

That is not affordability. That is a straight-up scam that the American taxpayers are facing. Even worse, these loose rules turn the Marketplace into a fraud playground. Enhanced subsidies made plans free for people earning \$15,000 to \$23,000 a year. So, of course, people started fudging the numbers to qualify for free coverage. Brokers and scammers piled on, setting up systems claiming to enroll people for free coverage, while stealing money for themselves.

A Paragon Institute report estimated that there were 5 to 6.4 million cases of fraud, last year alone.

To catch some of the fraud, the Government Accountability Office tried their own scam. They created 44 false applicants. They made up Social Security numbers. They ran it through the system. Shockingly, 96 percent of the Government Accountability Office's fake applications got approved—100 percent-free healthcare.

It is hard to figure out how exactly these people are getting enrolled. Some are lying about their income. Some are double dipping with Medicaid. And some, likely, might not be citizens of this country.

Sound familiar?

All of this fraud is hard to stop and hard to wrap your mind around. But, unfortunately, the scam of ObamaCare is much bigger than fraudulent enrollees. That is because ObamaCare just didn't destroy our healthcare system. It also "paid for" itself by getting the government involved in student loans.

You heard me right.

We are going to pay this—ObamaCare is going to pay for it through student loans. Loans went from being managed and loaning borrowed money from the bank to the Federal Government loaning money to go to college—what a great idea. As a result, education is more expensive than ever.

Listen to this. Today, after 5 years, 45 million students across this country owe \$2 trillion—embarrassing. We are screwing over our young people who are just starting out in life, all to prop up this broken ObamaCare system.

ObamaCare promised lower costs and better care, but 15 years in, it delivered just the opposite. ObamaCare premiums have nearly tripled since 2014, not to mention the outrageous bills you get after you leave the doctor.

Quality healthcare is gone. Hospitals all over the country have been forced to close. We are losing doctors and nurses, left and right, because these jobs don't pay what they used to. Because we don't have transparency in the system, bad actors are able to hide prices, insurers face no real competition, and the COVID subsidies allowed scammers to get rich off of fraudulent money that was intended for the most vulnerable.

So, no, this is not Republicans' fault, as you are hearing. Not a single Republican voted for this disaster called the Affordable Care Act. Democrats voted for it then, and Democrats are the ones who own this disaster today.

By the way, your premiums aren't going up 20 percent starting in January because of expiring COVID subsidies, like Democrats want you to believe. That is not happening. These credits are going up only 3 percent, 4 percent, 5 percent. The rest of the premiums are going up because insurance companies are charging more. So don't let them tell you the subsidies are because all of these premiums are going up. They are getting rich off the American taxpayers. That is what is happening.

The way I see it, there are three main problems with the healthcare system. The first problem, Democrats created a broken system that needs to be repaired, and we are going to do that. I am glad to see several of my Republican colleagues are working on this daily. I am hopeful any Republican plan will focus on the main issue—affordability. The only way to lower costs is through more competition and more transparency. We need more plans to give Americans more of a choice when it comes to insurance plans. This is the only way to drive costs down.

The second problem is that Democrats allowed 20 to 30 million illegals to come into this country under Joe Biden, many of whom came from Third World countries. Many of these people have never even been to the doctor and have all sorts of health problems. These illegals are now overrunning our emergency rooms, and you, the American taxpayers, are paying for it. The next time you go to the ER, see how long it takes you to get in, and then blame the Democrats. The next time a hospital in your town closes, as has happened all over my State of Alabama, blame the Democrats.

The third problem is that we are horribly sick in this country. Americans are the unhealthiest we have ever been: 74 percent of Americans are either overweight or obese. More than 76 percent of Americans have at least one chronic disease. Cancer rates are increasing among young people at an alarming rate. If we do not start getting healthier in this country by working out, eating healthier, and getting rid of processed foods and toxic ingredients, we are not going to make it.

Our healthcare system was not built to support so many unhealthy people. Fifty years ago, you didn't have any of this crap because Americans were more active and didn't have all of this processed food. We are overmedicated, overweight, and sicker than ever, and our healthcare system simply wasn't built to handle it.

Thank God that Robert F. Kennedy, Jr., is working around the clock to make America healthy again. We need it.

At the end of the day, the Republicans have control of the Senate, the House, and the White House. We have no excuse not to do something about this healthcare disaster. We need to come up with a plan that actually delivers for the American people. This is

not a Republican or a Democrat problem. Every American is getting screwed over every day by this horrible healthcare system. The Republican Party is working to fix this. Let's grow a backbone and do what is right for the American people.

I yield the floor.

The PRESIDING OFFICER (Mr. BUDD). The Senator from Idaho.

HEALTH CARE FREEDOM FOR PATIENTS ACT

Mr. CRAPO. Mr. President, tomorrow, this Chamber will have the opportunity to chart a new path forward on healthcare in this country.

Senators will be given the choice to extend the Biden COVID bonuses for another 3 years or to support healthcare reforms that will actually expand options, reduce premiums, and give power to patients instead of insurance companies. Both sides agree that the cost of healthcare is too high, but we need to address the root causes of the explosive increase in healthcare costs rather than mask them with unsustainable spending.

We are told that the expiration of the enhanced ObamaCare subsidies is a crisis and that there is no time left to do anything but extend them. If there is a crisis coming, it is entirely of the Democrats' making. My colleagues on the other side of the aisle created the premium tax credits as a part of the ObamaCare system because they did not trust their own policy to make healthcare insurance affordable without shifting the burden of paying for it from enrollees to taxpayers. When the original premium tax credits failed to bring down premiums, they enhanced the tax credits. Then, when that did not work, they extended the enhancements.

They did all this without a single Republican vote. They also chose the current expiration date that they now say must be changed. They created the very cliff that they now oppose.

Our colleagues on the other side of the aisle have had years to offer serious suggestions on how to reform the ObamaCare subsidies. Yet every time that deadline approaches, we are told there is no workable option except to extend them again. It seems that these subsidies were never truly meant to be temporary, but they should be.

We do not have to go along with their last-minute extension this time at the cost of \$83 billion. Even our Democratic colleagues recognize that our healthcare system needs reform. Leader THUNE recently quoted many of them here on the Senate floor.

They said:

We did fail to bring down the cost of healthcare.

They also said:

Now, right now, we have a broken health care system.

And it is not just the rising premiums that prove that ObamaCare is broken. We cannot ignore the pervasive fraud in this subsidy program. The rules governing eligibility for these

credits are often flaunted. In September, the Wall Street Journal reported that the rule barring people who can access affordable insurance through their employers is “barely enforced.”

Based on the Government Accountability Office’s recent audit, income and citizenship verification rules are being ignored too. Of their 24 fake applications for enhanced tax credits, 22 are receiving subsidies despite submitting falsified paperwork or no paperwork at all. One of their applicants even received an email specifically confirming his income verification was approved even though he never submitted any proof of income in the first place.

The law prohibiting dual enrollment in ObamaCare and Medicaid was broken 1.6 million times last year.

Of course, unscrupulous insurance brokers have been signing people up for ObamaCare plans without their knowledge of them or their consent for them. Alarming, insurers make the most money through these fraudulent credits because they retain the money even if no payments are made on behalf of the patients.

As just one example, more people are signed up for zero-dollar premium ObamaCare plans in Miami-Dade County than there are low-income people living there. One woman in Miami said she had been paid five times by brokers to enroll in ObamaCare plans.

These are not isolated incidents. This year, 6.4 million Americans were improperly enrolled in enhanced ObamaCare subsidies at a cost of \$27 billion. The true cost of fraud was likely even higher because the GAO also found in its report that tens of billions of dollars of subsidies in 2023 had not been reconciled to the enrollees’ incomes, meaning they could have misrepresented their incomes to qualify for bigger subsidies.

This is the program our colleagues on the other side of the aisle are prepared to extend without changes, without even changing the policies that are generating fraudulent abuse.

We can’t afford to do that. We cannot afford the \$83 billion pricetag of their proposal, and we cannot afford to tacitly consent to this fraud nor can we afford to tell the hundreds of millions of Americans who are insured through means other than ObamaCare that we are not interested in their rising premiums.

While Republicans did not create this crisis—we did not create ObamaCare; we did not create these subsidies; and we did not create this expiration date—we do have plans to address it.

Senator CASSIDY and I introduced a sound plan earlier this week. Our bill, the Health Care Freedom for Patients Act, is based on an idea endorsed by President Trump and many of our colleagues whereby Americans, not insurance companies, should control their own healthcare spending. Americans could use the permanent, original premium tax credits to purchase qualified

bronze plans with a health savings account attached. They would then receive monthly contributions into that health savings account totaling \$1,000 to \$1,500 per person in the family annually.

Instead of lining the pockets of big insurance companies, like these subsidies, our HSA contributions would help patients pay expenses not covered by their insurance plans.

When patients can control their own care, they can seek the most appropriate treatment options for their individual circumstances, incentivizing care providers to compete for patients by improving prices and care outcomes.

Our plan would also provide funding for cost-sharing reduction payments, which will reduce out-of-pocket costs for low-income patients, save taxpayers money, and—get this—reduce premiums for benchmark Marketplace plans by 11 percent.

Additionally, our bill would ensure Federal health funding is spent for the benefit of Americans by strengthening citizenship verification requirements and discouraging States from providing taxpayer-funded healthcare to those who are not legally here and are not citizens of the United States.

Some of our Republican colleagues have offered plans of their own this week which are also worth considering as we move to the future. We welcome bipartisan cooperation on these proposals as with the pharmacy benefit manager reforms I recently introduced with Senator WYDEN and many of our Senate Finance Committee colleagues.

But we must not simply kick the can down the road yet again. Every time we spend tens of billions of dollars for unsupervised and poorly designed subsidies, as our colleagues are asking us to do once again, we worsen the healthcare crisis that we all want to solve, and we do nothing to stop the explosive increase in premiums.

I yield the floor.

THE PRESIDING OFFICER. The Senator from Louisiana.

Mr. CASSIDY. Mr. President, tomorrow, we are going to vote on two different visions of how to cover the cost of health insurance on the ObamaCare exchanges.

Democrats want to cover the cost of health insurance to benefit insurance companies. I will tell you why I am saying that—because I can make that case. Republicans want to cover the cost of health insurance for the actual person who is buying the insurance—the patient, if you will. That is the difference between the Democratic plan and the Republican Health Care Freedom for Patients Act. So let me just kind of build that out.

How do we make healthcare affordable again?

First, the Democrats want people to pay \$6,000 out of pocket before the insurance kicks in. The Republicans want to put thousands of dollars in the patient’s pocket so she has that to pay before she actually gets into her deductible.

Let me demonstrate with this chart.

The Democratic plan is to give 100 percent of the money to the insurance company of which the insurance company takes 20 percent for profit and overhead. Then it uses the rest of the 80 percent to pay for the insurance that they think—that they agree—the patient needs.

Our plan puts the money in the patient’s purse, her pocketbook, her wallet. One hundred percent of the money in there is used for the care she knows she needs. She doesn’t have to get permission from the insurance company. She knows she needs it. She can see her doctor, her dentist. She can get her pharmaceuticals. She can get eyeglasses, dental care, and orthodontia. That is a patient-driven account.

This is the plan that Senator CRAPO—the Finance chairman—and I propose. So let’s compare the two plans. Again, they are two competing visions, two different ways, and I would argue that the Democratic plan principally benefits insurance companies and that the Republican plan is there to benefit the patient.

Let’s look at this.

The Democrats just want to extend the enhanced premium tax credits. Who gets the money? Insurance companies. Under our program, where the money goes to the patients, the patients and their families get it.

What can it be used for?

Of the enhanced premium tax credit that the Democrats wish to extend, there are no changes whatsoever—3 years of subsidized premiums. That goes to the insurance company. On our side, the money that the patient gets in that account—the money that we put into her pocket so she can pay the out-of-pocket for the insurance company—goes for real care: the dentist, the physician, the glasses, the prescriptions.

Who makes the decisions? Under the Democratic plan, the insurance companies make the decision. Under our plan, the patient makes the decision. We give power to the patient, not profit to the insurance company.

Does it lower costs? Clearly not. What we have seen since ObamaCare was passed is costs explode. We continue to have the healthcare inflation we are looking at now.

But if we empower the patient and if we give her the money and we say “The more careful you are spending this money, the more that money is going to stretch,” I can promise you, she is going to be like every other responsible wife, mother, keeper of the family wallet: She is going shop.

Wait, my x ray is \$50 here. No, my x ray is \$500 there. I am going where it is \$50.

She will make the wise financial decision for her family.

How does it work with low-cost bronze plans? Here, under the Democratic plan, we have just heard Senator CRAPO point out how much fraud there has been with this system that we are currently under.

Under the patient-driven account, the money goes into a health savings account—into your wallet, if you will—which is connected with your bronze, and the mechanisms by which we set that up make sure we cut out that fraud.

Our bill goes after that fraud; their bill tolerates it. There is nothing in their legislation to stop the fraudulent stealing of billions of dollars of taxpayers' money. What it does do is it continues payments to insurance companies that take 20 percent of that money for overhead and profit, whereas under our plan, the money we give to the patient—100 percent goes to the care she knows she needs.

That is the plan Republicans are proposing. To put it differently, under the Republican plan, there is power to the patient. Under the Democratic plan, there is profit and power to the insurance company. Under the Republican plan, the patient uses the healthcare money in her wallet to purchase the care she knows she needs. Under the Democratic plan, you go to the insurance company and plead: Please, baby, please can I get permission to get the care I know I need?

The Republican plan meets the American people where they are financially. Studies show that only like a—that most families have less than \$1,000 worth of savings. Under our plan, we recognize that, and we put money in their wallet, pocketbook, or purse so that they can pay for the care they need before they go into their deductible.

Like this. This is a new poster for people who have heard my talk before. This is the Democratic plan. You get a \$6,000 deductible, and that is what you feel like, that woman right there when she is stressed because she doesn't have the money to pay for the care her family needs.

Here in her health savings account, the money is, if you will, in her purse, and when the doctor says "You need this prescription for you son's ear-ache," she has the money to pay for it right off the bat.

The Democratic plan brings financial stress—profits to the insurance company; stress to the patient. The Republican plan—money in the pocket to pay for the out-of-pocket for the insurance plan.

Now, by the way, this plan in which we put money in the pocket of the patient to pay for the out-of-pocket of her insurance policy the Democratic leader has called a junk plan.

Now, pause for a second. Democrats put that plan into place. Democrats actually put these plans on the ObamaCare exchange. He is calling a junk plan that which they have been preserving for the last 10 years, swearing up and down that it meets the needs of the American people.

All Republicans have done is added to it something called a health savings account, if you will, money in the patient's purse, pocketbook, or wallet to

pay for the out-of-pocket associated with this plan.

To call this a junk plan just shows that the Democratic leader does not know what we are talking about or that hypocritically he has been defending an ObamaCare law which created this very plan.

By the way, I was smiling last night when I saw that the New York Times mimicked this talking point like a Democratic Party organ.

What is junk? That for a family of four—two parents in their fifties, children 18 and 19—that they get \$5,000 a year? Think about that—\$5,000 a year for that family I just described to pay for their initial healthcare expenses.

Think about if one of those children had diabetes—chronic care. Under our plan, they have \$5,000 to help pay for that chronic care right off the bat. Under the Democratic plan, with a \$6,000 deductible, you are paying for that out of pocket, and that is what your face looks like because you cannot afford it. Our plan relieves the stress.

Now, next, the minority leader says that he wants to reject all these benefits. He wants to continue to send 100 percent of the money to the insurance company, which takes 20 percent for profit and overhead, as opposed to sending the money to the patient for her purse, wallet, or pocketbook so that she has money in the pocketbook to pay the out-of-pocket from the insurance company.

He is defending that with a \$6,000 deductible because he says that Republicans want to prevent taxpayer-funded abortions. He wants to have taxpayer-funded abortions apparently, and Republicans, consistent with the American will, as we have for decades, think that we should not do that.

Somehow, he is making out like this is a new development. Well, just for the sake of the American people, the so-called Hyde amendment, which prevents Federal dollars from being spent on abortion, has been agreed to by Democrats on annual appropriations bills since the 1970s. They have been agreeing to this for 50 years, and all of a sudden, that is being used as a rationale to send 100 percent of the money to the insurance companies, which take 20 percent of it for profit and overhead, as opposed to sending thousands of dollars to the patient for her to pay first-dollar coverage, to have it in her pocketbook to pay the out-of-pocket for her insurance plan.

I don't want this to seem partisan. I have been saying "Republican" and "Democrat," but let me say that we should not have a Republican plan; we should not have a Democratic plan; we should have an American plan.

This is a cartoon representing an American, but think of the person you know. Think of the person you graduated from high school with—good people. Good people. Several kids. Trying to make ends meet. They don't have a lot of money. But good people. That is who I am talking about.

Let's just separate this from R versus D. What about the people we are supposed to care about who cannot afford a \$6,000 deductible but would love to have thousands of dollars in their purse, pocketbook, or wallet to pay for the out-of-pocket costs associated with that insurance plan? Isn't that where we want to be?

Now, just to put a face on this—maybe some numbers, I should say. This is real. This is off healthcare.gov from 2026, this coming year. A family of four, a couple in their fifties with two children, 20 and 21; 500 percent of the Federal poverty level—about \$160,000, I think, per year, OK? Under our plan, they would be able to get a bronze plan as opposed to a silver, which saves them roughly \$6,000 per year. The amount in their health savings account—if you will, in their pocketbook, purse, or wallet, in their pocketbook to pay the out-of-pocket costs of the insurance plan—would be \$5,000.

Under what Democrats are insisting they must buy—will not give them an option—they have zero dollars to pay toward that \$6,000 deductible. And the net deductible—because they say: Oh, my gosh, if you get a plan with a lower premium, your deductible is higher. Because of the money that would be going into the health savings account, the net deductible is cheaper with a cheaper policy under the Republican plan. Under the Democratic plan, the net deductible is higher.

Let me add one more thing. Senator CRAPO spoke about the incredible amount of fraud associated with the current implementation of ObamaCare, and the Democratic leader wants a straight-up, clean reauthorization for 3 years. He does not want to fight that fraud.

Whatever bill was put up in the past, that is not what he is talking about now. He is talking about right now not only 100 percent of the money going to the insurance company with \$6,000 deductibles; he is talking about continuing a system that is rife with fraud.

If you are at home—no. If you are at work and you are working so hard and you are paying taxes to support our country and you hear there is fraud, it should drive you crazy. It drives me crazy.

Why won't our Democratic colleagues join us in doing things to stop that fraud? I have never seen a party so committed to generating profits for insurance companies as what I am seeing right now.

Let's cut that fraud. Let's put the money in the purse, pocketbook, or wallet of the American citizen to give her money to pay for the out-of-pocket costs of the insurance company. Don't stick them with a \$6,000 deductible. Let's give power to the patient, not profit to the insurance company.

I yield the floor.

The PRESIDING OFFICER. The Senator from California.

Mr. PADILLA. Mr. President, we are here today just about a month after the longest shutdown in American history. You all remember the 43 days that we went without a fully functioning Federal Government.

Let's remember why that happened. Plain and simple, it was because our Republican colleagues refused to take steps to save healthcare for millions of Americans. In large part—I don't know if it was an individual choice or simply because there was no direction from the White House to come in and do so. All I know is that our Republican colleagues in Congress refused to come to the table, refused to negotiate with Democrats, refused to acknowledge that we were literally weeks away from a crisis that will kick millions of people—millions of Americans—off their health insurance unless Congress acts.

That is the point Democrats are trying to make, and that is the issue we were trying to address during the shutdown because the appropriations process is the opportunity to address a crisis that is right around the corner.

Now, eventually, yes, a handful of my Democratic colleagues took the Republican majority at their word that after voting to reopen government, addressing this spike in healthcare costs was the next order of business.

At the time, I expressed my skepticism to go along with a promise to fix something later from a party that earlier this year enacted the biggest cuts in history to Medicaid. I find it hard to take the word of the Republican majority that they are committed to addressing healthcare costs and to expanding coverage to more Americans when they just kicked 15 million Americans off their insurance.

So, yes, just about a month after this longest shutdown in American history, we now find ourselves 3 weeks away from the expiration of the Affordable Care Act tax credits that so many of us are talking about.

Now, have hope because Democrats are here with a plan. We will ask this body to vote on a straightforward, 3-year extension of these lifesaving subsidies that we all support. The question will be, Are there enough Republicans that will join us in doing so? Keep people on their healthcare, and we can do the policy work and negotiation to address some of the genuine concerns that we have heard about over these last couple of months.

But don't let health coverage lapse for millions of Americans. This isn't a game. We are 3 weeks away from the catastrophic spike of costs in health insurance for so many. Over 20 million Americans are on the verge of seeing their monthly premiums not just increase but skyrocket. Four million Americans could be forced to give up their insurance altogether, including 400,000 in California, my home State.

The increase in premiums mean hundreds, if not thousands, of dollars more monthly—not annually but monthly—for working families, working families

who are already having a tough time making ends meet as costs are rising all around them: cost of groceries, cost of energy bills, cost of housing, and now cost of healthcare too?

It is to the point that Americans are having to make these tough—tough—choices: Do I pay the rent? Do I pay the water bill? Do I pay the light bill? Can I even afford health insurance next year for my family? That is a truly heartbreaking decision that is happening all across the country.

I know you are hearing from your constituents, and I am hearing from mine. I hear from people like Lisa, a single mom from Meadow Valley, CA, who was diagnosed with Hodgkin's disease in 1996. Thank God today Lisa is cancer-free, in no small part thanks to her regular checkups and the affordable healthcare plan that she can participate in because of these tax credits.

But in 2026, Lisa isn't just looking after herself and her own health, she is looking after her son. She is a single parent. She is looking after her parents as they are aging. They are now in their eighties, and she is wondering whether this lapse in tax credits might put her necessary treatments out of reach. So I am here not just speaking up, I am here fighting for her.

I hear from people like Lana, a small business owner in Oakland, CA, who has two kids in college—and college isn't cheap—and she says:

It is tough to be in the middle class right now.

Lana is so determined to give her kids a good education, but with less financial aid available—right, don't get me started on what else has been cut by this Republican majority in Congress—for her, it fundamentally means redirecting money that would otherwise go to her retirement plan.

So imagine that, having to choose between investing in your future retirement or your kids' education or your access to healthcare. While the subsidies for the ACA premiums still exist, she is able to make it work. Without those subsidies, she doesn't know what is going to have to go. Do you give up your healthcare? Do you have to start dipping into your retirement, putting your future financial security at risk, or do you give up your kid's dreams of higher education?

Again, that painful choice is the reality for so many families right now, and so I am fighting for them too. But I can go on and on with story after story, example after example. It doesn't have to be this way. That is why Democrats have put forward this serious, tangible plan to avoid this fiscal crisis, this healthcare cost crisis for families across the country.

And the fact of the matter is, our Republican colleagues don't have a serious plan. Look no further than to the fact that it is the eleventh hour now, and they have put forward a proposal that wouldn't lower premiums for a single American. In fact, it would make the problem worse. It would

allow the tax credits to expire. It would increase premiums and deductibles for tens of millions of Americans. It will push many people into what may be referred to as the "bronze plan" or, in reality, a catastrophic plan, the least comprehensive coverage on the market with sky-high deductibles.

And some of these plans you get a thousand-dollar coupon. That doesn't do a hell of a lot when these drug plans are forcing families to pay thousands of dollars out of pocket before the insurance even kicks in, and it certainly won't protect people from financial ruin when they get truly, truly sick.

But, sadly, it is not surprising. It is not shocking. This is an eleventh-hour proposal idea coming from a party that for 15 years has been talking about repeal and replace—not just attacking the ACA. They vow to repeal and replace. Repeal and replace. No shortage of efforts to repeal the ACA, but in 15 years, they haven't come up with a plan to replace it, certainly not a better plan to replace the ACA.

So let's get real. We know that this will cause hardship, and the hardship and the pain that is so tragic is made worse because we know it is preventable.

So let's vote tomorrow and pass this clean 3-year extension of the ACA tax credits if we are to improve upon the policy and the plans that are in place.

It is not controversial, folks. The overwhelming majority of American people support extending the ACA tax credits and not just supportive of what we are doing, Americans are demanding that we do something about the cost of healthcare and the cost of living overall.

You have seen Trump's approval ratings on the economy, haven't you? I know you are well aware of the election results from last month when an overwhelming majority of Americans cast their ballots rejecting Trump and Republican policies that are putting billionaires over the needs of working families. They are fed up. They are demanding that their government do something to help them get by; to help them survive, in many cases; to address the affordability crunch, a true crisis that Donald Trump dismisses as a "con job" and as a "hoax."

So here we are on the eve of a truly consequential vote to prevent costs from rising for the American people, to prevent healthcare from becoming out of reach for too many families. Here is our chance as a body to truly do something about that.

So I urge everybody to vote yes, and let's help millions of Americans keep their healthcare come the new year because we know that a "no" vote will only rip that care away from millions of families.

The choice, the conscience, couldn't be any more clear.

I yield the floor.

The PRESIDING OFFICER. The Senator from Texas.

TRIBUTE TO CARL MICA

Mr. CRUZ. Mr. President, I rise today to recognize a true servant of Texas, Carl Mica.

For over 10 years, Carl has worked in my office, starting as my regional director and now ending his career as my deputy chief of staff and State director.

For over three decades, Carl has dedicated his life to public service, the “Lone Star State,” and this Nation.

So today, I would like to share part of his story, his work, and the legacy he leaves behind as he enters retirement.

Carl is known for his exemplary character, quality leadership, and genuine compassion. He is someone who inspires others through integrity, empathy, and a clear vision of what is possible.

Carl has led not by relying on authority or titles but by setting an example of accountability, respect, and dedication. But most importantly, Carl has always been committed to uplifting those whom we serve, driving collective success while nurturing trust, collaboration, and a shared sense of purpose.

Carl’s career has been defined by steady leadership, a commitment to service, and an unwavering devotion to the people of Texas and the United States. Throughout his storied career, Carl has served in roles that placed him at the intersection of policy, people, and crisis response.

As my deputy chief of staff and State director, he has overseen operations in Washington, DC, and across Texas, serving more than 31 million Texans and leading a team of more than 60 staff members across the country. His position demanded poise, strategic judgment, and compassion, qualities he has consistently demonstrated.

Carl has been at the forefront of the most pivotal and challenging moments in recent Texas and American history. He helped guide statewide responses and engagement following hurricanes and floods and tornadoes and wildfires and community crises, including the crisis at our southern border for the 4 years of the Biden administration.

And like all of us, he navigated the uncertainty brought by the COVID-19 pandemic, ensuring Texans remained informed and connected to Federal resources. These were not moments for the faint of heart. They were moments that required steady, empathetic leadership, and Carl was there. Time and again, he stepped forward to help communities heal, to support elected officials in crafting responses, and to ensure that the voices of Texans were heard in Washington.

But Carl’s influence extends far beyond crisis management. His career has been a master class in forging relationships and strengthening institutions. During his time at the University of Texas system, he helped launch the Chancellor’s Centurions Program, cultivating future leaders in education and healthcare. He also served as the

UT system’s chief liaison to business organizations nationwide, bolstering partnerships, and supporting growth for one of the State’s most important institutions.

Prior to working at UT, Carl built his foundation in public service, working with Senator Kay Bailey Hutchison, my predecessor, rising from an assistant to her regional director.

And while Carl has dedicated his career to public service, he has also invested deeply in his community. He has served on the Austin Club’s board of directors, contributed to the Austin Chamber of Commerce, supported the Texas Exes, and remained active in organizations that celebrate Texas history, education, and civic engagement.

In every chapter of his life, Carl has embodied the values we cherish: integrity, commitment, loyalty, and leadership. He has been a bridgebuilder, a steady hand in times of crisis, a mentor to many, and a servant leader to all. Carl’s career reflects both accomplishments and character. His career is a testament to what one person can achieve when they lead with purpose, humility, and heart.

When Carl’s colleagues reflect on his leadership, one theme rises above all others: His heart. They describe someone who cared deeply for his team, who held high expectations but met them himself every single day, and whose Texas pride and loyalty ran as steady as his professionalism.

Beneath his attention to detail was a genuine sentimental spirit that shaped this office in ways he never fully realized.

They reflected on how Carl walked with them through every walk of life, through celebrations, through grief, and through the mundane.

There are countless stories I could share about Carl, but they all show the mark of a true servant leader. He inspired excellence. He opened doors. He changed lives.

Carl’s legacy is written not just in the work he accomplished but in the people he lifted along the way.

So, Carl, while your departure from this team is bittersweet, I want to say congratulations on an extraordinary legacy, and I also want to say thank you, thank you for changing lives.

And in recognizing such leadership, it is equally important to thank his incredible wife Tara, whose support and service alongside him made his contributions possible and even more meaningful.

I will also note that Carl is known throughout the State of Texas for having the most impeccable head of hair that could possibly grace a fellow. And when he comes to DC and walks the hallway, he is regularly greeted with “Senator,” “Senator,” as everyone he meets is convinced, I am sorry to say, that he is one of us. I have wondered, sometimes, if Carl has come down to the Senate floor and cast a vote. I feel confident that the clerk would record the vote and assume he must be a Sen-

ator, and there must have been a new special election that they missed.

Carl, you have been a dear friend to me and my wife Heidi for decades, and I can speak to everyone when I say: You will be missed.

Your retirement is greatly deserved, and I look forward to continuing our friendship in this next chapter of life.

I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The senior assistant executive clerk proceeded to call the roll.

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

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

HEALTHCARE

Mr. REED. Mr. President, the clock is ticking. In a matter of days, 24 million Americans will see their health insurance premiums double or triple.

Since August and even earlier, Democrats have been imploring Republicans to do the right thing and extend the healthcare tax credits that will make health insurance affordable. For months, Republicans dawdled and dithered.

Finally, last night, at the eleventh hour, they came up with an unworkable, partisan plan that cuts more money out of Medicaid, penalizes women who need reproductive health care, and introduces an almost Darwinian system that gives people a finite amount of money to pay for routine healthcare and little more coverage if they get seriously ill and need costly treatment.

Their plan will not work. More than that, there is no time to implement it.

The solution is simple: Extend the existing tax credits.

If there are additional bipartisan reforms to reduce costs—and I believe there are—let’s continue to work on them once we have adopted the extension because if we don’t pass this bill, we know what will happen: The insurance Marketplace will falter, and costs will get higher for everyone—everyone—not just those who lose the tax credit, but as more money comes out of the system, the insurance companies will charge higher rates for everyone. Indeed, too often, when health insurance premiums soar, people who used to be able to afford health insurance will end up forgoing it altogether. They will still get sick, and the cost they can pay will be absorbed by others, perhaps.

In my State of Rhode Island, 13,000 people are expected to drop coverage because of the Republicans’ failure to extend the healthcare tax credits. That is 13,000 people saying: I give up. I can’t afford to buy health insurance. I will take my chances and go to the ER if something happens.

People who are relatively healthy may just roll the dice and hope they won’t need healthcare next year. Other