could not afford their healthcare.

So how do we get out of it? Well, first, it is complicated. We have got to be creative, and we have got to abandon set positions. Sometimes we are in this Chamber, and all we do is stick to our guns, and if the other party suggests something, we automatically reject it. We have got to move beyond that, not as, "Oh, my gosh. If the other side proposes it, I reject it," but rather as, "Wait a second. Let's listen. Is there a solution here that can benefit the American people?"

ObamaCare tried to make and has tried to make healthcare insurance affordable by just throwing billions at it. The problem with that is that it doesn't make healthcare affordable. It just makes the health insurance premium less expensive for those who are on the exchanges. This actually drives up the cost of insurance for some and does nothing about the underlying healthcare costs driving up the premiums for others.

So what is my proposal? I propose, instead of paying insurance companies to manage more of our billions, why don't we trust the American people to manage their own resources or to manage their own care with something which I call a prefunded Federal flexible spending account?

Let's first talk about the enhanced premium tax credit, which is at the center of this discussion. It is just a primer. Let's get the basics.

There are two types of premium tax credits used to fund insurance for those who are on the ObamaCare exchanges. One is the baseline tax credit, in the original ObamaCare law, which helps pay for the premiums for those who earn less than 400 percent of the Federal poverty level, but that didn't control costs. So, during the COVID epidemic, the Biden administration put in something called the enhanced premium tax credit that provides some additional benefits for those less than 400 percent of Federal poverty, but it gave additional benefits for those above 400



percent of Federal poverty, if you will, acknowledging that ObamaCare had not controlled healthcare costs, and premiums on the exchanges for those above 400 percent had become unaffordable.

Let's be clear: The discussion we are having now is not about the baseline premium tax credits; it is about the enhanced premium tax credits, which started under the Biden administration.

So it begs the question: Why were enhanced premium tax credits necessary? Well, as we have said, the cost of healthcare has continued to rise. You can argue, if you are going to an insurance company and you are saying, "We are going to give you more money if healthcare costs more," that they do not have the incentive to help control those healthcare costs.

Now, I am not here to bash insurance companies. They are essential to our society. So I will just put that out there. But if you have the choice of giving the money to the patient for her to manage it or giving it to the insurance company, I think we should give it to the patient.

So the question is: Can we put in programs that lower the cost of healthcare? How long will it be before it takes effect, and what do we do in the interim?

Well, it is too soon this coming year to put in programs to lower the costs of healthcare, but it is not too soon to put in programs that empower patients to manage their costs and give them the money, as opposed to giving it to the health insurance companies, but to do that, we have got to think differently.

So how do we lower costs for the coming year for the individual who is on the exchanges? It is important to realize that the total cost of having health insurance is not just the premium but that it includes the deductible and the copay. So if you can help with the deductible and the copay, that is as effective, or even more effective, than helping with the premiums.

So what I am proposing is something which actually helps the patient become a wise consumer of healthcare, helping her with the premiums and the copays, working with the health insurance policy but in a way which lowers their cost.

Let me be clear: This is not the official Republican position. President Trump has endorsed the concept, but it is not, say, for Leader THUNE. But I am the chairman of the Health, Education, Labor, and Pensions Committee, which has jurisdiction over this, and we will be having hearings in the near future to address this. And my motivation is as a Senator and as a doctor who wants to make healthcare more affordable for all Americans.

Let's discuss what I am calling a prefunded flexible spending account. First, here is what we currently have: an enhanced premium tax credit, which is going to take \$26 billion next year

and give it to insurance companies that tell the patient what she can buy and what she cannot buy.

I have a typo here. I fixed it yesterday, but I have got to fix it once more.

Twenty percent of the money—20 percent of the \$26 billion going out the door to help pay for insurance premiums—actually will go for profits and overhead of the insurance company. So let me just change it right here. Again, I had a typo yesterday, and I have a typo today.

Twenty percent of the money we are giving to the insurance companies under the enhanced premium tax credit goes for profit and it goes for administrative overhead. Only 80 percent goes to pay for the insurance premium to pay for healthcare costs for the person who is a recipient.

Let's speak of what I am describing, the prefunded flexible spending account—prefunded because you take the enhanced premium tax credit, instead of giving it to the insurance company, you give it to the individual and her family through a flexible spending account—a flexible spending account which millions of Americans already have.

She can use this money to pay for prescription drugs, for dental work, for medical care, eyeglasses, orthodontia—much more flexibility than through a traditional insurance company.

The key thing is, whereas, if we give this money to the insurance company, 20 percent goes for profit and overhead. If we give it to the patient, 100 percent goes to healthcare that she needs. One hundred percent goes to her family's healthcare needs—100 percent, not 80 percent. This is better value for their healthcare dollar.

Now, who would get it? Every eligible American citizen on the exchange would receive a prefunded flexible spending account equal in value to the enhanced premium tax credit they would have received had the money gone to their insurance company. It doesn't pay for insurance premiums, but it pays for the actual healthcare that they actually need.

I am pleased to say President Trump has tweeted in support of the concept. Of course, I am pleased to be aligned with the President on this. He says he recommends that instead of giving hundreds of billions of dollars—and this is President Trump's rhetoric—to money-sucking insurance companies, the money should "BE SENT DIRECTLY TO THE PEOPLE SO THEY CAN PURCHASE THEIR OWN, MUCH BETTER HEALTHCARE."

Notice the caps. That is a President Trump tweet.

I am pleased to be aligned with the President. But for my Democratic colleagues who want a guarantee that whatever we pass will get a vote on the floor of the House of Representatives, this is effectively a guarantee that if we pass a program like this, it can get a vote on the floor of the House of Representatives. If the President asks

Speaker MIKE JOHNSON to bring it up for a vote, Speaker MIKE JOHNSON will.

Just imagine, my Democratic colleagues, how do we get something that 100 percent of the money goes for real healthcare; it doesn't go to insurance companies where 20 percent goes for profit and overhead; it is a system already used by millions of Americans, and, may I say, it all but guarantees to get a vote on the floor of the House of Representatives? This tweet gives them that assurance.

Some immediately begin to criticize the President, assuming that he was going to take all the money going for health insurance premiums and put it in one of these flexible spending accounts. That is not true. Go back to what I said earlier. We only are talking about the enhanced premium tax credits which would prefund this flexible spending account. We are not talking about—we are not talking about—the baseline premium tax credits that are part of the original ObamaCare law.

By the way, Republicans want people to have coverage. This doctor who used to take care of the uninsured wants people to have coverage.

The more I discuss this—and this is the fourth or fifth time I have given this talk—I am pleased to say that some of my Democratic colleagues are saying: Hey, we can talk about it. I am not quite there yet, but I see the wisdom of it. I am willing to move forward with it.

And I thank them for that. I want everybody in the Senate to put aside their prejudice, which sometimes is that if one side proposes it, it must be wrong.

I will say to my Democratic colleagues, what I am proposing with the prefunded flexible spending account is actually more closely aligned with how the original authors of the Affordable Care Act wanted that legislation to be implemented.

I find it ironic that some of my Democratic colleagues are rejecting something which is closer to the original bill. But I think they are rejecting it, in part, because of misunderstanding, lack of knowledge, and maybe for some because a Republican is proposing it.

Put that trench warfare mentality behind you. Think about, could this be better for the American people? Can this accomplish the goal of making the possession of health insurance and paying for my family's healthcare more affordable?

For those who think this is too complicated, let me say that 72 percent of Americans who get their health insurance through a Federal employer, a State employer, a local employer—72 percent of us have a flexible spending account. My family and I have a flexible spending account.

Forty-seven percent of Americans who are in private insurance have access to a flexible spending account. It doesn't mean they take it, but it just means they have access.



Millions of Americans are already using flexible spending accounts. What I am proposing, let's just give the same option to people who are on the individual exchanges.

By the way, let me just make the point, my wife and I, our family, we are on the ObamaCare Small Business Exchange. Everybody in Congress is on an ObamaCare Small Business Exchange. I am getting my flexible spending account through an exchange. All we are saying is open up the window just a little bit to allow those who are on the individual exchanges to likewise access that which I am getting through the Small Business Exchange.

This merely extends what is current law for some people on their health plan to extend it to those who are within the individual exchange.

The Federal Government can take the laws, the tools, the vendors, the Department it is already using and implement—implement—a prefunded flexible spending account for those on the individual exchange.

Why is that important? Because that can happen for plan year 2026. I am asking: What are we going to do about the people next year? This is about next year. How can we help those folks signing up for insurance right now for 2026? This brings them benefit right now for 2026.

Let me now kind of go through the differences between the enhanced premium tax credit and a federally funded flexible spending account. This is kind of a money chart, if you will. If you are with me in concept that maybe this could work, hopefully—hopefully—I can convince people who might be watching, my Democratic colleagues who might be listening to give power to the patients instead of giving enhanced premium tax credits to insurance companies.

OK. Who gets the money? Under the enhanced premium tax credit, the insurance company gets the money, and 20 percent of it goes for overhead and for profit. Under the prefunded flexible spending account, a patient and the family controls the money.

What can it be used for? The enhanced premium tax credit, it can be used for insurance premiums. Under the prefunded flexible spending account, it can be used for real care, if you will: dental visits, physician visits, eyeglasses, prescriptions, orthodontia. It has more flexibility than the traditional insurance policy has.

Who makes the decision? Well, the golden rule: He who has the gold makes the rule. Under the enhanced premium tax credit going to insurance companies, the insurance company makes the decision. They decide what care you have, where you get it, and how much you are charged.

When you have a prefunded flexible spending account, the patient makes the difference. The patient makes the decision. She decides where the dollars go. I always use the feminine because women make 95 percent of healthcare

decisions for themselves, their family, for their spouse, for their boyfriend. I always chuckle—guys are the stupidest people in the world when it comes to their healthcare, maybe a couple of other things. But the people who care about this are typically women, and so I speak to her.

Does it lower cost? Under the enhanced premium tax credit, there is really minimal incentive for the insurance company to attempt to lower costs; so, therefore, as costs go up, so do premiums. On the other hand, under a prefunded flexible spending account, you empower patients to shop, which drives competition.

One example: I was once stopped on the street by someone who had seen one of my talks. She goes: You talked about using cash or using my flexible spending account or using my health savings account to buy something. There was an MRI order for my son's shoulder. My deductible was \$5,000. The MRI was going to cost \$2,000. I was going to have to pay \$2,000 for the MRI of my son's shoulder.

I said: Wait, do you have a cash price? Well, your cash price is \$600. If you don't want to go to the insurance company, your cash price is \$600.

Now, the typical ObamaCare plan has a deductible anywhere from \$3,000 to \$6,800. So if we are talking about an MRI costing \$2,000, you are still within the deductible. If you have a flexible spending account, you are not paying for that out of your pocket, you are paying for it with your flexible spending account. And you can ask: What if I give you cash instead, and they will give you the lower price, not the higher price if there is a lower cash price. And there often is.

This turns that woman, that family, into an informed consumer, and that begins to drive down the costs.

This is the essence of giving power to the patients. The patient picks the best deal for her health and the best deal for her family's pocketbook. The prefunded, flexible spending account doesn't treat someone like a dependent of the Federal Government; it treats them as somebody who can make wise decisions for themselves and empowers them to make wiser decisions than the insurance company itself can.

Now, some would ask, how much money does it cost? The first year, depending on how we structure it, it might cost just as much as our enhanced premium tax credits. Why? Because we are going to take the amount of money that would go for the enhanced premium tax credit and put it into a prefunded, flexible spending account.

My Democratic colleagues should like that. They should say: Wait a second. It is still getting the same value—in fact, I would argue, better value because when you give it to the insurance company, 20 percent goes to profit and overhead, and when you give it to the patient, 100 percent goes to real care. But the cost the first year will be about the same.

But I will repeat: The difference is where the money goes. Because it goes 100 percent for real care, there is more value for every Federal dollar.

Once more, it is in the family's vested financial interest to purchase wisely, and that begins to drive down healthcare costs. That, coupled with other reforms in year 2 of this program—in year 2—would begin to reflect itself in lower premiums.

To conclude, here is the choice before us: We can keep paying insurance companies to hide the cost of higher premiums behind confusing bills, rising premiums, and a system which actually raises costs for many or we can give the patient the tool and trust her to pay for her care directly at fair prices, with transparency.

If we will, it puts patients before insurance companies, it encourages competition, it encourages and rewards smart choices, and it begins to make healthcare truly affordable—not by inflating subsidies but by unleashing the power of the consumer.

Let's stop writing blank checks to bureaucracies and insurance companies. Let's invest in our fellow Americans—if you will, invest in you.

This is going to be a little risky. We are doing something different. You will be saying: Oh, I am not just going to be a Democrat. I am not just going to be a Republican. I actually want to try to come together to find a solution to benefit all Americans.

Imagine that, Congress putting partisan politics behind us to come up with a creative solution that actually benefits Americans—a little bit out of our comfort zone. It is what we should be doing every day. I call upon us to do that today.

We have to be willing to take the risk to solve the problem, not be afraid to do something different. We have to be willing to tackle complex problems, not retreat—not retreat—to our trench, which is labeled "Republican" or "Democrat," and be afraid to come out to find a creative solution.

I am a Republican, but more than that, I am a doctor who for 20 years tried to care for those who could not afford their healthcare or their health insurance. I invite my 99 colleagues to join me in trying to find affordable healthcare and affordable insurance for our fellow Americans.

Let's be creative. Let's do it. And let's not just reject the proposal because maybe my side or your side proposed it. Let's fix healthcare. Let's give patients the power.

I yield the floor.

(Mr. HUSTED assumed the Chair.)

The PRESIDING OFFICER (Mr. BUDD). The Senator from North Carolina.

RECOGNIZING FEDERAL WORKERS

Mr. TILLIS. Mr. President, we are getting encouraging signs that we may be having some votes tonight. I hope that proves to be true and the Senate does its part to get out of the shutdown.

I was thinking, though, I have been telling a lot of staff around here and everybody else: I apologize for us not getting our work done.

I think a lot of people don't realize how many people around here haven't been paid for 41 days. Do you know who they are? Everybody you can see in this room and every one of your staff members and everybody else who has been doing the hard work, showing up.

I was thinking yesterday, with all the cars in the driveway, those young people that are coming in to pick up their Members and take them back to their apartments, condos, wherever they live here—those kids are doing that on a weekend and not getting paid either.

I also think that getting out of the shutdown and getting the tens of millions of people that are hanging in the lurch across the country—it is just a good thing.

It is a shame we got here, but I want to thank the Members on both sides of the aisle that have finally decided that we need to do our work here, pass a continuing resolution, pass actual regular order bills, and prove this place can work.

The work is not done. We have about 90 days now to fix the other part that we couldn't get agreement on. Let's make sure we start doing the work now so that every Capitol Police officer, every Sergeant at Arms, every Senate staff, and all the people down on the dais who are working extra long hours actually get paid for the hard work they do.

On behalf of the other Members, I thank you.

The PRESIDING OFFICER (Mr. HUSTED). The Senator from Oregon.

Mr. MERKLEY. Mr. President, during the course of tonight's debate, we will be voting on whether to table an item in the amendment lineup in order to submit an amendment that would ban pocket rescissions.

Well, that is a fancy name. What does a pocket rescission mean? It means the President can steal the power of the purse from Congress, which is assigned to Congress in the Constitution, by submitting a proposal to undo spending for a program in the last 45 days of the fiscal year.

And then, because under our rules there is 45 days to consider it, as a grace period, even though Congress never votes affirmatively in support of this proposal, the clock runs out and the funding for the program dies. It is kind of like the clock running out on midnight on Cinderella's stagecoach, and, suddenly, it is a pumpkin.

In this case, it is the funding for some key program in healthcare, in housing, or in education. Or maybe it is an investment in infrastructure. Maybe it is something that creates good-paying jobs. Maybe it is the research that keeps our economy humming far into the future. Maybe it is energy policy. But one person—the President—says he doesn't like that

program and decides to kill it by submitting a proposal to kill it in the last 45 days, and the clock runs out before Congress can vote. And then, even without Congress voting, the program dies.

This is an outright violation of the power of the purse assigned in the Constitution to Congress—to us. So we have a bipartisan responsibility to defend our congressional power—our congressional spending power.

Let's consider the difference between a democracy and an authoritarian government. In a democracy, you have folks who are elected from every corner of the country. They come together with their different life experiences. They come together with their different insights. They come together understanding that the needs in one part of the country are different than another. And they create spending programs and spending levels appropriate to address the challenges in every corner of the Nation. That is called a democracy.

Well, what about an authoritarian government? What does that look like? That is one person, a Chief Executive, who issues fiats and kills programs, and says things like: I am ending that grant program because it is not in alignment with my priorities. I am killing that program because it is not in alignment with my priorities.

That is an authoritarian government, and that is what a "pocket recession" is—an authoritarian killing programs when the Constitution gives that power to Congress, not the Executive.

So later on, I will ask all of us to stand up and defend our Constitution. I do hope that Members on both sides of the aisle will actually proceed to give that defense to the vision of a democracy, rather than granting authoritarian power to an authoritarian tyrant named Donald Trump.

Thank you, Mr. President.

The PRESIDING OFFICER. The majority leader.

#### ORDER OF PROCEDURE

Mr. THUNE. Mr. President, I ask unanimous consent that following the remarks of Senators MURRAY and COLLINS, the postcloture time be expired, and the Senate vote on adoption of the motion to proceed; further, if agreed to, and following recognition of the majority leader, it be in order for Senators BALDWIN, SANDERS, SLOTKIN, and MERKLEY to speak for up to 5 minutes each, prior to a Baldwin motion to table and a Merkley motion to table, if made; and following the disposition of that vote, if it is not agreed to, Senator PAUL be recognized to speak for up to 9 minutes, and the Senate then vote in relation to the Paul amendment No. 3941; further, that following disposition of the Paul amendment, the Senate vote on the motion to invoke cloture on the Collins substitute amendment No. 3937; and if cloture is invoked, all postcloture time be expired, the pend-

ing amendments other than the Collins substitute be withdrawn, and the Senate vote on adoption of the Collins substitute amendment; and if adopted, the Senate vote on the motion to invoke cloture on H.R. 5371, as amended; finally, if cloture is invoked, all postcloture time be expired, the bill, as amended, be read the third time, and the Senate vote on passage of H.R. 5371, as amended; and if passed, the motion to reconsider be considered made and laid upon the table with no intervening action or debate, and the mandatory quorum calls be waived.

The PRESIDING OFFICER. Is there an objection?

Without objection, it is so ordered.

The PRESIDING OFFICER. The Senator from Washington.

#### GOVERNMENT FUNDING

Mrs. MURRAY. Mr. President, like so many people in this country, I am so outraged that Republicans have refused to lift a finger to save so many families from the skyrocketing healthcare premiums all year long. I voted no on last night's vote because I do believe we need to address healthcare costs before we move forward.

There is simply no time left to kick the can down the road when it comes to saving the ACA tax credits. We are already 10 days into enrollment. Yet we have Republicans saying: Why should we stop premiums from skyrocketing when we never really wanted lower premiums in the first place?

We have Republicans talking about going back to the good old days of high-risk pools, which meant people with cancer could not get health insurance. We have Speaker JOHNSON bragging that Republicans strengthened healthcare by making the biggest cut to Medicaid in history. That is like saying you strengthened a ship by throwing the passengers overboard.

And when Democrats offered a clean 1-year extension of the tax credits, which is truly the most straightforward and commonsense thing we can do for people facing gigantic premium hikes this year, Republicans said: Never ever, ever, ever.

They called it "political terrorism." And to really put a fine point on it, they fired up the old bad ideas machine to try and find a new way to repeal the ACA. Republicans have gone from saying nothing about healthcare costs all year long to saying later, later, later, even after we are over a week into open enrollment and wasting every bit of time we had for real negotiations.

Then, incredibly, Republicans started saying: Let's scrap the Affordable Care Act altogether. Let's end protections for preexisting conditions. By refusing to work with Democrats on a solution before open enrollment started, Republicans have already pushed millions of Americans off the healthcare cliff.

The only question was—and is—could we throw them a rope back up? Could Congress get something done and stem some of the bleeding Republicans already caused? Yes. By passing a clean