

of the Union Address that the Department “symbolized the government’s permanent concern with the human problems of our citizens.”

The person at the helm of this Department must above all share that concern that President Eisenhower put out there so clearly. He must prioritize the well-being of his fellow Americans, must be guided by facts and science, not politics or personal opinions. That is why 17,000 doctors have sounded the alarm about Mr. Kennedy’s nomination. It is why more than 700 public health experts called his nomination “dangerous.” It is why, for the first time in living memory, more than 70 Nobel Prize winners across the fields of medicine, chemistry, physics, and economics came together in public opposition to this Cabinet pick.

I believe in listening to experts. I trust doctors. I trust public health researchers. I trust Nobel Prize winners. That is why, on behalf of every senior who relies on medications to live and age with dignity, every child who deserves the promise of a future free from preventable diseases, and every American whose health and safety depend on sound scientific guidance, I will be voting no on his nomination, and I urge my colleagues to do what they know is the right thing and vote no as well.

I yield the floor.

The PRESIDING OFFICER. The Senator from Wisconsin.

Ms. BALDWIN. Mr. President, I rise today in opposition to Robert F. Kennedy, Jr.’s nomination to lead the Department of Health and Human Services.

Healthcare is not just a policy to me; it is deeply personal. I got into public service because of my own healthcare journey. When I was 9, I was hospitalized with a serious childhood illness. It was similar to spinal meningitis—that wasn’t the exact diagnosis but similar. While I fought to survive and then ultimately to get better and fully recover, my grandparents, who raised me, struggled to figure out how to pay for the lifesaving care that I needed and received. In total, I spent 3 months in the hospital in Madison, WI.

When I talk about healthcare, I don’t just speak as a U.S. Senator or as a Wisconsinite; I am speaking as a person who knows what it was like to spend months in a hospital bed. I am speaking as someone who knows the emotional toll and the financial stress that it put on my loved ones. I am speaking as someone who knows firsthand how important it is to protect our children from serious illness and the dire consequences when our children do get sick. That is why I was so disturbed by Robert F. Kennedy, Jr.’s nomination to lead our Nation’s largest public health Agency.

As a member of the Health, Education, Labor, and Pensions Committee, I was able to question Mr. Kennedy at one of his nomination hearings. I watched as he over and over again parroted the same answer when

pressed about his anti-vaccine views. “Show me the data,” he would say. When asked if he still believes that vaccines cause autism, he would not commit. He again said, “Show me the data.”

Well, Mr. Kennedy has had every opportunity to review the overwhelming consensus of doctors, researchers, and experts that vaccines are safe and effective. He certainly had the opportunity to do so not just before his confirmation hearing but before spending a decade peddling misinformation and conspiracy theories about vaccines.

Apparently, he didn’t look at the research before traveling to Samoa to rail against the measles vaccine. Perhaps if he had, the 83 people—primarily infants and children—who died from a subsequent outbreak of measles would still be with us.

I think it is clear that he also didn’t bother to review the research before spreading misinformation online, with one study finding that among verified Twitter accounts, Mr. Kennedy was by far the top purveyor of vaccine misinformation, garnering more than three times as much engagement as the second most retweeted account.

Now, we are supposed to believe that if we simply show Mr. Kennedy the research, he will change his tune. Well, I believe someone applying to be the top health official in this country shouldn’t have to be convinced to follow the science. We shouldn’t have to hold their feet to the fire on whether they would be willing to protect our children from polio or measles. They should already be an expert in the field, not an expert at evading responsibility and spreading conspiracy theories.

Americans deserve a leading health official who believes in science, not in conspiracies. If Mr. Kennedy is not willing to believe or even review the overwhelming data on vaccines before spreading dangerous lies about their safety, then I highly doubt he will change his tune when leading the Department of Health and Human Services. And it is not just his statements like “No vaccine is safe and effective.”

By the way, he really did make that statement. I have seen it on a podcast. But he has repeatedly made claims with no evidence. He said Wi-Fi causes cancer. He said antidepressants caused school shootings. He questioned whether HIV does, in fact, cause AIDS. And time and again, he is showing us who he is. By his own admission, he is not interested in the research. He has no time for the data. And these claims may seem outlandish. They may seem harmless, but they all point to a fundamental truth about Mr. Kennedy. He not only does not believe the science, but he is willing to actively undermine it. He spreads dangerous conspiracy theories, and he puts families’ health and safety at risk.

RFK, Jr., will put Americans in harm’s way. Kids will be at risk of getting preventable diseases like measles

and mumps. Women will have essential healthcare ripped away. Families will be further away, not closer, to having cures to diseases like cancer. And, sadly, the list goes on and on.

So I urge my colleagues, especially those who understand how dangerous vaccine skepticism is, to ask themselves this simple question: Will this nominee keep your constituents safe? Or will he harm them?

For Robert F. Kennedy, Jr., the answer is clear. I oppose this nomination on behalf of Wisconsin families and encourage my colleagues to vote no.

I yield the floor.

The PRESIDING OFFICER (Mr. BANKS). The Senator from Georgia.

NOMINATION OF ROBERT F. KENNEDY, JR.

Mr. WARNOCK. Mr. President, I rise tonight in strong opposition to the nomination of Robert F. Kennedy, Jr., to lead the Department of Health and Human Services. It is no overstatement for me to say that it is hard for me to imagine a nominee less qualified that would actually be presented for the job of HHS Secretary. Robert F. Kennedy, not only does he not pass muster, this is not even close.

I still can’t believe we are even having this discussion. He is a conspiracy theorist who is so focused on his conspiracy theory. When you think of what we need the HHS Secretary to do, Robert F. Kennedy is a hazard to our health. Certainly, we can do better than this. He is just manifestly unqualified.

I don’t know how else to put it. This is not a partisan exercise for me. In fact, some of the nominees that have been presented, I voted for some of them. But I can’t vote for Robert F. Kennedy. Not only is he a hazard to our health, not only is he manifestly unqualified, it is clear that he will be a rubberstamp for Washington Republicans and their attempts to raise healthcare costs for hundreds of thousands of Georgians. He is a threat to public health and the thousands of Centers for Disease Control and Prevention employees who work tirelessly every single day to keep us safe.

He has enforced the administration’s gag order that is literally keeping medical professionals from sharing information to get diseases like bird flu under control, cancer researchers from doing their important, lifesaving work—who among us has not been touched in some way by cancer?—doctors and their ability and hospitals from accessing resources to lower the maternal mortality rate, which is abysmally high in this country, particularly in a State like Georgia. I will be voting no on Mr. Kennedy’s nomination to lead HHS, and I urge my colleagues on both sides of the aisle to somehow find a way to do the right thing and vote no with me.

Mr. Kennedy won’t work to lower Georgians’ healthcare costs or increase

access to healthcare for my constituents who are caught right now in a healthcare coverage gap.

I was so proud that, in my first few months in the Senate, I was able to play a critical role in passing the American Rescue Plan which, among other things, lowered Georgians' healthcare premiums by hundreds of thousands of dollars on average. It is, quite frankly, the kind of thing that makes this job worth it for me, being able to help ordinary folks.

That tax cut literally helped bring healthcare into reach for tens of thousands of Georgians and millions of Americans. These tax cuts are so critical that the nonpartisan Congressional Budget Office said that the number of Americans without healthcare would grow by 3.8 million in just 1 year—in just 1 year, 3.8 million, without healthcare—if the premium subsidies that we now enjoy were allowed to expire. We know that that would impact thousands of Georgians who have only recently been able to receive healthcare coverage.

If these tax credits are allowed to expire, a 45-year-old in Georgia with \$62,000 annual income would see premiums go up by \$1,414 a year. A 60-year-old couple in Georgia with an \$82,000 annual income would see their premiums go up by a staggering \$18,157 a year. Can you imagine someone making \$82,000 a year—a 60-year-old couple—and all of a sudden, their health insurance for the year goes up by more than \$18,000? We know what that is. That is the difference between having healthcare coverage and not having it at all.

Nearly one-third of Americans have less than \$500 in savings in their bank account, and so these folks don't have that kind of extra dough. They don't have that kind of extra cash on hand to pay for something that is vitally necessary, and we don't know—we never know—when we will really need our health insurance.

And so every single day, as we watch the games that Washington politicians play—for me, this is no game. I often say that if we would center ordinary people, we have a chance at getting the public policy right. If we will center people rather than politics, we might manage to get the right policy.

And so as these debates rage on, as nominees like this come before us, I am thinking about people like my constituent Cassie Cox. She is from Bainbridge, GA. She wasn't able to afford healthcare on the Affordable Care Act Marketplace until the premium tax credit brought healthcare into reach. And shortly after she became insured, she severely cut her hand, landing her in the emergency room with 35 stitches.

With insurance, it still cost her about \$300, but she could figure out how to get that dough. Had it not been for the tax credits that allowed her to get healthcare, she could have been in financial ruin from a severe cut of the

hand, something that could happen to any one of us at any time.

She is one of the hundreds of thousands of Georgians at risk of losing their coverage if these tax credits are allowed to expire. And so I ask the nominee for HHS: What do you think about those? Mr. Kennedy told me when I met him privately in my office that he wanted to work with President Trump to lower healthcare premiums. I said, Good.

That is why I was deeply troubled when I questioned Mr. Kennedy on his support for these tax credits in his hearing in front of the Senate Finance Committee. I asked him: Yes or no, Mr. Kennedy, are you aware that the premium subsidies that help save Georgians an average of \$531 a month are set to expire at the end of the year?

He said, yes, he is aware.

And I asked him, yes or no, if he supports Congress extending these tax credits which lower Americans' premiums—something he told me was a priority for him. Suddenly, Mr. Kennedy could not give me a yes-or-no answer. I wonder why.

He told me in private that he cared about healthcare. He said he was aware that these tax credits were set to expire at the end of the year. He said he wanted to lower healthcare costs. But when I asked him whether he would support Congress extending these tax credits, the crusader all of a sudden become a politician and couldn't give me a yes-or-no answer. That is not a good sign.

It is a pretty simple question to the nominee to run the Federal Agency tasked with protecting the health of all Americans: Do you support lower healthcare premiums and keeping millions of people insured? That question apparently was a bit too challenging for Mr. Kennedy.

So the nominee to run the Department of Health and Human Services cannot tell me if he supports preventing Georgians' healthcare costs from spiking and keeping people like Cassie Cox on her healthcare plan. I cannot support his nomination. I don't work for him. I don't work for the insurance companies. I work for Cassie Cox and other Georgians like her.

We know that these subsidies, which expire this year, are at serious risk of not getting renewed. And if there is anybody in the Federal Government who ought to be advocating for the patients, advocating for public health, reminding the President of how important this is, surely it ought to be the Secretary of Health and Human Services.

And so I am very concerned about this because, right now, my colleagues on the other side of the aisle are already starting to put together a tax bill that I would describe as Robin Hood in reverse. They want to take tax credits needed by ordinary, hard-working Georgians in order to give an unneeded tax cut to their wealthy friends. That is Robin Hood in reverse.

It is bad public policy. It is bad for our health, and I would argue it is bad for our economy as we create the circumstances for having a workforce that will be sicker, less productive, less competitive on the global stage. Mr. Robert Kennedy, I am afraid, will similarly aid and abet this process. He will hold the door open for Washington Republicans while thousands of Georgians get kicked off their healthcare.

For Cassie Cox and for the hundreds of thousands of Georgians who risk losing their healthcare coverage if premium tax credits are allowed to expire, I am voting no on Secretary Kennedy's nomination for HHS Secretary.

But that is not the only reason I am voting no. You see, every Sunday I return home to Georgia to preach in the Ebenezer pulpit. Ebenezer Baptist Church is the spiritual home of Martin Luther King, Jr. Some folks ask me why I continue to hold that job. I return to Georgia and I return to my church every Sunday because I don't want to spend all my time talking to politicians. I am afraid I might accidentally become one.

I serve in politics, but in a real sense, I tolerate politics so that I can do the important work for the people—work that I tried to do long before I came to the Senate. It was Martin Luther King, Jr., after all, copastor of our church, who said: Out of all the injustices—Dr. King said—of all the injustices, “inequality in healthcare is the most shocking and the most inhumane.”

It was that conviction that inspired me in 2014—years before I decided to run for elected office—to protest State politicians in Georgia as they were refusing to expand Medicaid and close the healthcare coverage gap which would improve healthcare access for over 640,000 Georgians.

We had just passed the Affordable Care Act. We were caught up in the throes of the debate around that policy. Georgia refused to expand Medicaid, leaving 640,000 Georgians in the healthcare coverage gap.

I preach every Sunday morning in honor of one who spent much of his ministry, according to the Gospels, healing the sick, even those with pre-existing conditions. That is what leprosy was, a preexisting condition. I could not preach the Gospel that I try to preach every Sunday and then allow Georgia politicians to leave hard-working Georgians in the cold when we literally had a prescription that could provide healing.

So I and members of my pastoral staff and other volunteers, other activists, went to the office of the then-Governor of Georgia, and we staged a sit-in at the Governor's office. And when we were arrested and taken to the Fulton County Jail, another wave of protesters came in and sat down and took our place.

I was here in the Senate again in 2017 protesting the fact that Washington Republicans were getting ready to pass a \$2 trillion tax cut for the wealthiest

Americans while cutting needed resources from the children's healthcare program, while refusing to accept the necessary levels of support for those facing food insecurity in the farm bill. So I was arrested in an act of civil disobedience that day also because I believe that healthcare is a human right.

But it is also one of the reasons I decided to go and run for office myself, to move from agitated to legislative, to translate my protest into public policy. Perhaps I could get a few more tools to help the people that I have always advocated for.

And so in my first few months in office, I made it a priority to sweeten the deal that further incentivized Georgia politicians to finally do the right thing and expand Medicaid. I thought to myself, if I could get additional resources in Federal legislation to further incentivize States like Georgia to expand Medicaid, surely, they will expand Medicaid. It only makes sense. Not only is it the right thing to do, it would be the smart thing to do.

I remember standing up to Democrats, many of whom, unlike me, represent blue States. I am from Georgia, a purple State. Georgia had not elected Democratic Senators in years. I think they sent me and my friend JON OSSOFF to represent them in the Senate because they understand we are not focused on partisan politics; we are focused on the people we were sent here to represent. I remember standing up to Democrats in a Democratic caucus talking to many of my colleagues who represent blue States. And I began to make the case for Georgia, and they responded to me.

They said: Why should we put more Federal dollars toward States that don't want to help their own constituents? Why should we reward Georgia for digging in its heels?

I reminded them that the people of Georgia were literally being held hostage by their legislature. It was standing between them and access to healthcare. And maybe if we just sweetened the pot a little bit more, we could encourage the legislature to do the right thing, encourage the Governor to do the right thing.

Sadly, after I was able to secure \$14.5 billion for nonexpansion States, including \$2 billion for Georgia alone, to just incentivize Medicaid expansion, they left that money on the table and 600,000 Georgians in the Medicaid coverage gap.

Who were they working for? I work for Georgia.

Thankfully, there are some folks who heard it, who heard the call, who responded. The incentives I secured led to North Carolina, for example, recently expanding Medicaid. Even the staunchest opponent of President Obama's signature law could not justify the overwhelming financial incentive to finally close the coverage gap.

But Georgia politicians continued to dig in their heels more than a decade after the Affordable Care Act has be-

come settled law. No matter where you are on this side of the debate, which side you are on in the debate about the Affordable Care Act, can you imagine Social Security in 40 States? Can you imagine Medicare or Medicaid in 40 States and whether you get it or not depends on which State you are in?

Well, while craven politicians are still fighting the fights of more than a decade ago, literally millions of Americans, most of them hard-working Americans—it is the working poor. That is who we are talking about. They are in the healthcare coverage gap while politicians play the games that politicians play. It is shameful. It is immoral. It is unjustifiable.

When I think about this, I often think about a woman that I met while doing my work named Heather Payne. I think of Heather from Dalton, GA, often, because here is a woman in the healthcare coverage gap. And guess what she does for a living? She is a traveling nurse. Think about that. She has committed her whole life to making sure that other people have the healthcare coverage that they need. Her job is healthcare.

She worked throughout COVID as an ER and labor-and-delivery nurse. Yet she often did not have healthcare coverage herself because she fell into the healthcare coverage gap.

That is who we are talking about, Heather the nurse. She made too much money to qualify for Medicaid—conventional Medicaid—but she could not afford coverage on the marketplace. So about 2½ years ago, Heather, who sometimes had healthcare coverage and sometimes she didn't because she was a traveling nurse—about 2½ years ago, she noticed something was wrong in her body. And even though she noticed that something was wrong and she was in pain and discomfort, she couldn't go immediately to see a doctor. She literally had to keep working through her pain, working through her discomfort, working through her uncertainty until she could save enough money out-of-pocket for a visit to a neurologist.

By the time she got to a neurologist months later, the neurologist told her that she had already had a series of small strokes. Now, with the knowledge of what had happened to her, Heather had to continue putting off serious medical procedures because she could not work as an ER nurse anymore, and yet she was still waiting to get approval for disability so she could get Medicaid coverage. There are ways in which our system is broken and needs to be reformed. Think about that. Heather, despite spending her career providing lifesaving care to others, is not able to access healthcare herself because she cannot meet Georgia's work requirements rules.

I don't see how anybody could think that is right. I think it is wrong that, in the richest country on the planet, we don't want to lower the cost of healthcare for people who work hard

serving our community and, in Heather's case, literally keeping us healthy.

And because I think about Heather quite often, I asked Robert Kennedy what does Heather need, because our Governor set up his own program with these work requirements that just create redtape. I said: Does Heather need monthly bureaucratic paperwork requirements to prove she is working when she is sick or does she need access to healthcare so she can finally get healthy and get back to work?

Mr. Kennedy told me that she needed healthcare, not work requirements—right answer. But I found his answer interesting because this administration is not working to get Heather healthcare. In fact, they want to continue to allow Georgia to waste taxpayer dollars right now, implementing an expensive and flawed system of bureaucracy and redtape to put more obstacles between Georgians and the healthcare they desperately need.

We have a program in Georgia right now that the Governor set up, rather than expanding Medicaid, and most of the money that they have gotten from the Federal Government, about 80 percent of it, is spent on administrative costs. And 18 months later, only a few thousand Georgians are signed up, while hundreds of thousands of Georgians are in the healthcare coverage gap. It is not right. It is not smart.

I believe in hard work. My late father had a fierce work ethic. I watched him and my mother wake up early every morning, and they woke us up. My dad just had this saying: You didn't sleep late in this house. You didn't care if it was Saturday or Sunday. As a little kid, he would wake us up: Now, get ready. Put your shoes on.

I said: Get ready for what?

He said: I don't know. Just get up and get ready. Be ready for whatever.

I believe in hard work. It was drilled in me. But an ER nurse who has been taking care of people for years, she doesn't need somebody to put a fire under her to get her to go to work. She needs to be able to get basic healthcare so she can get healthy and go back to work.

So I was deeply disturbed when I kept asking Mr. Kennedy about this, and he kept changing his answer. He kept flip-flopping. He said at one point:

States . . . [may] take different approaches to providing coverage to their citizens.

I wonder what was going on. I think I know what. I think, already, he is trying his best to navigate the politics of the folks in the administration. We are not committed to the Heathers of this world.

So if Mr. Kennedy can't decide if an ER nurse from Dalton, GA, who spent years saving other people's lives and now needs healthcare insurance to save her own life, deserves healthcare—if he can't decide that, then how in the world am I supposed to vote yes on his being the HHS Secretary?

So for Heather and for the hundreds of thousands of Georgians in the

healthcare coverage gap who need an HHS Secretary who will stand and advocate for them, my vote is no.

Not only that, as a Senator from the great State of Georgia, I am very proud that I represent the Georgia-based Centers for Disease Control and Prevention, the CDC, which was created nearly 80 years ago to prevent the spread of malaria across our country. The CDC does lifesaving work to control disease outbreaks, to ensure our food and our water are safe, to keep our brave servicemembers abroad safe, and to prevent leading causes of death, such as heart disease, cancer, stroke, and diabetes.

The CDC is one of those entities that, I think, is vastly underrated and underappreciated because we don't see, most of the time, the bad stuff that they have saved us from. It is hard to get credit for the bad stuff that you prevent from happening, but where in the world would we be without the CDC?

I think we got a good glimpse of how important their work is as we were all dealing with the COVID-19 pandemic. There are many other bugs like that out there. Thank goodness for their work, for the scientific method, for their discipline. The CDC employs 10,000 Georgians, and their work is so critical for every American. In addition to that, the CDC has a great economic impact on Georgia as well. For every one job at the CDC, three jobs are created. One job at the CDC creates three jobs in the Georgia economy.

That is why students come from all over the world to study in Georgia research institutions—because of its proximity to the CDC. They come to Emory University. They come to Georgia Tech. They come to Morehouse College because it is near the CDC—the Morehouse School of Medicine. The Centers host over 125,000 visitors on their campus every year. The CDC invests hundreds of millions of dollars into Georgia organizations and institutions to partner on research. In fact, for every dollar the CDC spends, the Georgia economy sees \$2 in growth—healthy people, a healthy economy. If the CDC were a business, it would be the seventh largest business in my State.

So, last June, I visited the CDC, in carrying on the spirit of my predecessor in my seat, my friend, the late Republican Senator Johnny Isakson. Johnny Isakson was a good man. We didn't agree on everything, but he was just a good human being, and he was a fierce advocate for the CDC. I am honored to carry on that tradition in his memory because he understood, as do I, that the CDC, again, is saving us from so many bad things that we don't even see. There is a way in which, because of their work, we are blessed and privileged into cluelessness. He understood not just the economic benefits of the CDC but also the tremendous importance of investing in our public health.

During the first Trump administration, Senator Isakson, a Republican,

questioned all HHS nominees about how they would support the critical work of the CDC. Think about that in sharp contrast to what we are seeing on the other side of the aisle these days. Johnny Isakson would be questioning whoever was the nominee for the HHS: What do you think about the CDC? Because—imagine that—he actually believed in advice and consent.

I don't know what we are witnessing in this moment, but we are hard-pressed to call this advice and consent between two coequal branches of government. Senator Isakson—a Republican Senator from Georgia—fought for the CDC to expand its scope of research into areas like preventing mass violence and mass shootings, pandemics; and because the CDC was equipped to expand this research, it turned Federal investments into cures and treatments and lives that are saved, not Republican lives, not Democratic lives—human lives.

It is easy to get behind the work of the CDC. It ought to be. After all, look what the CDC has accomplished over the past 80 years because the Centers have been well-funded and have always received support on both sides of the aisle: eradicating smallpox globally; nearly eradicating polio, measles and mumps, which is responsible for saving the lives of at least 42,000 Americans; finding treatments and supporting preventive care for our HIV-positive brothers and sisters; creating an 18-percent drop in infections by helping hospitals implement safety standards that save 4,500 lives each year so you don't die of some bug in the hospital that kills you while you are trying to get well. You can thank the CDC for that. This is because the CDC has always been supported by both sides of the aisle.

I saw that work up close when I visited the CDC last June. I spoke with researchers and medical professionals who were already working to address bird flu, which poses a danger to our poultry farmers and our grocery prices.

Can I tell you? I spent time with those CDC workers. They are not the enemy as some have tried to paint these Federal workers in recent days—shameful. They didn't deserve to get a blanket memo encouraging them—whoever they are, no matter what job they hold—to just resign. They are the wall. They have been protecting us. They are the reason we are able to go to sleep at night and not even think about certain things. It is hard to get credit for saving people from the bad stuff they don't even see.

I visited the insectary where the CDC was testing thousands of mosquitos for malaria to help prevent malaria deaths globally; to protect Americans traveling abroad and keep the disease from spreading to the United States.

So it is concerning for anyone who cares about stopping the spread of deadly diseases to the United States to hear some of the past comments about the CDC from the nominee to lead the

Department of Health and Human Services, Mr. Kennedy, who would manage a budget—listen—of nearly \$2 trillion—\$2 trillion, including the CDC's budget, as comparing the CDC's work to Nazi death camps and sexual abusers in the Catholic Church.

He said:

Many of them belong in jail.

So I asked Mr. Kennedy if he retracted those statements, and he denied making them at all. He said: No, I didn't say that. So I read him the transcripts of his remarks at the AutismOne conferences in 2013 and 2019, where he made these comments.

In 2019, Mr. Kennedy said:

It's the same reason we had a pedophile scandal in the Catholic Church. It's because people were able to convince themselves that the institution of the church was more important than these little boys and girls who were being raped.

And everybody kept their mouth shut—the press, the prosecutors, the priest, the bishops, the monsignors, the Vatican.

And even the parents of the kids just didn't want to believe it was happening or believed so much in the church they were unwilling to criticize it.

And, you know, that is the perfect metaphor—

He said—

for what's happening to us.

In 2013, at the same conference, he said:

Is it hyperbole when I say these people should be in jail? They should be in jail, and the key should be thrown away.

To me, this is like Nazi death camp. I mean, what happens? What happened to these kids? One in 31 boys in this country . . . their minds are being robbed from them.

And look what it does to the families. I can't tell you why somebody would do something like that. I can't tell you why ordinary Germans participated in the Holocaust.

He is talking about the CDC. You can slice and dice these words all you want. The moment at which you put the CDC and Nazi death camps in the same statement and you are the Secretary nominee for HHS, Houston, Georgia, America, we have a problem, and that problem is Robert Kennedy. God help us if my colleagues on the other side of the aisle cannot get past partisan politics and cannot find the courage to stand up to Donald Trump and say no to Robert Kennedy.

So don't chastise me and ask me how in the world would I vote against him when, 18 months ago, he was a Democrat. That is not the game we are playing here. This is not about Democrat or Republican. And if my colleagues on the other side of the aisle want to abdicate their responsibility to seriously engage in advice and consent, that is their problem. I am not obligated to play along. We are voting against Robert Kennedy not out of some partisan impulse, not out of some sense of shirts versus skins. This is literally a matter of life and death. We are voting against him because he is manifestly unqualified, and anybody who is honest knows it is true.

These are serious times. A few days ago, in the midst of all that we are facing, the Trump administration silenced

the CDC from sharing public health notices and critical health data. That is literally their job. During the first week of the Trump administration, the White House gagged the CDC, preventing them from communicating all important public health information to anybody—doctors, State health officials, parents—anybody. This impacted everything from cancer research data to updates on the bird flu, which was found in flocks of poultry in north Georgia just 3 weeks ago and is literally raising the cost of eggs. In addition to that, this order crippled their ability to combat maternal mortality.

The American Cancer Society, an organization whose work we can all support, called on the Trump administration to “restore access to comprehensive data, refrain from changes that would lead to incomplete future data collection and commit to ensure evidence-based science can proceed without additional bureaucracy or red-tape.”

They said:

Any restriction to gather and release these data could thwart our ability to address and reduce the cancer burden across all communities.

That is the American Cancer Society.

The Trump administration removed vast amounts of government datasets, resources, and web pages across the CDC to comply with the administration's shortsighted DEI Executive orders.

How is an organization like CDC supposed to address the social determinants of health? This is keeping our best scientists and our researchers from their work to treat and cure cancer.

Everybody has lost somebody to cancer, and everybody would like to see more progress in preventing and curing disease. So I would like Mr. Kennedy to explain to my constituents in Georgia how datasets that help cancer organizations work to eliminate cancer is somehow a problem that needs to be eliminated.

Thankfully, these web pages have been temporarily restored, but that is only because it was ordered by a judge.

I asked him: Yes or no, Mr. Kennedy, do you agree with the administration's gag order? He called it “standard operating procedure.” Well, I don't believe hindering cancer research is “standard operating procedure.”

I fear this administration's attempt to dismantle the CDC is going to slow down desperately needed lifesaving research, and Mr. Kennedy will be there aiding and abetting that work.

We have to address this issue of maternal mortality. This weekly update around the issues that pertain to our health is a critical resource for researchers, doctors, and public health professionals looking to combat our country's shamefully high maternal mortality rate.

Shockingly, Georgia is one of the worst States for maternal mortality and maternal healthcare access. In

fact, a Black woman in Georgia is three to four times as likely to die related to pregnancy and childbirth than her White sisters nationally. If you are a Black woman in Georgia, you are three to four times more likely to die even when you have the insurance, even when you have the income.

Now, what happens if you have a Federal Government that doesn't even allow you to report those disparities? How do you address them?

Shockingly, 89 percent of maternal deaths in Georgia are preventable. But these numbers represent women and their families, and they are more than statistics.

When I think about our maternal mortality crisis, I think of Kira Johnson, a 39-year-old woman who flew planes and ran marathons and spoke several languages. More importantly, she was a human being.

On April 12, 2016, Kira Johnson checked into a hospital with her husband Charles to give birth to their second child, Langston. Kira never returned home alive. She was literally lying on a hospital bed begging for care. She died from a hemorrhage approximately 12 hours after delivering Langston.

Kira deserved better, and so did Amber Thurman and Candi Miller, and so do the mothers across the United States who are dying at disproportionately higher rates than other developed nations. Yet this administration is working to make a preventable crisis worse by gagging the Agencies tasked with helping medical professionals keep mothers alive.

So for Georgia's incredibly dedicated scientists, researchers, and medical professionals; for Kira Johnson, Amber Thurman, Candi Miller, and their grieving families; for the thousands of women who died preventable deaths surrounding their pregnancies, I am voting no on Mr. Kennedy's nomination for HHS Secretary.

Finally—and nobody believes a preacher when he says “finally”—I am going to get out of the way so my colleague Mr. WELCH from the great State of Vermont can continue this work. But, you know, the sad irony of this moment in which we are seeing an on-slaught on anything that relates to diversity, equity, and inclusion, the sad irony of this attack on DEI is that the Trump administration, while attacking diversity, equity, and inclusion, is nominating a manifestly unqualified person to run the Department of Health and Human Services. So don't lecture me on diversity, equity, and inclusion and the virtues of a meritocracy while putting up the most unqualified person anybody can imagine to be in charge of the Nation's public health system.

At the end of the day, Mr. Kennedy is a hazard to our health. He is a rubberstamp for the agenda to raise your healthcare costs so that they can line the pockets of their wealthy friends. He is busy chasing conspiracy

theories, but he will spend no time chasing solutions to lower our healthcare costs. He apparently sees no problem gagging the CDC, even at the risk of raising egg costs, slowing cancer research, and exacerbating our shameful maternal mortality rates.

So for Cassie Cox, for Heather Payne, for Atlanta's CDC employees, in memory of Kira Johnson and thousands of women who died of preventable maternal deaths, I am voting no on Robert F. Kennedy's nomination to lead the Department of Health and Human Services. I call on all of my colleagues to join me in saying yes to our constituents and no to Robert Kennedy.

I yield the floor.

The PRESIDING OFFICER (Mrs. BRITT). The Senator from Vermont.

ELON MUSK

Mr. WELCH. Madam President, I am here to follow my colleague from Georgia Senator WARNOCK to talk about the Robert Kennedy nomination. But before I start, I just want to share some good news I just learned about with the success of DOGE.

As we all know, Mr. Musk is working hard to slash costs, sending out emails to people telling them they don't have to show up to work tomorrow, firing inspectors general—all in pursuit of a smaller government at whatever the cost to a lot of folks around.

But busy as Mr. Musk is, he found time—he found time—with Tesla to sign a \$400 million contract to provide Tesla Cybertrucks as transportation for the State Department. So it is a tribute to Mr. Musk that he was able to take a little bit of time out of his worthy full-time job of cutting costs, cutting positions, and “saving the taxpayers money”—that he was able to find an opportunity to sign this \$400 million deal for his company, Tesla.

NOMINATION OF ROBERT F. KENNEDY, JR.

Mr. WELCH. Madam President, turning back to the topic at hand—a serious question for all of us. The Health and Human Services Secretary plays a vital role in the well-being of every citizen in this country and is extraordinarily powerful in every respect. It has to do with science, medical research, cancer cures. It has to do with the delivery of healthcare and trying to deal with the very complex and very expensive healthcare system we have. It has to do with trying to create priorities for the administration of our healthcare system.

I think all of us, every single one of us, takes very seriously the advice and consent constitutional responsibility that we have when it comes to voting on a Presidential nominee.

I start out with the proposition that a newly elected President is entitled to the benefit of the doubt, so my beginning position is my hope that I can be supportive. But saying that I want to