

healthcare leaders who supported Donald Trump who won't do as much damage as RFK, Jr., will do.

There is still time for my Republican colleagues to join us and send a message that loyalty to the people of this country and a commitment to protecting the healthcare of this country matters more than loyalty to President Trump.

I yield the floor.

The PRESIDING OFFICER. The Senator from Oregon.

#### NOMINATION OF ROBERT F. KENNEDY, JR.

Mr. MERKLEY. Mr. President, my colleague from Connecticut is here past midnight. Why is he here past midnight? Because the health and welfare of our children and our families are at stake. That is why I am here, too—because it matters. It matters that you have someone in charge of Health and Human Services who has some at least basic understanding of the issues and basic experience managing a Department or managing an organization. But the candidate, the nominee, RFK, Jr., fails on experience, fails on ethics, fails on qualifications. I must say the diagnosis is grim in each of these three areas.

Let's talk a little about his experience running an agency or his medical experience. In fact, when Mr. Kennedy was asked during his confirmation hearings about some of the Agencies he would oversee, he got his facts completely wrong about just the core basics—about Medicare, a critical healthcare program for seniors throughout our Nation.

It has these parts—A, B, and C—and people in the medical world all know every detail about this. When he was asked about it, he kind of just guessed, and he said: Well, Part A covers primary care, Part B covers physicians, and Part C is a full menu of healthcare services.

Well, not even close—not even close. Part A covers inpatient hospital services; part B, outpatient and home health services; and Part C, Medicare Advantage. I don't know if he could have explained what Medicare Advantage is.

Everyone who works in the field of providing healthcare through Medicare understands these core, basic foundations, as well as lots of other details.

Senator CASSIDY talked about another piece of the healthcare puzzle. We have Medicare. We also have Medicaid. Medicaid in Oregon is the Oregon Health Plan. It provides healthcare to families who are struggling, who are not yet fully into the middle class.

He said that all of Medicaid is fully paid by the Federal Government. No. No, it is not. In fact, in Oregon, the State picks up two-fifths of the tab, and there are different categories and different ratios.

Maybe one could say that these details—one doesn't need to know every

aspect of it, but the architecture of our healthcare system, the basic architecture, just the simplest, most fundamental pieces, he has no idea about.

These are incredibly important programs in our States, Medicare and Medicaid. Forty-four percent of the births in Oregon are covered by Medicaid.

You know, Oregon is a very rural State. We have some big cities, but we have a lot of rural areas. Medicaid coverage rates are higher in rural areas because incomes are lower and more people qualify.

Medicaid is incredibly important in the counties that are very rural in my State. In my 36 counties, a good two-thirds of them or three-fourths of them would be considered extremely rural.

It is important to people in rural America that you have a leader who understands and cares about the healthcare program for rural America, but that individual is not RFK, Jr.

Not only that, it is vital that the Health and Human Services Secretary understands which ideas don't work.

Once again, our Republican colleagues are pushing to impose work requirements on Medicaid enrollees. Now, every developed country but the United States fully backs the idea that healthcare is a right. It is not a privilege that comes out of your wealth. They understand that in order to be able to work, you have to have healthcare so you can be well enough to work. That is every other country. But here, the elite across the aisle only want healthcare for the rich. They want to cut down Medicaid. They want poor people to struggle and never be able to get wealth so they can never get a job so they can keep talking about how lazy people are. Well, that is just absurd and wrong in every possible way.

Ninety-one percent of Medicaid enrollees who aren't disabled are either employed, in school, or caring for family members. Yet, every few years, my colleagues across the aisle trot out this myth, and every few years, it gets debunked, and then they bring it back. Just in a cycle, like sunspots or something, it comes around every few years.

We actually have facts on what has happened when this misbegotten idea is undertaken.

In 2018, when Arkansas implemented new work requirements during the first Trump administration, to maintain their health insurance, Arkansas Medicaid enrollees had to fill out a mountain of paperwork every month. Many of these folks worked part time. Many worked hourly jobs. Some worked several jobs to make ends meet. Not surprisingly, it is very hard, when you are struggling with making multiple jobs fit, to have the time to do massive paperwork all the time. They are working their jobs, and they are taking care of their families.

So what happened? Other Medicaid enrollees were working but could not reliably meet the required number of

hours given the normal fluctuations of low-wage and hourly work. If you ever, ever have lived in a blue-collar community—and I live in a blue-collar community—people who are patching together various part-time jobs—the managers change the schedules continuously. So now your schedule for one job conflicts with the schedule for the other job.

Anyway, it is very stressful and it is very challenging to be getting minimum wage or near minimum wage and conflicting schedules and managers changing those schedules and still trying to deal with raising kids and being there when you need to be there.

Roughly 18,000 people lost health insurance in Arkansas before a Federal judge halted the new work requirements for violating the intended purpose of the Medicaid Program.

Well, there was another State that tried this out—Georgia. They implemented work requirements in 2023. Not wanting their work requirements to be struck down by the courts, Georgia lawmakers lowered the requirements for Medicaid enrollment, thereby technically expanding coverage to fulfill the purpose of the program.

In doing so, the State of Georgia estimated that another 175,000 people would enroll in the program. They estimated 175,000, and only 6,500 people enrolled. The State of Georgia spent \$60 million in administrative fees tracking compliance with the work requirements—\$60 million; 6,500 people; \$10,000 for a Medicaid enrollee in Georgia just on administrative overhead, not providing healthcare. The costs just kept piling up.

Uninsured people still need to see a doctor, but instead of seeing their doctor and getting care early, uninsured people wait to get care until they wind up in the emergency rooms.

There is an old but accurate saying: "An uninsured patient is the most expensive patient." So anyone with half a brain would want people to be insured. They will get care earlier. They don't end up in the emergency room. It will save money. People are healthier. They are more likely to work. And it costs less. It is a win-win on every level.

Well, if you strike down the support for Medicaid here, States have to figure out if they can pick up the difference. Picking up the difference means they have to wrestle with whether to raise taxes.

Why do my colleagues across the aisle in other States have to raise taxes to provide basic healthcare?

Oh, my goodness, yeah, impose that burden on families trying to get on their feet and be able to thrive.

According to the Congressional Budget Office, every Medicaid dollar spent today reduces future deficits by \$2. That is a pretty good return. That is an investment we can't afford not to make. And the loss of Medicaid coverage hits rural communities particularly hard.

As I have noted, most of my home State is rural. A couple of weeks ago,

we saw what happened when Medicaid funding was frozen after Donald Trump's dead-of-night directive to cut off funding for programs that families depended on. Critical access hospitals, rural clinics, federally qualified health centers were terrified that they would have to lay off staff or shut their doors. Any loss of Medicaid funding for these communities would threaten what are often the only hospitals or clinics in these rural areas. They are always struggling.

But when Medicaid was expanded, when Oregon seized that opportunity, a lot of patients who were never able to pay a bill could now pay the bill because they had insurance, and that meant a much stronger foundation for rural healthcare. Don't we want a stronger foundation for rural healthcare?

It is critical to have a Secretary for Health and Human Services who understands these issues, and that individual is not RFK, Jr.

He is, however, something else: one of the world's best-known purveyors of conspiracy theories about the alleged harm that comes from effective vaccines. That is, he is a conspiracy theorist who says these effective vaccines that everyone else knows are effective, he is going to tell you something different. He is going to tell you that HPV and measles and tetanus and flu and polio and chickenpox vaccines don't work.

His conspiracy theories have been debunked time and time again. They have been repudiated time and time again, including the big one—and that is that vaccines cause autism. This is a straightforward thing that has been studied time and time and time again. And it is a powerful conspiracy theory if you happen to have a child who has autism and if it starts appearing about the same time that you are giving a lot of childhood vaccines. You could believe that maybe that is the cause. So it has been studied time and time again in children who have vaccines, who don't have vaccines. The vaccines do not cause autism.

And yet, what has he done? He says: I believe autism comes from vaccines.

In the middle of a 2017 measles outbreak in Minnesota's Somali-American community, he falsely told parents the following:

Africans and African Americans may be particularly vulnerable to vaccine injuries including autism.

He also falsely claimed that the global decline in measles was caused by "nutrition and clean water," not the measles vaccine, and that children in California were getting measles "from the vaccine or . . . from somebody who got the vaccine."

In other words, he stood it on its head and said those who are getting sick—who are getting sick because they did not have the vaccine—were getting sick because they had the vaccine.

All of this misinformation does real harm.

He even raised doubt over flu shots, claiming that "there is zero evidence that the flu shot prevents any hospitalizations or any deaths." This is completely untrue. This is wrong. A lot of people in America die every year from the flu, so this has been extensively studied.

Now, I didn't get flu shots until the COVID epidemic came and my wife, who was a nurse, said: While you are getting that COVID shot, get your flu shot. I had never gotten a flu shot before. I never worried about it. I didn't think about it. It never occurred to me. Lots of people didn't. So it was very easy to study those who get flu shots and those who don't.

And what RFK, Jr., did was not be honest with people—in fact, to tell people information he undoubtedly knew was untrue. And the result is more people get sick, more people die.

Finally, Kennedy also referred to the COVID vaccine as "the deadliest vaccine ever made." Well, we know how many people were dying before we had the COVID vaccine, and we now know how much safer things are. We are not sitting here on the floor tonight with a mask over our face. Our accompanying staff do not have masks over their face. The folks in the elevator today didn't have a mask because the threat of COVID has receded because we have a COVID vaccine.

This misinformation isn't just some harmless fun. These conspiracy theories are not some harmless fun. They do real harm. They do real harm.

I want to read to you a letter from Josh Green. He is the current Governor of Hawaii, and he is a physician. He wrote the following. I am going to quote it extensively:

Mr. Kennedy has spent years undermining one of the greatest public health achievements in history: vaccines. His rhetoric directly contributed to the tragic 2019 measles epidemic in Samoa, which infected thousands and killed 83 people, primarily children.

He goes on to say—the Governor of Hawaii, current Governor, a physician:

I witnessed this personally. As Hawaii's Lieutenant Governor at the time—

This is the Governor now—

and a practicing physician at the time, I led an emergency medical team to Samoa to administer life-saving vaccinations after misinformation—much of it spread by Mr. Kennedy and his network—led to a collapse in immunization rates.

We saw firsthand the devastating consequences: grieving parents, overwhelmed hospitals, and a nation in crisis.

The impact of Mr. Kennedy's reckless actions extends beyond Samoa. He has spread vaccine misinformation globally, leading to preventable disease outbreaks that have infected countless people.

That is the letter from the Governor of Hawaii, also a physician, who went on an emergency medical trip to Samoa and witnessed firsthand people—children—dying because of the lies from RFK, Jr.

That is not a person you bring in to lead your healthcare system, and every

one of my colleagues across the aisle knows it. They know they are hurting people by putting him into this office.

So I ask them: Rethink your responsibility to serve the people of the United States. That is your responsibility as a Member of this U.S. Senate. You have constituents in your home State. The President is not your constituent. The President has platinum-plated healthcare. We are not worried about the President getting the best healthcare. We are concerned about our constituents.

I could tell you a lot more because I have a lot of information here. My colleague from California is here, and I am looking in his direction to see if he is ready to speak. If he is, I am going to wrap up.

I am particularly struck by the letter written to us by Caroline Kennedy, first cousin to RFK, Jr. I will just summarize it and say, it is not complimentary. She says in the most dramatic terms that we are making a massive mistake to put him in charge; that he has served his wallet, he has served without ethics, he has served in a way that has hurt people time and time again, and he does not belong in office.

Mr. President, we are here, as my colleague was before me, CHRIS MURPHY from Connecticut, as my colleague from California is now—we are all here after midnight. We are here after midnight because this matters, because more people will suffer and die across this country, more children will die because of the incompetence and the full lack of ethics of the individual being considered to head up our healthcare system.

Let's not make this mistake when we vote on his final nomination.

The PRESIDING OFFICER. The Senator from California.

#### NOMINATION OF ROBERT F. KENNEDY, JR.

Mr. SCHIFF. Mr. President, today, we consider the nomination of RFK, Jr., to lead the Department of Health and Human Services.

In a time when science has given us the tools to extend life, to eradicate disease, to protect the most vulnerable among us, this body is being asked to confirm a man who has dedicated the better part of his career to attacking science.

But the debate over RFK, Jr., and his anti-science agenda does not take place in isolation. It is part of a broader and far more reaching and destructive agenda. It is part of an effort to dismantle public services, to strip away all the country's resources, to defund the Department of Health and Human Services, to take away from those who have little and hand it to those who have everything.

So this is not just about RFK, Jr.; it is about every senior who relies on Medicare, every low-income family whose children get healthcare through Medicaid, every person who depends on