

“(3) EVIDENCE OF LAWFUL PRESENCE.—The term ‘evidence of lawful presence’ means valid, unexpired documentary evidence issued by the Secretary of Homeland Security that a person is—

“(A) a citizen or national of the United States; or

“(B) an alien lawfully admitted for permanent residence (as those terms are defined in section 101(a) of the Immigration and Nationality Act (8 U.S.C. 1101(a)).

“(4) PERSONAL IDENTIFICATION CARD.—The term ‘personal identification card’ means an identification document (as defined in section 1028(d) of title 18) issued by a State.

“(b) WITHHOLDING OF FUNDS FOR NON-COMPLIANCE.—

“(1) IN GENERAL.—On October 1, 2026, and each October 1 thereafter, the Secretary shall withhold from a State 10 percent of the amounts required to be apportioned to the State under paragraphs (1) through (8) of section 104(b) for a fiscal year if that State does not have in effect and is enforcing a law that meets the requirements described in subsection (e).

“(2) DURATION.—If, before the last day of the fiscal year for which funds are withheld under this section, the Secretary determines that the State is in compliance with this section, the Secretary shall, on the first day on which the Secretary makes that determination, apportion to the State the funds withheld from that State for that fiscal year under this section.

“(c) REDISTRIBUTION OF WITHHELD FUNDS.—On the first October 1 after a fiscal year for which amounts were withheld from a State under this section, the Secretary shall redistribute those amounts to States that are in compliance with this section so that each State in compliance with this section receives an amount equal to the proportion that—

“(1) the amount apportioned to the State under section 104(b); bears to

“(2) the total amount apportioned to all States in compliance with this section under section 104(b).

“(d) EFFECT OF WITHHOLDING.—Except as provided in subsection (b), no funds withheld under this section from apportionment to a State shall be available to a State.

“(e) LAW TO REQUIRE AND VERIFY LAWFUL PRESENCE.—

“(1) IN GENERAL.—A State shall be in compliance with this section if the State has in effect and is enforcing a law to require and subsequently verify evidence of lawful presence from each applicant for a driver’s license, commercial driver’s license, or personal identification card issued by the State.

“(2) REQUIREMENT.—A law referred to in paragraph (1) shall employ a means approved by the Secretary of Homeland Security—

“(A) to confirm the identity of an applicant for a driver’s license, commercial driver’s license, or personal identification card through electronic validation of biographic and biometric information, including the name, photograph, and fingerprints of the applicant;

“(B) to confirm the validity of the lawful presence of an applicant described in subparagraph (A), including whether the applicant has lawfully maintained that lawful presence, through the results of background and security checks, including fingerprint checks by the Federal Bureau of Investigation; and

“(C) to verify the authenticity of the evidence of lawful presence provided by an applicant described in subparagraph (A), which shall include an identity document containing a photograph, by confirming the social security number or individual taxpayer identification number of the applicant with, as applicable—

“(i) the Internal Revenue Service;

“(ii) the Social Security Administration; or

“(iii) the Systematic Alien Verification for Entitlements program of U.S. Citizenship and Immigration Services.

“(f) REAL ID ACT OF 2005.—Nothing in this section affects any State requirement under title II of the REAL ID Act of 2005 (49 U.S.C. 30301 note; Public Law 109-13).”.

(b) CLERICAL AMENDMENT.—The analysis for chapter 1 of title 23, United States Code, is amended by inserting after the item relating to section 154 the following:

“155. Preserving the integrity of State-issued driver’s licenses, commercial driver’s licenses, and personal identification cards.”.

SUBMITTED RESOLUTIONS

SENATE RESOLUTION 674—DESIGNATING THE WEEK OF APRIL 13 THROUGH APRIL 19, 2026, AS “NATIONAL OSTEOPATHIC MEDICINE WEEK”

Mr. WICKER (for himself and Mr. HEINRICH) submitted the following resolution; which was referred to the Committee on the Judiciary:

S. RES. 674

Whereas there are more than 167,000 osteopathic physicians and nearly 40,000 osteopathic medical students in the United States;

Whereas the number of osteopathic physicians in the United States grew by over 70,000 in the last decade;

Whereas osteopathic physicians and medical students train at high-caliber schools of osteopathic medicine across the United States, including in rural and underserved communities;

Whereas osteopathic medical schools make up 4 of the top 10 medical schools, with the most graduates practicing in medically underserved areas;

Whereas, in 1874, Andrew Taylor Still, Doctor of Osteopathic Medicine, introduced the principles of osteopathic medicine, emphasizing the idea that the body is a unit, and its structure and function are interrelated;

Whereas osteopathic physicians have made significant contributions to the healthcare system of the United States since the founding of the first osteopathic medical school in 1892;

Whereas osteopathic medicine emphasizes a whole-person, patient-centric approach to healthcare, and osteopathic physicians play an important role in the healthcare system of the United States;

Whereas osteopathic physicians train and practice in all medical specialties and practice settings;

Whereas 53 percent of osteopathic medical students matched into primary care residency positions in 2025, helping address the growing United States physician shortage, of which half of the number of needed physicians are projected to be primary care physicians;

Whereas osteopathic physicians and medical students in the United States are dedicated to improving the health of their communities and delivering high-quality care for the body, mind, and spirit; and

Whereas osteopathic physicians practice in every State: Now, therefore, be it

Resolved, That the Senate—

(1) designates the week of April 13 through April 19, 2026, as “National Osteopathic Medicine Week”;

(2) recognizes the contributions of osteopathic physicians to the healthcare system of the United States; and

(3) celebrates the role that colleges of osteopathic medicine play in training the next generation of physicians.

SENATE RESOLUTION 675—SUPPORTING THE DESIGNATION OF THE WEEK OF APRIL 11 THROUGH APRIL 17, 2026, AS “BLACK MATERNAL HEALTH WEEK”, FOUNDED BY BLACK MAMAS MATTER ALLIANCE, INC., TO BRING NATIONAL ATTENTION TO THE MATERNAL AND REPRODUCTIVE HEALTH CRISIS IN THE UNITED STATES AND THE IMPORTANCE OF REDUCING MATERNAL MORTALITY AND MORBIDITY AMONG BLACK WOMEN AND BIRTHING PEOPLE

Mr. BOOKER (for himself, Ms. DUCKWORTH, Mr. DURBIN, Ms. BLUNT ROCHESTER, Mrs. MURRAY, Ms. WARREN, Mr. COONS, Mr. PADILLA, Mr. MARKEY, Mr. VAN HOLLEN, Mr. WELCH, Ms. KLOBUCHAR, Ms. SMITH, and Ms. SLOTKIN) submitted the following resolution; which was referred to the Committee on Health, Education, Labor, and Pensions:

S. RES. 675

Whereas, according to the Centers for Disease Control and Prevention, Black women in the United States are 2 to 3 times more likely than White women to die from pregnancy-related causes;

Whereas Black women and people living in low-income and rural communities in the United States suffer from life-threatening pregnancy complications, known as “maternal morbidities”, twice as often as White women;

Whereas the maternal mortality rate in the United States—

(1) is among the highest in the developed world; and

(2) was 23.8 deaths per 100,000 live births in 2020, 32.9 in 2021, 22.3 in 2022, and 18.6 in 2023;

Whereas the United States has the highest maternal mortality rate among affluent countries, driven in part by systemic inequities in health care that disproportionately and unjustly affect Black women;

Whereas, according to the Centers for Disease Control and Prevention, in 2023, the United States maternal mortality rate decreased for White (14.5), Hispanic (12.4), and Asian (10.7) women but increased to 50.3 deaths per 100,000 live births for Black women;

Whereas Black women are 50 percent more likely than all other women to give birth to premature and low birth weight infants;

Whereas the high rates of maternal mortality among Black women span across—

(1) income levels;

(2) education levels; and

(3) socioeconomic status;

Whereas the Centers for Disease Control and Prevention found that more than 80 percent of pregnancy-related deaths in the United States are preventable;

Whereas the leading causes of maternal mortality among Black women and birthing people include obstetric embolism, obstetric hemorrhage, eclampsia and preeclampsia, and postpartum cardiomyopathy, and these conditions impact Black women and birthing people disproportionately;

Whereas Black mothers have the highest rate of cesarean section deliveries;