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Senate

The Senate met at 9:30 a.m. and was called to order by the President pro tempore (Mr. GRASSLEY).

PRAYER

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

Let us pray.

God, from whom all blessings flow, as the mountains punctuate the Earth with their beauty, may You shine in our lives to bring loveliness wherever we go.

Shape our lawmakers as Your vessels to do Your good work. Grant them Your abundant wisdom and give them the courage to combat evils that plague our world.

Lord, revitalize our Senators, granting them peace that transcends all understanding. Lead them not into temptation, but deliver them from evil.

And, Lord, may this season of peace on Earth vivify us all.

We pray in Your astounding name. Amen.

PLEDGE OF ALLEGIANCE

The President pro tempore 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.

RESERVATION OF LEADER TIME

The PRESIDING OFFICER (Mr. MARSHALL). Under the previous order, the leadership time is reserved.

LEGISLATIVE SESSION

HEALTH CARE FREEDOM FOR PATIENTS ACT OF 2025—Motion to Proceed

The PRESIDING OFFICER. Under the previous order, the Senate will re-

sume consideration of the motion to proceed to S. 3386, which the clerk will report.

The senior assistant legislative clerk read as follows:

Motion to proceed to Calendar No. 285, S. 3386, a bill to provide a health savings account contribution to certain enrollees, to reduce health care costs, and for other purposes.

The PRESIDING OFFICER. The Senator from Iowa.

TRIBUTE TO TERRY BRANSTAD

Mr. GRASSLEY. Mr. President, former Governor Branstad is being honored today. Before I read that tribute about his honoring today, I thought I would give a little bit of background about what I know about former Governor Branstad.

I first met State Representative Terry Branstad in January 1973, when he was a new member of the legislature. He would tell you that I actually spoke to a group of Republicans who were at the University of Iowa in 1966. I will take his word for that.

He served 6 years in the State legislature. Then, we used to elect our Lieutenant Governor separate from the Governor, and he served 4 years as Lieutenant Governor. Then he was elected Governor of Iowa in 1982 and served 16 years, until 1998.

Then he decided to have a private life and a business life, and during those 12 years that he was not Governor, we had 12 years of Democratic Governors. They left a big fiscal hole. There was a real feeling among Iowans that only former Governor Branstad, then, could get us back on a strong fiscal path to fiscal sanity in Iowa.

So he decided to run for Governor again, and he selected now-Governor Reynolds as his running mate. And Terry Branstad served until the Trump administration, when he was appointed Ambassador to China.

The second Branstad administration, continued by Governor Reynolds, has had Iowa on a strong fiscal path, not

with any deficits, and reducing taxes, having balanced budgets, and having several billions of dollars in reserve funds.

So now I would like to, with that background, talk about the honor that he is getting today.

It is an honor for me, today, to congratulate my good friend Terry Branstad. This very day, he will become the 26th recipient of what is called the Iowa Award, our home State's highest citizen award.

Governor Branstad is the longest serving Governor in U.S. history, who also served Americans as U.S. Ambassador to China during the first Trump administration.

Like me, Terry grew up on a family farm. Throughout his lifetime of public service, Terry applied the bone-deep work ethic of an Iowa farmer, with extra elbow grease, fiscal conservatism, and rock-solid tenacity. He is famous for his retail politicking and his political skill.

I am proud to say that Terry has been a supporter of mine in every one of my congressional campaigns, dating back to 1974.

He joins an esteemed group of Iowans—examples like President Herbert Hoover to Norman Borlaug and Grant Wood—who have helped make our State the best place to call home.

Barbara and I congratulate Governor Branstad on his well-deserved award and thank him for his friendship and decades of service.

I yield the floor.

The PRESIDING OFFICER. The majority whip.

WAIVING QUORUM CALLS

Mr. BARRASSO. Mr. President, I ask unanimous consent to waive the mandatory quorum calls with respect to Calendar No. 285, S. 3386; and Calendar No. 284, S. 3385.

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

HEALTHCARE

Mr. BARASSO. Mr. President, \$83 billion—that is how much Democrats

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



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want to send and will vote today to send to bail out the failed ObamaCare healthcare system.

Look, I am a doctor—as are you, Mr. President. We want patients to get the care they need from a doctor they choose at lower costs. ObamaCare robbed the American people of choice, as well as affordability.

So the Democrats are back here, today, saying they want to send an additional \$83 billion directly from the Treasury of the United States to the pockets of the health insurance companies of America.

Mr. President, ObamaCare has failed so badly that Democrats continue to use taxpayer dollars to try to hide the failures. That is what this whole Biden COVID bonus scam is all about. These are juicy subsidies—extra subsidies on top of the regular ObamaCare subsidies—and they are the ones that are expiring at the end of this month.

You may recall that, in 2021, the Biden COVID bonuses were rushed through by Democrats, and they called them temporary emergency measures because of COVID. They created these Biden COVID bonus payments without a single Republican vote.

So why did they create it? It is because ObamaCare is unaffordable. People all across the country understand that. Democrats have known it from the beginning; they just refuse to admit it.

In 2022, they extended the Biden COVID bonuses—again, without a single Republican vote. Now, the tax-and-spend radicals who run the Democrat party want to extend them again—these bonus payments—for an additional 3 years. Oh, and they want to do it with zero reforms.

This is a program that is chock-full of waste, fraud, abuse, and corruption; and they do nothing to help try to make healthcare affordable for the families of America.

So the choice today is simple. Do we want to send more taxpayer dollars as welfare to insurance companies? Or do we want to make healthcare more affordable for patients and put patients in control?

So let's start with the Democrat bill. The Democrat bill forces Americans to pay \$6,000 out of pocket before insurance even kicks in. That is called the deductible. It continues the same failed ObamaCare policies that raise premiums for American families by over 220 percent since ObamaCare became law—no reforms.

Well, remember, wasn't it President Obama who said to the Nation: Oh, if you pass my plan, premiums will go down by \$2,500 per year per family. They didn't. They doubled. I think they called that one "the lie of the year" of ObamaCare. Democrats refused to include any of the needed reforms to deal with the significant flaws and fraud of ObamaCare.

This month, the government investigators at the GAO, the Government Accountability Office, uncovered \$21

billion being sent in 1 year alone—in 2023, \$21 billion sent to insurance companies—for policies where there was no verification of the person's income, no verification of their citizenship, no verification, in many cases, of the person's actual existence. It is hard to believe, but true. Opinion pieces have been written, even by the Washington Post, that talked about the level of fraud.

There are 20 million people on ObamaCare right now. You talk about \$21 billion and with the 20 million divided out. It is about \$1,000 worth of potential fraud for each and every enrollee in ObamaCare.

What do Democrats want? They want to continue this unchecked for the next 3 years—no changes, no reforms, nothing. Worst of all, Democrats want to send tens of billions of dollars every year directly from the government, directly into the bank accounts of the insurance companies.

How do insurance companies feel about this? Hey, they are licking their lips for \$83 billion more, because for insurance companies, their stock prices have gone up between 500 and 1,000 percent since ObamaCare became law. It seems like Democrats are interested in making them even richer.

What they are proposing isn't a serious plan; it is a disaster. Our Nation can't afford it, and the American people can't afford to pay these high costs for healthcare.

We need to focus on the cost of care and how we as doctors can lower that cost of care for American families. So we have a better approach. It is a simple approach.

We start with a simple principle, and that principle is that healthcare should work for patients, not for big insurance companies. Our plan sends money that is now going to insurance companies and sends it directly into the pocketbooks and into the pockets of the hard-working families of America. That is where the money belongs. It does that by expanding health savings accounts, not direct payments to insurance companies for more ObamaCare.

Our plan reduces the payments to insurance companies by \$30 billion, and it will lower healthcare premiums by 11 percent. Our plan puts patients in charge. They would be in the driver's seat. That is who needs to be in the driver's seat, with real freedom to get the healthcare that works best for them and their families.

Our plan restricts Federal Medicaid funding to States that give health insurance to illegal immigrants.

People say: Oh, you can't be giving it to illegal immigrants. It is illegal to give it to illegal immigrants.

It doesn't mean States aren't doing it. And the GAO study found that the ObamaCare plans are also and have been used by illegal immigrants.

It requires States to verify citizenship prior to signing someone up for Medicaid, as well as for ObamaCare. And our plan upholds Hyde amendment protections—protecting Americans' rights of conscience.

Our plan is fully paid for. It is an end to the Democrat era of runaway spending to cover up ObamaCare's high prices.

I am a doctor. I practiced medicine for 24 years in Wyoming. And I can tell you this: When patients have more freedom and more choices, healthcare improves. When patients have more freedom and more choices, costs go down. That is what Republicans are voting for today.

I really want to thank Senator MIKE CRAPO of Idaho and Senator BILL CASSIDY of Louisiana for leading this effort. I want to thank the Presiding Officer for his efforts to find reforms that will actually work, that will help patients, will help lower the costs, put them in charge. That is what we really need to do—lower healthcare costs for hard-working families.

So the contrast is clear. Today, Democrats are going to vote to protect a broken system of higher costs, of rampant fraud, and big checks to insurance companies. Republicans are going to vote for a plan that lowers healthcare prices and empowers patients. It empowers them to choose the doctor and the care that works best for them. That is what Republicans are committed to.

We are committed to delivering what the American people deserve, which is the care they need from a doctor they choose at a cost they can afford.

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.

HEALTHCARE

Mr. SCHUMER. Mr. President, today is D-day—decision day for Republican Senators. Will Republicans side today with the American people and avert the impending healthcare crisis or will they abandon American families as premiums shoot through the roof on January 1? That is the decision Senate Republicans must make today.

I say to my Republican colleagues: Our bill is the last train to leave the station.

After wasting precious time fighting among themselves, Republicans have one last shot at a clean, realistic plan to lower healthcare premiums. The Democratic bill is the only bill that will do that today. Ours is the only bill on either side in the House and Senate that has the full support of every Member on our side of the aisle.

Democrats are fighting to lower healthcare costs for the American people, while Republicans are fighting among themselves. By my last count, Republicans are now at nine different healthcare proposals and counting, and

none of them give the American people the one thing they most want: a clean, simple extension of these healthcare tax credits. But our bill does extend these credits cleanly and simply, and it is time for Republicans to join us.

So I repeat, our bill is the last train to leave the station. After this, we will not have time to try again before premiums shoot through the roof next year. This is not a political fight. This is not a symbolic vote. This is a life-and-death vote because people who will lose their healthcare could face that horrible, horrible end.

This is about ensuring that working- and middle-class people can afford to see a doctor without going broke, to afford treatment for illnesses like cancer and enjoy the dignity of good health without wiping out their life savings.

For many Americans, affording health insurance is the difference between life and death, as I have said, so we must act. People are counting on us. The American people are counting on us—counting on you, Republican Senators—to act.

Now, of course, this morning, the Senate will first vote on the Republican healthcare proposal, but the Republican plan is nothing more than a reflection of the deep divisions inside the Republican caucus and the Republican Party.

Republicans have had so many differences amongst themselves that for a while, it looked like they weren't going to put up a bill at all. But after that became too embarrassing an option for Republicans, they used Scotch tape and glue to come up with this ridiculous proposal that can't be taken seriously and does nothing—nothing—to avoid the impending healthcare crisis. It doesn't extend the ACA tax credits for a day, month, a year—none of that. Not even a day.

Even calling this Republican bill a proposal is generous because the Republican bill is little more than junk insurance. It is no real plan at all. It has been repudiated time and time again in the past and will be repudiated by the American people again.

Under the Republican plan, the big idea is essentially to hand people about \$80 a month and wish them good luck. And even to qualify for that check—listen to how bad this is—Americans would be forced onto bare-bones bronze plans with sky-high deductibles—\$7,000 or \$10,000 for an individual, tens of thousands for a couple. So to get that \$80 a month, you are going to pay \$7,000 off the top before you even get any health insurance. How ridiculous, how stingy, and how mean and cruel to the American people. What Republicans offer is not a healthcare plan. The Republican plan is a “When you get sick, you go broke” plan.

You know, it is sad that the Senate even got to this place to begin with. Republicans in the Senate should have solved this problem months ago. Democrats warned this crisis was coming. We gave Republicans more than three

chances to extend the tax credits this year—in the spring, the summer, and the fall—and every time, Republicans said no.

Instead of lowering premiums, Republicans chose instead to ax healthcare funding, kick millions off insurance, close rural hospitals, all the while ripping away nutrition funding for working people. Why? So they could give their billionaire buddies a tax break. And now, after so much delay, Republicans are about to let the clock hit midnight.

So there is only one option left to avoid falling over this healthcare cliff that Republicans have brought us to—a clean, simple, direct extension of the current ACA credits. Every single Democrat is unified behind this proposal. I urge Republicans to drop their divisions and join us.

Republicans, join us, and let's avert a disaster. Join us, and let's lower costs for the American people. We have one shot to get this right. Republicans, join us.

The American people are watching how Republicans vote today.

NOMINATIONS

Mr. President, on the nomination package, today, Senate Republicans will move forward with a package of 97 nominees that includes some of the most horribly unqualified, shockingly radical nominees Donald Trump has appointed to date.

Historically, when a President nominates such terrible people to positions of power, the Senate has stood as a check on the Executive no matter which President, Democrat or Republican, was in charge, but not this Senate majority, not this Republican Party. Senate Republicans continue to bend the knee to Donald Trump and give him practically any nominee he wants no matter how awful they are. They support these nominees no matter how unqualified they are, no matter how partisan they are, no matter how unethical they are—no questions asked.

That is why people like Paul Hollis—to be the Director of the Mint at the Department of the Treasury—are in the package. If confirmed, Mr. Hollis's first act would be to rubberstamp the Trump one-dollar coin. That is why they pick somebody—because Trump wants a one-dollar coin with his face on it, I think. And he refused to share details on how he would increase efficiency at the Mint because he doesn't have a plan. He probably doesn't even know much about it.

It is why people like Charles Arrington to be a member of the Federal Labor Relations Authority are in this package. Unlike nearly all former FLRA members, Arrington is not a lawyer. And he has a history of engaging in bad-faith bargaining while at the VA.

The Senate should be considering each of these nominees one by one, with time to debate each nominee on the floor in front of the American peo-

ple and with a rollcall vote on each nominee so every single Senator is on record.

UNANIMOUS CONSENT REQUEST

Mr. President, I ask unanimous consent that the following Senators be permitted to speak for 5 minutes each prior to the cloture vote on the motion to proceed to S. 3386: Senator SHAHEEN, Senator OSSOFF, Senator WYDEN, Senator DURBIN, Senator HASSAN, Senator BALDWIN, and Senator SCHUMER.

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

RECOGNITION OF THE MAJORITY LEADER

The PRESIDING OFFICER (Mr. MULLIN). The majority leader is recognized.

HEALTHCARE

Mr. THUNE. Mr. President, later today, we will vote on the Democrats' partisan messaging bill, which is a clean, 3-year extension of the Biden COVID bonuses. And when I say “clean,” all that I mean by that are no reforms, straight-up extension—3 years of a program without any reforms, any revisions, any changes that would actually help drive down healthcare costs instead of increasing healthcare costs and get rid of the rampant waste, fraud, and abuse in this program.

The Democrats' plan—that the Democrat leader called it on the floor the other day. It is their “plan.” Apparently, they think that a 3-year extension with no reforms to try and disguise the real impact of ObamaCare's spiraling costs is actually a plan. I don't know how you can call it a plan.

I came down here yesterday to talk at length about some of the many problems with ObamaCare and the perverse incentives it provides to move employees off of employer-provided insurance and into taxpayer-subsidized plans that have rampant year-over-year increases in premiums; the perverse incentives it provides to insurance companies to enroll Americans—some of whom don't even know that they have been enrolled—so that the insurance companies can rake in even more subsidies.

And then this so-called plan is rampant—and I say “rampant”—with fraud and abuse. A Government Accountability Office report released just last week found a whole host of problems, including the successful enrollment of fake individuals, Social Security number fraud, failure to verify or sometimes even request documentation, improper payment of subsidies, and the list goes on.

I want you to take a look at this. This is the finding that came out of that study that was done by the Government Accountability Office. This was their conclusion:

ObamaCare subsidies granted without documentation to 90 percent of fake accounts set up by government watchdog.

Ninety percent—not 10 percent, not 5 percent. I mean, if you had a program that had 10 percent fraud in it, I think that would be a huge red flag, right? Wouldn't you be alarmed by that? I

think most people would. I think most people would go: Wow, that is a huge number. We need to do something to fix that.

This program that we are talking about today, that they want to do a straight-up extension on—no reforms, no revisions—was found by the Government Accountability Office—an entity and Agency the Democrats love and support found that 90 percent of the accounts that were set up in the ObamaCare exchanges were fake—fake. Think about that. You can't make this stuff up. We are talking about tens of billions of dollars in waste, fraud, and abuse on a yearly basis. They don't want to do anything about it. They just want a straight-up extension on a program that the Government Accountability Office says has a 90-percent fraud rate.

That is obviously a huge problem, but I haven't even gotten to the central problem. That is that ObamaCare has utterly failed to control healthcare costs.

Since 2013, ObamaCare enrollees have seen a 221-percent increase in premiums.

Let me just repeat that. Since 2013, ObamaCare enrollees have seen a 221-percent increase in premiums—221 percent. That means ObamaCare premiums have grown at approximately five times the rate of inflation—so much for making healthcare more affordable.

This graph, I think, illustrates that. Actually, this understates the problem because this shows that since 2014—in the first year of its inception, when the Obama exchanges went live, there was a huge increase that the insurance companies built into their premium costs to cover all the things they had to cover in the new program.

So since 2013, that number is 221 percent, but even since 2014, when the exchanges were fully up and operating, it has had a 129-percent increase in premiums at the same time that the group market—in other words, the large- and small-group market where a lot of people get their insurance coverage through their employer—was going up at about half that rate; 68 percent in the small- and large-group market, which is about where 150 million people get their insurance.

Frankly, the more people we could push into that market, it would not only lower their costs, but it also spreads the risk among a bigger pool. That, ultimately, is the way, in the long term, you want to spread your costs.

But what ObamaCare does, because it uses taxpayer dollars to subsidize and pay insurance companies directly—premiums go directly to the insurance companies, so insurance companies are making bank. They are getting enriched by this. But what it does at the same time is there is no incentive to control costs, and it is pushing people into that market.

If you are an employer or employee, for that matter—because most people

respond to incentives—and you are told that you can get into a market where the taxpayers are going to cover it, the employer is going to say: Well, why should I pay for health insurance coverage for my employees if I can have the taxpayers pay for it?

So it is pushing more and more people out of the group market, this market right here, where there is a 68-percent increase—still way too much—over the last decade, pushing more and more people out of that market into this market, which has double the rate of increase in premiums. That doesn't include, as I said, the first year of its inception. If you add that first year back in there, that number is 221 percent.

So you have this system that is pushing more and more people into insurance coverage where the rates are skyrocketing, where the payments are going directly to the insurance companies, and where lower income taxpayers are subsidizing higher income taxpayers because there are no income levels.

So now you can have people making \$500,000, \$600,000 a year who are getting subsidized by the Federal taxpayer—people making \$40,000 or \$50,000 a year—at a cost to the Federal taxpayer, in their bill alone, which is just a 3-year extension, of \$83 billion. You tell me in what universe that makes sense.

That is astonishing, to have a program where 90 percent of the people who are fraudulently enrolled got approved; a program where the rate of increase is twice the rate in the group market and three times the rate of inflation, the Consumer Price Index, over the same time period. Insurance companies are getting rich. Lower income taxpayers are footing the bill so more affluent Americans can have coverage. The American taxpayer is paying \$83 billion just for the 3-year extension—waste, fraud, and abuse, higher rates, fiscally irresponsible, and the list goes on.

Mr. President, even Democrats have to be well aware of the fact that ObamaCare has utterly failed to do what it promised. As I mentioned yesterday, we had one Democrat Senator come down to the floor during the shutdown, and, to his credit, he admitted the truth.

This is what he said:

We did fail to bring down the cost of healthcare.

That is a direct quote: “We did fail to bring down the cost of healthcare.”

So what are Democrats proposing to do about that failure? As I said, exactly nothing. Democrats' so-called plan is a 3-year extension of the status quo—no reforms, no revisions, no rethinking of the way that ObamaCare works; just a 3-year extension of the status quo which, I might add, was put in place in response to the pandemic. When they extended these subsidies back in 2022, it was in August. The pandemic was long over—long over.

As I said, you can't make this stuff up.

So it is not going to do anything to address the perverse incentive to push Americans out of the employer-sponsored healthcare system and onto taxpayer-subsidized plans. It is not going to do anything to address the perverse incentives that encourage insurance companies to enrich themselves at the taxpayers' expense and do nothing to address the rampant waste, fraud, and abuse in ObamaCare. Most of all, it will do nothing to bring down healthcare costs. Nothing. Zero.

Under Democrats' plan, insurance premiums will continue to spiral. American taxpayers will find themselves on the hook for ever-increasing subsidy payments. And don't think all those payments are going to be going to vulnerable Americans. As I said, the Democrats' decision to remove any income cap on the Biden COVID bonuses has Americans making as much as half a million dollars or more qualifying for taxpayer subsidies—half a million dollars. Do Democrats really think middle-class families should subsidize healthcare premiums for those making half a million dollars?

Democrats don't have a healthcare plan. They want to extend the status quo—a failed, flawed, fraud program that is increasing costs three times the rate of inflation.

On the other hand, Republicans today will offer something that does actually lower costs. Earlier this week, we introduced legislation—drafted by the chairmen of the relevant committees, Senators CRAPO and CASSIDY—to make structural reforms to the individual health insurance market.

In contrast to the Democratic bill, our bill would actually lower, as I said, ObamaCare premium costs, and it would redirect government savings from the bill into health savings accounts for eligible ObamaCare enrollees earning less than 700 percent of the Federal poverty level, paired with more affordable insurance plans.

These accounts would help individuals to meet their out-of-pocket costs, and for many individuals who don't use their insurance or who barely use it, it would allow them to save for healthcare expenses down the road.

We have two paths here—one, a plan to start addressing the spiraling healthcare costs in ObamaCare and make structural reforms that would drive down premium prices; two, a proposal for a 3-year extension of the status quo. So you tell me who is serious about actually addressing the affordability of healthcare.

Democrats may talk about helping Americans, but their bill is nothing more than a political messaging exercise that they hope they can use against Republicans next November. So I hope that after today, they will feel like they have checked the messaging box and will get serious about actually doing something about the spiraling healthcare costs under ObamaCare.

Republicans are ready to get to work. I am not sure yet the Democrats are interested.

I yield the floor.

The PRESIDING OFFICER. The Senator from New Hampshire.

Mrs. SHAHEEN. Mr. President, before I begin my official remarks to address the vote that we are going to be having shortly, I just want to respond to the majority leader's remarks because I think there was some misinformation there.

The fact is that 92 percent of people who get those enhanced premium tax credits are making \$200,000 or less, and the average income for a person who receives those premium tax credits is \$32,000 a year. That is not somebody in a higher income bracket. In fact, about 50 percent of the people who receive premium tax credits are small business owners or their employees, who have no other option for healthcare because they can't afford employer-sponsored health insurance.

I think much of what the majority leader said about costs and about addressing fraud and about lowering the cost of healthcare are things that we all ought to support. I am ready to come to the table.

I think we would be better served if, after we get through these votes, we sit down and come to a compromise to address the real costs that people are facing in terms of healthcare, and I am ready to do that.

But in a few moments, we are going to vote on whether millions of Americans can keep the Affordable Care Act enhanced premium tax credits or whether they will face a crushing financial blow. These credits have helped millions of families, including tens of thousands of people in New Hampshire, keep their coverage and balance their family budgets. For many, they are the only thing that is standing between stability and a crisis.

I have worked on these tax credits since 2019 when I first introduced the bill. I have warned for more than a year about what would happen to rates if we failed to address this issue in Congress. Well, now that open enrollment has begun, we are seeing the consequences of that failure to act in real time.

States and insurers are reporting that significantly fewer people are reenrolling in health insurance plans because families simply cannot afford the rising premiums. The Republican proposal that Senators CASSIDY and CRAPO are introducing doesn't really address that issue.

Even those who are reenrolling are often being pushed into less comprehensive plans that leave them exposed to substantial out-of-pocket costs.

Yesterday, at a forum that I cohosted with Senator WARNER, we heard directly from people who depend on this coverage. Their stories were personal, and they were urgent.

One small business owner who is also a healthcare provider told us that af-

fordable ACA coverage allows her to keep serving new mothers in her community while still caring for her own family. But she also pointed out that if we don't address these premium tax credits, the cost of her health insurance was going to quadruple.

Another woman from Concord, NH, described the moment her son, who lives with a serious mental illness, had his coverage approved. She said she wept with relief. With that coverage, he has been able to work, to live independently, and to get the treatment he needs.

These are real families who have real stakes in this debate that we are having. This is not a game, and people are already feeling the impact of inaction.

Democrats have put forward a straightforward, immediate solution to prevent the premiums from jumping and to keep people insured. Some of my Republican colleagues have offered ideas that they believe could help. I think that engagement has been constructive, but the time is short. We need to act now, and we need to extend the tax credits.

I know there are Members in both parties who want to find a responsible path forward. I welcome the discussion on where we can find common ground, and I am ready to come to the table, as I said, with any of my colleagues, to work on long-term reforms.

First, we must keep millions of Americans from losing coverage in the coming months. Extending these credits is the easiest and most direct way to protect families.

I yield the floor.

The PRESIDING OFFICER. The Senator from Georgia.

Mr. OSSOFF. Mr. President, what is an American supposed to do who loses health insurance in the middle of chemotherapy?

That is the question confronting one of my constituents right now, a Georgian who wrote in to my office. She is a woman in her early sixties, who is in the middle of a breast cancer fight. She waits tables for a living.

If Republicans allow these Affordable Care Act benefits to expire, her premiums will go up by hundreds of dollars, and she says she will have to cancel her health coverage. She needs chemo monthly to fight her cancer. What is she supposed to do?

Or there is my constituent with diabetes, who just had major surgery for another health issue, just a few months ago, and told me that, when she learned that this Congress might let these tax credits expire, she cried. She cried not for herself; she cried because she feared that others would die as a result of this policy choice.

Then she got her own insurance quote for next year: hundreds of dollars higher than she is paying now. She is a diabetic, in Georgia, who just had major surgery, who says she, too, will have to cancel her health insurance. She cried again when she got that insurance quote because, suddenly, she

feared that she might die—she might die.

What is she supposed to do?

Another constituent who reached out to my office this week is a single mother who relies on medicine that, if she is not insured, will cost her \$80,000 per year without insurance. Her premiums are about to go up by hundreds of dollars. She, too, says she probably will have to cancel her insurance. What is she supposed to do? How is she going to afford medicine that costs, without insurance, \$80,000 per year?

The whole conversation about these Affordable Care Act tax credits in this town, in this building, has been focused on the politics of this issue. This is life or death. People will die.

This is one of the most consequential votes this Senate will take all year. By saying yea or nay to the clerk of the Senate later today, Senators will decide whether people live or people die. Senators will decide whether Georgians and folks across the country are financially ruined or have a shot.

Half a million Georgians, it is projected, will lose their coverage altogether. More than a million more will see their premiums double or worse. This is a choice. What is the point of having all of this power if you won't use it to help people?

I remember, just a few weeks ago, Members of this body wrote into a funding bill half-million-dollar payments to themselves.

Do you remember that?

But our own constituents who stand to lose their health insurance in the middle of a cancer fight—what are they supposed to do?

My constituents cannot afford this, and some of my constituents cannot survive it.

I urge my Republican colleagues to put the politics aside and vote to extend these tax credits for the health of our constituents.

The PRESIDING OFFICER. The Senator from Oregon.

Mr. WYDEN. Mr. President, there is a runaway train barreling toward our country in the form of a massive increase in healthcare costs for millions of Americans who are tied to the tracks.

Today, the Senate will vote on two different plans: One, offered by Democrats, would save Americans from the health cost freight train and get them off the tracks. The other, offered by Republicans, amounts to tossing Americans a hacksaw and wishing them luck as the train speeds into view.

Come January 1, millions of Americans are going to have to figure out how they are going to pay for their healthcare. Families will be making a near-torturous decision between paying their premiums or paying for rent and groceries. Millions will decide to forgo coverage completely.

The Republican plan on offer is snake oil in a gaping wound. It is going to spark an avalanche of junk insurance plans designed to enrich big insurance

companies. A puny savings account to cover the cost of an appendectomy, having a baby, or getting your tonsils out under the Republican plan is going to leave patients up to their eyeballs in financial debt.

The biggest winner under this Republican scheme won't be Bartley and Carla of Eugene, OR, whose premiums will skyrocket by 500 percent on January 1. The real winner under the Republican proposal will be Big Insurance—specifically, the biggest, UnitedHealth Group. But enriching rich donors and giant corporations while typical Americans foot the bill is pretty much par for the course under a failed Republican leadership.

What Democrats are offering today is a clean extension of the tax credits to keep ACA plans in place.

Every Member of this body can agree that healthcare costs and insurance companies are spinning out of control and that more needs to be done to rein them in, but the solution is not to kick millions of people off their healthcare until Republicans get their act together to find a replacement.

I am now going to take a brief moment to talk about the off-base Republican claims about fraud in the individual market.

The fact is, Republicans are cherry-picking statistics or are outright distorting the facts to justify kicking millions of people off their healthcare under the guise of fighting fraud. Independent Federal watchdogs recently posed as sleazy insurance brokers to fraudulently enroll Americans in healthcare plans. That tells me that what is needed is tough criminal penalties aimed at stopping these unscrupulous insurance brokers.

I wrote that legislation—legislation that would, for the first time, hit the sleazy insurance brokers with criminal penalties.

Based on how much my Republican colleagues talk about fraud, you would think they would be tripping over themselves to support our bill, but none of them are doing so. That tells me that their rhetoric is just empty talk.

I will close with this: The only timely solution that saves Americans who are now in harm's way is by extending these credits and keeping costs down for families. Once the crisis is averted, let's look in a bold, new direction for American healthcare because it is clear the status quo doesn't work.

I urge my colleagues to support a clean extension of the ACA tax credits to provide American families the money they need to pay for high-quality healthcare.

I yield the floor.

The PRESIDING OFFICER. The Senator from Kansas.

UNANIMOUS CONSENT REQUEST—S. 3389

Mr. MARSHALL. Mr. President, my grandma taught me so many things and had so many great, old sayings.

One of the things she taught me is that, if you have your health, you have

everything. If you have your health, you have everything. I think that is one of the reasons I wanted to become a doctor. I wanted to help give people their health.

But healthcare is in a crisis right now. Healthcare is in a crisis. Doctors think healthcare is in a crisis. Nurses think healthcare is in a crisis. Patients, families, Americans—we all think that healthcare is in a crisis.

The Democrats' solution is, frankly, just to throw more money at the problem—to throw more money at the problem—which really inflates everybody else's costs of healthcare.

What our party would like to do is to empower patients, not insurance companies. We want to put patients in charge, not insurance companies.

Before we, you know, dive a little deeper into our bill that we are asking unanimous consent for today, I want to answer, I think, one of the toughest questions I have been asked. The question is—you know, when I go back home, in January, families are going to look to me and say: Why couldn't you fix healthcare?

I want the record to show right now that the Democrats are walking away from a yearlong extension on the enhanced subsidies. They are walking away. We are offering it. I don't think the subsidies are a good idea—I never did—but my heart says it is the right thing to do. So let the record show, if the Democrats object to this bill, they are walking away from a yearlong extension of ObamaCare in exchange for empowering patients.

You know, this crisis—I think we need to understand a little bit more where this crisis came from. ObamaCare has been the law of the land now for 15 years. And perhaps Speaker PELOSI's most famous moment of her career is when she said we need to pass the bill so we can see what is in it.

Well, now we know what is in it. We know it was written by insurance companies. We are giving them \$150 billion a year. It was written by PBMs. It was written by big hospital systems, big healthcare systems who have driven the spend on healthcare now to \$5 trillion a year.

What have we ended up with? Of course, the costs are higher. No one can deny that the average premiums are now more than 200 percent higher than they were. Access is worse. Fraud is rampant. And really ObamaCare is junk insurance, right?

When they talked about what junk insurance was, they argued for ObamaCare. ObamaCare has turned into junk insurance. When families have a deductible of \$15,000 a year, that is junk insurance, right? So we ended up doing just the opposite of what they stated their intended goals were. So listen—listen—to what the Democrats are saying now and what they are willing to do.

Let me just sum up, briefly, what our plan does, and then I will maybe go a

little bit deeper. No. 1 is we address the fraud. No. 2, we extend the ObamaCare—the Biden-era extended subsidies for another year. We fund CSRs. We address fraud, if I didn't say that yet. And then starting in 2027, we would start taking some of that money that we were using on these extended subsidies—that is about \$35 billion a year—we would start putting that into your debit card, into your healthcare debit card, thousands of dollars per family.

You know, for some it might be \$7,000. For some, it might be \$5,000, but we want you to start making choices. And then, lastly, what our bill does—and this is why I am so confused why Democrats are walking away from this. If there was one good thing about ObamaCare is it addressed preexisting conditions. And we will talk about that more in a second. But our bill funds invisible high-risk reinsurance pools.

So it is like belt and suspenders for people that develop high-risk conditions.

Let's dive into each of these pillars a little bit more. No. 1 is let's stop the fraud. No one can deny that there is significant fraud in ObamaCare. We don't know exactly how much. Is it \$20 billion? Is it \$30 billion?

We know that a third of people on ObamaCare never make a claim. A third of people on ObamaCare never make a claim.

And we know that—we saw the number—the fraud increased significantly when we allowed people to have zero dollars in the game. So what our bill does is, No. 1, it requires an ID—ID verification. It requires work verification. It requires income verification. And it requires you to contribute \$5 a month.

If these were implemented, I really think we would save the country \$25 billion a year. And again, that would more than fund this high-risk pool that I would like to do. I think stopping the fraud, there couldn't be anything more simple. But even just yesterday, the Democrats refused, and they voted down addressing the fraud.

Next, our pillar is real price transparency. If we adopted this, the cost of healthcare for everyone—whether you are on ObamaCare or get your money through your work or you are on Medicare—it would drive down the cost of healthcare for everybody by 20 percent.

Rather than spending \$5 trillion a year, this country would be spending \$4 trillion a year. Think of the great things—what else we could do if we had that money to do better things with. We could fund community health centers. So many great things we could do out there from a healthcare standpoint as well.

But by giving pricetags to patients—by forcing every healthcare provider, upfront, to have a list of everything that they offer and have that already on a website run by CMS and you are sitting there in your hometown and the doctor says you need to have your knee replaced and you could automatically

have populated within 60 miles all the hospitals charges.

You are going to find some hospitals charge \$10,000 for that hip replacement; others charge \$60,000 for it; some \$120,000 for it. Heck, you might even hop on a plane and fly from New York City to Kansas to save \$120,000 on a hip replacement—and we will put you up in the best hotel in all of Kansas to do that.

Pricetags are what cures that. Pricetags turn patients into consumers. It lets patients become shoppers again. Over and over again on Black Friday, Americans demonstrate to me that they have strong purchasing power and know what they are wanting to do with those dollars.

So by empowering patients, by turning them into shoppers again, by forcing pricetags, this is going to lower the cost of healthcare for everybody by 20 percent.

Our third pillar is to bridge subsidies for families. Look, you don't have to convince me of the cliff people are facing. Because of ObamaCare, premiums are going to go up 20 to 30 percent regardless. Regardless of what we do here in Congress, premiums are going to go up 30 percent.

I want to help those people. Maybe, you know, the people most impacted by this cliff—there are probably 1 million of them, maybe there are 2 million of them as well. That is why we need to do more than this bill to impact them long term by allowing them to purchase healthcare across State lines and expand association healthcare plans.

But again, we are extending the subsidies for 1 year. No other deal up here, really, on the Republican side addresses that except for this particular deal. I know my friends want 3 years. Look, let's talk about it.

What would it take for you to actually consider driving the true cost of healthcare down and not just throw money at the problem?

I just can't emphasize enough. You are a family of four. You are making \$80,000 a year, which is more than the average salary in Kansas, and have a \$15,000 deductible. That is not access to healthcare.

You have to admit—and I think my Democrat friends do admit—that ObamaCare is broken.

Next, I want to just talk about our invisible State-run high-risk pool. Look, I talked a second about preexisting conditions. The one thing I was really excited about ObamaCare is that it took care of the preexisting conditions.

Guess what the most common preexisting condition is in America. It is pregnancy. I delivered a baby almost every day of my life for 25 years, and believe it or not, less than half of pregnancies are planned.

And when couples are purchasing—they get married, they purchase health insurance, and they were going to save a couple hundred bucks by not including pregnancy, they thought it was a

good idea. But guess what. Mother Nature doesn't always cooperate. Again, half these pregnancies were not planned. So I was glad to see us address preexisting conditions.

But even now we know insurance companies do play games to try to keep you out once you have a tough diagnosis. But if those insurance companies knew that, based upon your diagnosis and the money you are spending, you are already going to this partially federally funded high-risk pool, it would keep everyone's premiums down.

My friends across the aisle talk about—you know, they tug at people's hearts, which I want to do as well. We don't want anyone to face bankruptcy because of healthcare. But that is happening now, right?

Admit it. Your plan is not working. All these many, many families are facing and have taken bankruptcy because of the cost of healthcare.

So we use this belt-and-suspenders approach. We have the preexisting conditions in ObamaCare. We keep those. But then we do something better by funding these high-risk pools as well.

You know, high-risk pools let us protect the sick without punishing the healthy. If these catastrophic costs are covered, premiums fall for everyone. That is just simple common sense.

If you think about these five pillars here that I want the Democrats to agree with, I bet we drive down the cost of healthcare by 40 to 50 percent.

You know, our last pillar is just this theme of turning patients into consumers by giving them pricetags, by putting Federal dollars in your debit account for healthcare, by giving you pricetags. We turn you into shoppers again. It is going to lower the cost for everybody, and then we start reallocating that waste from fraud and abuse.

What makes our plan different than anybody else's out there? We address the fraud. We have pricetags that no other plan has. It bridges the subsidies.

And instead, my Democrat friends are offering a \$83 million fix. The Democrats are just compounding the junk insurance. With all due respect to my friends across the aisle, you are just throwing good money after bad money.

By extending these subsidies for 3 years, it will be at least \$83 billion. And the way healthcare is accelerating, it will be \$100 billion. Again, I do feel the pain of these folks. I mean, these are my friends, my neighbors.

A top-three issue for every family in America, for every business in America, is the cost of healthcare. How can you walk away from a plan that is going to drive the cost of healthcare down 40 to 50 percent? And instead, you just want to offer more junk insurance.

Your plan doesn't do anything to bring down the cost of the deductibles in the plan. That is the problem. You could pay for their whole premium—you are. We are paying for their whole premium. But then they have a \$15,000

deductible. That is not access to healthcare.

I don't know why my friends across the aisle don't want to have meaningful discussions. Why do we not want to talk about fixing the problem? There is so much more than this that we should be talking about right now.

Again, pharmacy benefit manager reform comes to mind, expanding community health centers, making sure everybody has meaningful access to primary care, bringing mental health into those community health centers. Those are all real solutions: expanding association healthcare plans, letting it be purchased along State lines.

Could you imagine if Sam's Club or Costco or Amazon had an association health plan that you could sign up for? Think of the purchase power that they would have.

There are real solutions out there. These are real solutions. Democrats have asked for a plan. This is, frankly, just the start of a good plan, but it would help bridge us over the next year to go after these other issues we can address on a bipartisan basis.

And remember—I will just close with this. When patients ask their Senators in January why their health insurance premiums went up, and they are going to ask you: Why did you vote against Senator MARSHALL's plan that extended the subsidies for a year, I hope you have got a great answer for that.

Mr. President, I ask unanimous consent that the Finance Committee be discharged from further consideration of S. 3389 and the Senate proceed to its immediate consideration. I further ask that the bill be considered read a third time and passed and that the motion to reconsider be considered made and laid upon the table.

The PRESIDING OFFICER. Is there objection?

The Senator from Delaware.

Ms. BLUNT ROCHESTER. Mr. President, reserving the right to object, I had the honor of serving with Senator MARSHALL in the House. We were classmates. We came in together in 2016. It is kind of ironic to think back to that time because as a freshman, I watched my colleagues try to repeal and replace and repeal and replace and repeal and replace.

Just last week, Senator MARSHALL and I introduced the PBM Disclosure Act together, a bill regarding PBM transparency. We worked on some important things, but at this moment I can think of nothing more important than addressing our Nation's healthcare crisis. Unfortunately, I cannot support what is being proposed here today.

Now, we all agree that our healthcare system needs improvement. The Democrats have put forward proposals to do just that. As a matter of fact, Senator WYDEN, who is sitting on the floor right here, today, has put forward a proposal—a bill—that deals with the issue of fraud. And as he said, he would love his Republican colleagues to join him in that effort.

This bill claims to actually attack fraud. It also claims to fix the premium crisis. But, in reality, it would kick millions of Americans off their ACA healthcare coverage. Premiums would go up for over 10 million people by an average of \$1,000. And to top it all off, this bill adds new abortion restrictions. It is yet another harmful proposal from Republicans, while the clock is ticking for the American people.

Almost a dozen proposals have been offered by Republicans in the Senate and the House, in just the last few weeks. That is tantamount to throwing spaghetti up on a wall to see what sticks.

For months, we have asked Republicans to come to the table. During the shutdown, they said they couldn't talk to us about healthcare. Yet they were still holding hearings on a whole host of things.

They spent 6 months before that, in the beginning of the year, passing tax cuts for billionaires. Apparently, that wasn't the time to talk to us either.

The very first bill I sponsored—as a U.S. Senator, back in January, was the Healthcare Affordability Act, which would have permanently extended the ACA tax credits. Now, it is December, almost a year later.

As I already said, we have received almost a dozen plans from Republicans, and they are still coming in. As a matter of fact, I think one came in last night.

Let us help you help your constituents. Democrats are offering the cleanest, easiest, simplest way to deal with the immediate healthcare crisis, the immediate healthcare cliff that Americans are facing, and it gives us time to improve our healthcare system. It would even give us the chance to review the thousands of plans and concepts of plans that my colleagues are putting forward.

This bill is too little, too late. And for that reason, I respectfully object.

The PRESIDING OFFICER. The Senator from Kansas.

Mr. MARSHALL. Mr. President, again, I greatly respect the words and have great respect for the Senator, my colleague and good friend from Delaware. And I know both of us share the same heart—that we want every American to have meaningful access to healthcare.

There are many things we agreed upon. The PBM Disclosure Act is but one example. Bringing down the cost of prescription drugs would be a huge priority for us as well. We both agree that fraud is a problem.

Take this bill and improve it. Is it too little? It probably is too little. But it is a start; it is a framework. You have the legislative text.

Look, I have become very pragmatic in my days in Washington. I can't change what happened in 2010, before I got here. I can't change all the histories of dealing with healthcare. I can't change the fact that we have 100

Senators with 100 ideas to fix ObamaCare. I have already said ObamaCare—tackling ObamaCare is like tackling a buffalo that just ran through a barbed-wire fence; and every time you try to pull a layer of that barbed wire off, you get poked with it. I understand that.

But this is a great framework. It is my effort at a bipartisan framework to get us started. And, again, offering the olive leaf of extending the Biden-era subsidies for another year, I think, is just the biggest olive branch I can make.

Again, come January, my Democrat friends are going to have to answer that question: Why did you walk away from Senator MARSHALL's plan to extend those subsidies for a year?

I yield the floor.

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

HEALTHCARE

Mr. CASSIDY. Mr. President, what we are debating here are two visions of the future of the ObamaCare exchange. Democrats want to cover the cost of health insurance to benefit health insurance companies. And Republicans want to cover the cost of health insurance to benefit patients.

Now, I can actually kind of develop that idea. If you look at what insurance—what Democrats want to do, they want to give 100 percent of the money to the insurance companies. And the insurance company, by law, under ObamaCare, can take 20 percent of it for overhead and profit. Eighty percent of it goes to patient care, but, of course, you have got to get your prior authorization and permission for this 80 percent to be spent upon you.

On the other hand, the Republican plan is to put the money into the patient's pocketbook so that she has money to pay for the insurance out of pocket. And here, 100 percent of the money she receives goes toward some sort of healthcare or dental care or vision care. By the way, that is a distinction. Under the Democratic plan, the insurance company doesn't cover your dental work, they don't cover the orthodontia for your child, and they don't cover the eyeglasses you need. Under what we are doing, putting it into her pocketbook, for physicians, dentists, drugs, vision care—this is a patient-driven account, of which 100 percent is going to the care she knows she needs. And she does not need to seek permission in order to obtain it.

Now, to put a little bit of a point on it, a 50-year-old couple with children 19 and 20 could get as much as \$5,000 in their account. Think about what that means for somebody with chronic disease. If you have diabetes, under the Democratic plan, there is a \$6,000 deductible; and someone has to pay \$6,000 before they begin to get coverage for everything they need for their chronic disease. Under the Republican plan, putting \$5,000 for that couple I spoke of earlier, with two children, it is in their pocketbook. They can pay for that

which they need for chronic disease. So what is not to like?

I would say that the Republican plan meets Americans where they are financially. Most Americans don't have more than \$1,000 in their savings account.

Let me repeat that: Most Americans don't have \$1,000 in their savings account.

The Democratic plan would require them to have a deductible and to pay \$6,000 before the insurance kicks in.

So let's compare the two plans. The red side is the Democratic plan, and the green side is the Republican plan. The Democratic plan is to give 100 percent of the enhanced premium tax credits to insurance companies. The Republican plan is to give the money to the patient—into her pocket, her pocketbook, her purse—to pay the out-of-pocket for the insurance plan.

What could it be used for? Under the Democratic plan, it subsidizes premiums. Under the Republican plan, the patient gets the care she knows she needs—the physician visit, the dental visit, the glasses, the prescriptions. And she doesn't need permission to do it. She does it because she knows she needs it.

Who makes the decision?

Anyone who has fought with an insurance company over prior authorization knows that the golden rule applies: The one who has the gold makes the rules. And the insurance company makes the rules as to what you can get. And by the way, that does not cover dental, orthodontic work, eyeglasses, and other things.

Here, the patient decides. The patient has the power. It is not profit to insurance companies; it is power to the patient. And if she needs eyeglasses, she uses this money that we put into her account to purchase them. If her child needs to go to the dentist for dental cleaning, she can do that.

Does it lower costs? Well, if you give the money to the insurance company, clearly, it does not, because since the ObamaCare law passed, costs have exploded. But studies show that if you give the patient the money in her pocketbook, she is going to shop for the best deal. She is going to say: Wait a second. The x ray costs \$50 here and \$500 there—and the difference can be that much. I am going to go to the place where it is cheaper.

Now, as soon as everybody starts going to the place where it is less expensive, the place that is more expensive lowers its cost. That has been shown empirically to work.

The Republican plan gives the patient the power to shop, the power to take advantage of price competition; and that lowers costs.

One more thing, how does it work with low-cost bronze plans? Under the tax cuts for working families bill, Republicans passed a law saying that health savings accounts—this kind of putting money in the pocket—can work with a bronze plan. So, if you

give the money to the bronze plan, which is permitted under current law, the patient now has the ability to purchase a cheaper plan on the exchange, saving thousands of dollars relative to the plan that Democrats want to force somebody to buy. And what we have seen under the current system is that there are all kinds of fraud and there are all kinds of unauthorized enrollment, costing taxpayers billions of dollars.

Now, it has been said that somehow Republicans are supporting junk insurance. And you have got to laugh. Mr. President, you have got to laugh. Republicans are using the same plans on ObamaCare that Democrats fought for. We are merely taking the framework, set up on a unanimous partisan vote by Democrats, to create these plans on ObamaCare, and that is the one we are using. So for some to call those junk plans, it is kind of like saying: We gave the American people junk.

I would argue that the Republican Party is making these better.

Look at this. Under the Democratic plan, there is a \$6,000 deductible. Imagine the housewife who has to take her child to the urgent care center and knows she doesn't have the money.

This is a cartoon, but in that cartoon, there is real stress and anxiety for that mama who cannot afford the care she knows her daughter needs.

Look at this one, the Republican plan. She has got money in her pocket. She has got money in her account. She has got money in her pocket for the insurance out-of-pocket. And if she starts off with money in her purse to pay for that need, why can't people see that is where the American people are?

If the average American family has less than \$1,000 to spend and our plan puts thousands in their account to pay for the healthcare that they know they need, what is the objection to that?

Now, by the way, I think you finally found the objection. There is a concern that Republicans are somehow interjecting abortion politics. And I will point out that Democrats have voted for appropriations bills with Hyde protections since the 1970s. For over four decades, Democrats have voted for language on this issue, and suddenly—suddenly—they are shocked. So instead of giving this patient the money she needs, it is going to be sacrificed on the altar of abortion politics.

I say: Go with her. I say: Support her. Let's go to the last slide, please.

We need to make healthcare affordable again.

One, we know the Democratic extension will not pass. It is going to stick people with \$6,000 deductibles. It does nothing for fraud. It is not a solution. What we need—by the way, I am also going to say this: I am, obviously, saying we don't need the Democratic solution. My Democratic friends will say they don't like the Republican solution.

Let me argue that we try and get an American solution, not an R, not a D,

but an A solution. And if we do so, let's give power to the patient, not profit to the insurance company. Let's make healthcare affordable again.

With that, I yield the floor.

The PRESIDING OFFICER. The minority whip.

Mr. DURBIN. Mr. President, Senator BILL CASSIDY of Louisiana is my friend and my colleague. We work together, and he is a real doctor—a real doctor. And what I have read about his medical career is that he treated people with limited income, and I respect him so much for doing that.

Thank you for all that.

I happen to disagree with his policy on this, and let me explain why. How far does \$1,000 take you in medical bills? How far does \$1,500 take you in medical bills?

Well, I had a knee replacement last year. Do you know what the surgeon's bill was for that? It was \$30,000.

Mr. President, \$1,000 doesn't take you very far in the 21st century. It didn't take you very far in the 20th century. And to have that as your fallback position to protect yourself—imagine a cancer diagnosis—a shocking cancer diagnosis. And you think: Well, thank goodness I have got \$1,000 in the bank for treatment for cancer.

That isn't going to work.

To say that people are going to have money left over at the end of the day and this is what they really want doesn't reflect reality.

Mr. CASSIDY. Would the Senator yield?

Mr. DURBIN. I would be happy to yield.

Mr. CASSIDY. I didn't show the poster, but in our proposal taking the 50-year-old couple with 2 kids, 19 and 20, their family would get \$5,000 in their account, and the net deductible would be less than the silver plan the Democrats want. And the policy premium would be \$6,000 less a year.

So if the plan, that my good friend the minority whip is saying is the better plan, has a higher net deductible, that, I don't think, works for the gentleman's knee replacement.

And the family \$5,000 deductible can be applied, so you would have \$5,000 top.

I have taken too much time, but thank you for yielding.

Mr. DURBIN. No, I am happy to yield, and we came perilously close to debate on the Senate floor, by my recollection. Wouldn't it be something if we did this on a regular basis? Wouldn't it be something if we took this whole issue, the subject matter, and put it in a committee for a real hearing, with experts, where Democrats and Republicans sat at the same table? It would be almost like the U.S. Senate used to be. It doesn't anymore.

What I am suggesting today is simple and direct. I met a waitress at a Chicago Loop restaurant for breakfast last Sunday. She is 63 years old, and she spent her life as a waitress. It has taken its toll on her physically.

She was in tears as she described to me what is going to happen to her if we fail to act the right way today on this legislation. She is going to see her health insurance bill more than double—\$300 or \$400 more per month. Let me tell you, she doesn't know how she can do it, and I don't either.

That is what we have to address first. Triage, I would say to my friend Dr. CASSIDY, triage is first. Help these families pay for their premiums, and then let's do our job. Our job is to sit down and debate his idea, my idea, the ideas of the Senate, and to come up with an alternative that serves the needs of this Nation. That is what the Senate is supposed to do. But this take-it-or-leave-it, high-noon strategy isn't fair.

If, at the end of the day, we fail to help this waitress pay for her premiums and she loses her health insurance, I don't know what is going to happen next. This poor lady is working hard, and she has every day of her life. Why we won't come to her rescue first and then get into this policy debate, I just don't understand.

As Members of the Senate, we cast votes, and many of them are routine, but there are votes that stay with us for decades. I will never forget voting for the Affordable Care Act. It was this time of year, December 24, 2009. The Senate passed a bill that helped make healthcare affordable for millions of Americans.

It was 8 years later, on a late night in 2017, that the late Senator John McCain of Arizona came through those doors at 2 in the morning, stood in the well right by this table, lifted his right arm as high as he could, and came down with the thumbs no. With that, he saved the Affordable Care Act. That "no" vote sunk President Trump's first attempt to abolish the Affordable Care Act, and it gave peace of mind to millions of Americans who would come to rely on it.

It has been more than 8 years since Senator McCain showed that courage and 16 years since we passed the original bill. Yet, once again, the Senate is about to take another vote on healthcare that will reverberate for decades throughout America.

The question today is whether the Senate will extend the ACA's enhanced premium tax credits. What is that? In the Tax Code, it is a helping hand to pay your premium based on your family income.

If we fail to extend these tax credits, that waitress I described to you and 22 million Americans will begin to pay double or triple for their insurance in 3 weeks, including 500,000 people living in Illinois. More than 4 million Americans will not be able to afford their insurance at these higher rates and will be forced to forgo health coverage for next year. Merry Christmas.

Senate Democrats have sounded the alarm bell about the need to prevent this catastrophe. We have told the stories of people who have called our offices, crying because they are afraid

they won't be able to afford their healthcare next year. We have shared reports from farmers, small businessmen, and rural hospitals that rely on these tax credits. The only thing left to do is vote.

The question is whether 13 Republicans will not endorse the Affordable Care Act but will stand by the people who face these premiums and then be willing to sit down and have a meaningful, bipartisan debate on where we should go as a matter of policy. Isn't that what the Senate is all about?

Every Senate Democrat is united behind the plan just to extend the ACA enhanced premium tax credits and ensure continued access to quality, affordable health coverage. Republicans are not united behind any plan. They haven't been for 15 years. The Republicans hate ObamaCare like the Devil hates holy water. They can't imagine voting for it.

What I ask them to do is hold your nose if you don't like it, vote for it today with the promise that you have the power as the majority party in the Senate to introduce a bill and start a meaningful debate in the appropriate committees. It is your authority. You are in the majority.

We need 13 of you today to join us and show the bravery that Senator McCain did in that early morning hour. Otherwise, it will not only be those here in the Senate who will remember this vote; it will be millions of Americans who saw their Senators take their health insurance away.

I want to face this friend of many, many years, this waitress in this restaurant, and tell her we not only had the chance to help her, we did help her. Let's do that together and then go home and decide what we are going to do as a matter of policy and bring that back to the Senate for deliberation.

I yield the floor.

The PRESIDING OFFICER. The Senator from Wisconsin.

Ms. BALDWIN. Mr. President, I rise today on behalf of the 275,000 Wisconsinites who buy their health insurance through the Affordable Care Act Marketplace, many of whom are downright scared. They are scared because their healthcare costs are about to double on average. They are scared because they now have to figure out which necessity in their life they can go without. And they are scared because maybe this just puts it beyond reach, and they won't be able to afford healthcare at all.

They are scared, and you know what, we actually have the ability to do something about it. At the end of the day, that is what this job is all about—listening to our constituents, fighting for them. I am not here to instill more anxiety or fear; I am here to help. It is why I first got into public service, and I still believe that to my core.

Right now, what Wisconsinites are crying out for is for some breathing room and healthcare that they can afford. These are real people with very real stories.

Take Mark, a retired firefighter from Eagle River. He wrote to me:

As it stands, my monthly healthcare premiums will increase almost six-fold under this Republican refusal to provide adequate, affordable healthcare to hardworking Americans and especially retirees after a lifetime of service.

Take Alicia from Chippewa Falls, who works hard as a childcare provider. Like so many workers in the childcare industry, Alicia needs these tax credits to afford their insurance and do what they love.

Callie from Mercer, WI, is a cancer survivor who is facing down a \$110 increase to her premiums each month. That might not seem like a lot to my Republican colleagues, but for a local library director in a small, rural, Wisconsin community, a 30-percent increase could be the difference between having insurance or not.

My Republican colleagues have kicked the can and this crisis further and further down the road, and now Wisconsin families are looking at changing careers, coming out of retirement, shuttering their small businesses, or selling their family farm.

These are real, life-changing cost increases that my Republican colleagues seem to be fine with, because, let's be clear, this is, in fact, a choice. It is a fairly simple decision, one that Americans understand: Vote to extend these tax credits or send 22 million Americans off a cliff. The choice is yours.

I yield the floor.

The PRESIDING OFFICER. The Senator from New Hampshire.

Ms. HASSAN. Mr. President, I thank the Senator, my colleague from Wisconsin, for her remarks.

You know, sometimes the wheels of our democracy don't turn as quickly as we would like. Sometimes progress is painfully slow. But it is a singularly bad day for this body, a bad day for this country, when, far from simply failing to move forward, this body chooses to take a great lurch backward, to decide to make the lives of the American people worse. By letting the Affordable Care Act tax cuts expire, by letting healthcare slip away from families all across our country, today, the majority in this body appears to be prepared to do precisely that.

Now, just a comment or two about my colleague and friend Senator CASSIDY's presentation about the Republican plan just now. Senator CASSIDY and I are good friends, and we have worked on a lot of bipartisan healthcare legislation to date. But let's be clear. The Republican plan that he is talking about doesn't help people afford their premiums in the first place. That is what this is about.

The other issue that my colleague raised about the Hyde amendment—the Hyde amendment applies to the Affordable Care Act already. What the Republican plan does is now say that people who pay private premium dollars into the ACA cannot use their private dollars to fund what are called elective abortions.

So I just want to be clear about those two points.

Now I want to talk about the progress we have made and the progress we still need to make when it comes to the Affordable Care Act. It is easy to take it for granted now, as we have grown accustomed to its benefits, but the Affordable Care Act was an important milestone in expanding opportunity for more Americans.

The ACA helped millions of Americans who were previously unable to afford insurance to get lifesaving care for themselves and their families without breaking the bank or facing bankruptcy. It allowed Americans who have preexisting conditions to actually buy insurance. It ended lifetime caps on how much treatment people could get.

Is the Affordable Care Act perfect? No. It was the product of a legislative compromise. But has the Affordable Care Act made Americans healthier, strengthened our economy, and saved lives? Yes.

I want to remind people what our healthcare system was like before the ACA was passed. People with preexisting conditions could not get health insurance unless they worked for an employer who offered a group plan, and even then, they had to work enough hours to qualify for that plan.

Even people who had insurance were subjected to something called lifetime caps. Often, the cap was about \$1 million, meaning that if you had a terrible accident or expensive disease, the insurer simply stopped covering your care when the limit was reached regardless of how long you had been paying your premiums and regardless of whether you still needed lifesaving care.

Preventive care could be expensive and was often excluded from health insurance coverage.

The ACA changed that. People with preexisting conditions can now buy insurance. People between jobs can buy insurance. Self-employed people can buy insurance. Lifesaving and cost-saving preventive care is covered at no charge. There are no lifetime limits on care.

Now, the smart thing for us to do right now would be for us to build on this progress. There is no shortage of ways in which we need to improve our healthcare system. We need to lower healthcare costs, and there are good, bipartisan proposals in this body to do that. We need to end the inefficient and harmful fragmentation of care. I am ready to work together on a bipartisan basis to do just that.

But rather than tackle those problems, the Trump administration has actively worked to make healthcare even less affordable. This summer, the Republicans gutted Medicaid in order to pay for tax breaks for billionaires. Now, with tax credits for the Affordable Care Act due to expire, the President and Washington Republicans will instead allow health insurance premiums to skyrocket for millions of

Americans. The American people asked for lower costs; the President is handing them a steeper bill.

In recent weeks, too many of the conversations in this Chamber about the path forward have gotten stuck in the abstract. We have seen proposals that resemble ideological wish lists rather than the type of compromise that would recognize the reality that Americans are facing on the ground. But I can assure you that, for my constituents, rising healthcare costs are not abstract. It is not abstract for a Granite Stater who will have to pay \$1,000 more a month for health insurance. It is not abstract for the family who depended on these cuts in order to make ends meet and who doesn't know if they will have to pull from their savings or find a cheaper place to rent just to afford these new premiums.

And it is not abstract for the untold number of Americans who will miss out on routine care and preventive screenings for cancer and other diseases because they couldn't afford their new premiums.

I find myself struck by some of the words that we use in this Chamber to talk about healthcare: risk pool, cost sharing, silver tier, gold tier. Behind all these words and jargon, we are talking about people. We are talking about being sick and being healthy, about living with dignity or struggling in despair. We are talking about living and dying.

This is an issue that demands the most serious of leadership, but plainly that is just not what the American people are getting from Donald Trump's Washington today. Today's vote leaves me with a simple question, a question that the majority in this body ought to answer: By your vote today to make insurance premiums more expensive, who in America wins?

The majority in this body may carry the day with their votes, but who exactly will this victory be for? What family will be made better off by health insurance becoming more expensive? Which child is going to become healthier?

Make no mistake, today's healthcare vote is more than a vote on a single bill. In the greater sense, in the fight to make American life more affordable, in an effort to save the American people from a looming healthcare calamity, the majority of this body, the majority in the House, and, above all, the President himself, are, in short, choosing to abstain. They are throwing up their hands, essentially saying: Nothing we can do here.

Given the choice between keeping healthcare premiums from skyrocketing for millions of Americans or letting these tax cuts expire, the President is content to do nothing. In the face of this healthcare crisis, in the face of Americans of all political stripes clamoring for a solution, the Republican majority is deciding that the world's greatest deliberative body ought to shrug its shoulders and abdicate its responsibility.

So, yes, I will close with this: It is a bad day for this country and for the U.S. Senate. And it is a day that the American people will remember.

I yield the floor.

The PRESIDING OFFICER. The Senator from Idaho.

Mr. CRAPO. Mr. President, I ask unanimous consent to speak for up to 5 minutes before the scheduled rollover vote.

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

Mr. CRAPO. Mr. President, we spent a lot of time this week talking about the problems of our healthcare system: Premiums are rising; hospitals are struggling; and out-of-pocket costs are out of control.

These problems are not new. And, frankly, notwithstanding all of the rhetoric of my colleagues from the other side, the fact is, these enhanced premium tax credits that we are debating today, if they were extended or not extended, are not going to change the fact that premiums are skyrocketing. They are skyrocketing because of the failure of our current healthcare system.

These problems were used to justify ObamaCare in the first place, and ObamaCare has progressively made them worse. Americans did not keep their doctors, as was promised under ObamaCare; Americans did not keep their insurance plans; and their premiums did not go down. In fact, ObamaCare premiums have risen at roughly double the rate of employer-provided healthcare plans since their inception.

Our Democrat colleagues have only had one response to these skyrocketing premiums: more spending, which they claim is going to stop premium increases. It, in fact, facilitates greater premium increases.

Without ever winning a single Republican vote, they created the Obama premium tax credits, expanded them to all Americans—to Americans of all income levels—and then extended that expansion. These credits did not reduce costs and did not reduce premiums. All they did was shift the cost to taxpayers and help insurance companies to continue to hike premiums higher and higher.

Democrats know that ObamaCare has failed. They themselves have said so on this floor. But with a deadline quickly approaching again—a deadline that was set by my own Democrat colleagues—they say we have no choice but to extend this failed policy one more time on these premium tax credits. This is a policy they could not even make permanent when they controlled the Presidency, the Senate, and the House. Even so, their only offer is more spending.

They call their plan a clean extension. A 3-year extension of this program with no reforms, costing hard-working families \$83 billion, with tens of billions of dollars going to insurance companies and fraudsters, is anything but clean.

Twice on this floor this week Republicans have offered the Democrats a unanimous consent to have a temporary extension of these premium tax credits with needed reforms to address waste and fraud and abuse that is rampant, and twice this week that has been rejected.

The Government Accountability Office recently uncovered how embarrassingly easy it is to game this ObamaCare subsidy system, with the Wall Street Journal calling it a "Mecca for Fraud."

Even the Washington Post recognized that "ObamaCare subsidies make it too easy to scam the system."

Fortunately, we have another option. Instead of the minority leader's \$83 billion extension, which would do absolutely nothing to reduce fraud and would keep driving premiums higher, Senator CASSIDY and I have offered a fiscally responsible proposal that will reduce premiums, save taxpayers money, and give Americans control over their healthcare. Our bill provides prefunded, patient-driven health savings accounts for Americans enrolled in qualified ObamaCare bronze and catastrophic plans.

Importantly, low-income Americans will still receive subsidies for those ObamaCare plans through the permanent portion of the premium tax credits system. Americans who choose this option will have both insurance coverage and help paying for their remaining out-of-pocket costs—all without giving insurance companies a reason to enroll them in plans without their knowledge, as has occurred for years.

Our bill also fixes an error in the original design of ObamaCare by funding the cost-sharing reductions that it mandated, reducing benchmark premiums by 11 percent. Let me point that out. That piece of our proposal will reduce premiums by 11 percent.

The minority leader's plan is not going to pass. But if just a few of my Democrat colleagues will join us in voting for our bill, we can put this crisis behind us and lay the groundwork for true reforms.

For instance, Senator WYDEN and I remain intent on getting our bipartisan pharmacy benefit manager reform to the President's desk. We have many other bipartisan agreements on needed healthcare reforms that we need to move forward on.

The choice before us is clear: We can continue with business as usual and extend the same policy that has brought our healthcare system to the point where every Member of this body admits that it is broken or we can try something different. We can change the incentives that ObamaCare gives insurers to drive premiums higher and put our confidence in Americans to make the best decisions about their own healthcare.

If we fall off the Democrat-created subsidy cliff, it will not be because we did not have a different choice.

I yield the floor.

The PRESIDING OFFICER. The minority leader.

Mr. SCHUMER. Mr. President, today is D-day—decision day—for Republican Senators. Will Republicans side with the American people and avert the disastrous impending healthcare crisis or will they abandon American families as premiums shoot through the roof come January 1?

In a few moments, the Senate will vote on two bills: the Republican bill and Democrat's clean, simple extension of the ACA tax credits.

I say to my Republican colleagues: Our bill is the last train to leave the station. It is the only realistic option before the Senate today that solves the healthcare crisis. If Republicans don't climb aboard, there won't be another chance to act before premiums skyrocket next year.

Now, Republicans have dithered long enough. Democrats are fighting to lower costs for the American people, while Republicans are fighting among themselves.

And let me say this about the Republican bill. The Republican bill is not true healthcare reform. It is not a healthcare plan whatsoever. It is junk insurance. The Republican bill is simply junk insurance.

For a while, it actually looked like the Republicans wouldn't put up a bill at all. But after that became too embarrassing an option for them, they used Scotch tape and glue to come up with this ridiculous proposal that can't be taken seriously.

The Republican plan does nothing—nothing—to extend the tax credits for even a day. Our bill, of course, extends them for 3 years.

Under the Republican plan, the big idea is essentially to hand people about \$80 a month and wish them good luck; say that you are on your own no matter what happens. And to even qualify for that check, Americans would be forced onto bare bones bronze plans with sky-high deductibles: 7,000 or 10,000 for an individual and tens of thousands for a couple. So the deductibles are so high, even that is not paid for by the \$80 a month. And then Americans are stuck and have nothing, nothing, nothing.

The Republican plan is a "When you get sick, you go broke" plan, plain and simple.

The only answer—the only right answer—to solve this crisis is what Democrats propose today, a clean, simple extension of current tax credits. Our bill is the only plan that halts premiums from shooting through the roof.

And as Americans know, this is not a symbolic vote. This is a life-and-death vote for millions of people wondering if they will be able to afford health insurance next year.

Millions will lose health insurance. Tens of millions will have to change plans and doctors and get high deductibles and high copayments that they can hardly afford healthcare if we don't do this. So America is counting on us—counting on us—the Senate.

Republicans, America is counting on you to do the right thing and vote yes on our bill.

A "yes" vote on our bill means premiums will not double or triple or more starting January 1. A "yes" vote means lower costs for the American people and greater help for them to pay for the things they need. A "yes" vote means dignity, security, and peace of mind for tens of millions of American families. It means our healthcare system averts a disaster.

There is only one right thing to do, and that is for Republicans to vote yes on our bill. The American people will not forget which way Senators vote today.

I yield the floor.

CLOTURE MOTION

The PRESIDING OFFICER. Pursuant to rule XXII, the Chair lays before the Senate the pending cloture motion, which the clerk will state.

The legislative clerk read as follows:

CLOTURE MOTION

We, the undersigned Senators, in accordance with the provisions of rule XXII of the Standing Rules of the Senate, do hereby move to bring to a close debate on the motion to proceed to Executive Calendar No. 285, S. 3386, a bill to provide a health savings account contribution to certain enrollees, to reduce health care costs, and for other purposes.

John Thune, John R. Curtis, Tim Sheehy, Roger F. Wicker, Joni Ernst, Markwayne Mullin, Mike Crapo, Jon A. Husted, Lindsey Graham, James E. Risch, Todd Young, Mike Rounds, Chuck Grassley, David McCormick, John Boozman, John Barrasso, Bill Cassidy.

The PRESIDING OFFICER. By unanimous consent, the mandatory quorum call has been waived.

The question is, Is it the sense of the Senate that debate on the motion to proceed to S. 3386, a bill to provide a health savings account contribution to certain enrollees, to reduce health care costs, and for other purposes, shall be brought to a close?

The yeas and nays are mandatory under the rule.

The clerk will call the roll.

The legislative clerk called the roll.

Mr. BARRASSO. The following Senator is necessarily absent: the Senator from Montana (Mr. DAINES).

The yeas and nays resulted—yeas 51, nays 48, as follows:

[Rollcall Vote No. 643 Leg.]

YEAS—51

Banks	Graham	Moran
Barrasso	Grassley	Moreno
Blackburn	Hagerty	Mullin
Boozman	Hawley	Murkowski
Britt	Hoeben	Ricketts
Budd	Husted	Risch
Capito	Hyde-Smith	Rounds
Cassidy	Johnson	Schmitt
Collins	Justice	Scott (FL)
Cornyn	Kennedy	Scott (SC)
Cotton	Lankford	Sheehy
Cramer	Lee	Sullivan
Crapo	Lummis	Thune
Cruz	Marshall	Tillis
Curtis	McConnell	Tuberville
Ernst	McCormick	Wicker
Fischer	Moody	Young

NAYS—48

Alsobrooks	Hickenlooper	Reed
Baldwin	Hirono	Rosen
Bennet	Kaine	Sanders
Blumenthal	Kelly	Schatz
Blunt Rochester	Kim	Schiff
Booker	King	Schumer
Cantwell	Klobuchar	Shaheen
Coons	Lujan	Slotkin
Cortez Masto	Markey	Smith
Duckworth	Merkley	Van Hollen
Durbin	Murphy	Warner
Fetterman	Murray	Warnock
Gallego	Ossoff	Warren
Gillibrand	Padilla	Welch
Hassan	Paul	Whitehouse
Heinrich	Peters	Wyden

NOT VOTING—1

Daines

The PRESIDING OFFICER (Mr. HAGERTY). On this vote, the yeas are 51, the nays are 48.

Three-fifths of the Senators duly chosen and sworn not having voted in the affirmative, the motion is not agreed to.

The motion was rejected.

CLOTURE MOTION

The PRESIDING OFFICER. Pursuant to rule XXII, the Chair lays before the Senate the pending cloture motion, which the clerk will state.

The bill clerk read as follows:

CLOTURE MOTION

We, the undersigned Senators, in accordance with the provisions of rule XXII of the Standing Rules of the Senate, do hereby move to bring to a close debate on the motion to proceed to Calendar No. 284, S. 3385, a bill to amend the Internal Revenue Code of 1986 to extend the enhancement of the health care premium tax credit.

Charles E. Schumer, Patty Murray, Amy Klobuchar, Brian Schatz, Tammy Baldwin, Richard J. Durbin, Christopher Murphy, Jack Reed, Tina Smith, Tim Kaine, Alex Padilla, Jeff Merkley, Maria Cantwell, Christopher A. Coons, Elizabeth Warren, Peter Welch, Richard Blumenthal.

The PRESIDING OFFICER. Under the previous order, the mandatory quorum call under rule XXII has been waived.

The question is, Is it the sense of the Senate that debate on the motion to proceed to S. 3385, a bill to amend the Internal Revenue Code of 1986 to extend the enhancement of the health care premium tax credit, shall be brought to a close?

The yeas and nays are mandatory under the rule.

The clerk will call the roll.

The bill clerk called the roll.

Mr. BARRASSO. The following Senator is necessarily absent: the Senator from Montana (Mr. DAINES).

The yeas and nays resulted—yeas 51, nays 48, as follows:

[Rollcall Vote No. 644 Leg.]

YEAS—51

Alsobrooks	Coons	Hawley
Baldwin	Cortez Masto	Heinrich
Bennet	Duckworth	Hickenlooper
Blumenthal	Durbin	Hirono
Blunt Rochester	Fetterman	Kaine
Booker	Gallego	Kelly
Cantwell	Gillibrand	Kim
Collins	Hassan	King