

SA 110. Mr. HEINRICH (for himself, Mr. BENNET, Mr. WYDEN, Mr. UDALL, Mr. TESTER, and Mr. MERKLEY) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, supra; which was ordered to lie on the table.

#### TEXT OF AMENDMENTS

**SA 56.** Mr. KING submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title III, add the following:

**SEC. 3** \_\_\_\_\_. **DEFICIT-NEUTRAL RESERVE FUND RELATING TO PRESERVING AND EXTENDING MATERNAL, INFANT, AND CHILD HEALTH THROUGH THE DEPARTMENT OF HEALTH AND HUMAN SERVICES.**

The Chairman of the Committee on the Budget of the Senate may revise the allocations of a committee or committees, aggregates, and other appropriate levels in this resolution for one or more bills, joint resolutions, amendments, amendments between the Houses, motions, or conference reports relating to preserving and extending maternal, infant, and child health through the Department of Health and Human Services by the amounts provided in such legislation for those purposes, provided that such legislation would not increase the deficit over either the period of the total of fiscal years 2017 through 2021 or the period of the total of fiscal years 2017 through 2026.

**SA 57.** Mr. KING (for himself and Mr. BENNET) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title III, add the following:

**SEC. 3** \_\_\_\_\_. **DEFICIT-NEUTRAL RESERVE FUND RELATING TO THE NATIONAL HEALTH SERVICE CORPS.**

The Chairman of the Committee on the Budget of the Senate may revise the allocations of a committee or committees, aggregates, and other appropriate levels in this resolution for one or more bills, joint resolutions, amendments, amendments between the Houses, motions, or conference reports relating to maintaining, preserving, sustaining, and expanding the National Health Service Corps program, which may include increasing the number of clinicians fulfilling a service obligation in exchange for scholarship or loan repayment, by the amounts provided in such legislation for those purposes, provided that such legislation would not increase the deficit over either the period of the total of fiscal years 2017 through 2021 or the period of the total of fiscal years 2017 through 2026.

**SA 58.** Mr. KING (for himself and Mr. SCHATZ) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the

appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title III, add the following:

**SEC. 3** \_\_\_\_\_. **DEFICIT-NEUTRAL RESERVE FUND RELATING TO COVERAGE OF CERTAIN FALL PREVENTION SERVICES UNDER THE MEDICARE PROGRAM.**

The Chairman of the Committee on the Budget of the Senate may revise the allocations of a committee or committees, aggregates, and other appropriate levels in this resolution for one or more bills, joint resolutions, amendments, amendments between the Houses, motions, or conference reports relating to requiring coverage of certain fall prevention services under the Medicare program by the amounts provided in such legislation for those purposes, provided that such legislation would not increase the deficit over either the period of the total of fiscal years 2017 through 2021 or the period of the total of fiscal years 2017 through 2026.

**SA 59.** Mr. KING submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title III, add the following:

**SEC. 3** \_\_\_\_\_. **DEFICIT-NEUTRAL RESERVE FUND RELATING TO MENTAL HEALTH AND SUBSTANCE USE DISORDER HEALTH CARE COVERAGE.**

The Chairman of the Committee on the Budget of the Senate may revise the allocations of a committee or committees, aggregates, and other appropriate levels in this resolution for one or more bills, joint resolutions, amendments, amendments between the Houses, motions, or conference reports relating to the provision of health care for mental health and substance use disorders by ensuring that such care is included as essential health benefits and providing Federal parity protections for mental health and substance use disorders by the amounts provided in such legislation for those purposes, provided that such legislation would not increase the deficit over either the period of the total of fiscal years 2017 through 2021 or the period of the total of fiscal years 2017 through 2026.

**SA 60.** Mr. KING submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4** \_\_\_\_\_. **POINT OF ORDER AGAINST LEGISLATION THAT WOULD REDUCE HEALTH INSURANCE ACCESS AND AFFORDABILITY FOR INDIVIDUALS BASED ON THEIR OCCUPATION.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment report that would reduce health insurance access and affordability for individuals based on their occupation, unless legislation is enacted to provide comparable benefits and protections for such individuals.

(b) WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate

only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 61.** Mr. CASEY (for himself, Mr. CARDIN, Mr. BROWN, and Mr. KING) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4** \_\_\_\_\_. **POINT OF ORDER AGAINST LEGISLATION THAT WOULD MAKE PEOPLE WITH DISABILITIES AND CHRONIC CONDITIONS SICK AGAIN.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that would—

(1) limit, reduce, or eliminate access to care for anyone with a pre-existing condition, such as a disability or chronic condition, as provided under section 2704 of the Public Health Service Act (42 U.S.C. 300gg-3), as amended by the Patient Protection and Affordable Care Act (Public Law 111-148);

(2) place a lifetime or annual cap on health insurance coverage for an individual with a disability or a chronic condition, as provided under section 2711 of the Public Health Service Act (42 U.S.C. 300gg-11), as amended by the Patient Protection and Affordable Care Act; or

(3) allow a health plan or a provider to discriminate on the basis of an applicant's physical health, mental health, or disability status to increase the cost of care, provide for fewer benefits, or in any way decrease access to health care as afforded under title I of the Patient Protection and Affordable Care Act.

(b) WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 62.** Mr. MANCHIN (for himself and Mrs. GILLIBRAND) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4** \_\_\_\_\_. **POINT OF ORDER AGAINST AN INCREASE IN THE DEFICIT.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill or joint resolution reported pursuant to section 2001 or 2002, or an amendment to, motion on, conference report on, or amendment between the Houses in relation to such a bill or joint resolution, that would increase the on-budget deficit or cause an on-budget deficit, as calculated under subsection (b), in any of fiscal years 2017 through 2026.

(b) DETERMINATION OF BUDGET LEVELS.—For purposes of this section, the levels of new budget authority, outlays, and revenues for a fiscal year shall be determined on the basis of estimates made by the Chairman of the Committee on the Budget of the Senate and shall be calculated without regard to any adjustment made under section 3001 or 3002.

(c) FORM OF THE POINT OF ORDER.—A point of order under subsection (a) may be raised by a Senator as provided in section 313(e) of the Congressional Budget Act of 1974 (2 U.S.C. 644(e)).

(d) SUPERMAJORITY WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 63.** Mr. MANCHIN (for himself, Ms. BALDWIN, Mr. MARKEY, Mr. DURBIN, Ms. HASSAN, Mr. BROWN, Mr. UDALL, Ms. KLOBUCHAR, Mr. BLUMENTHAL, Mr. LEAHY, Mr. KING, Mrs. GILLIBRAND, Mr. WHITEHOUSE, Mr. CARPER, Mrs. FEINSTEIN, Ms. STABENOW, Mr. DONNELLY, Mr. KAINE, Mr. WARNER, Mr. CARDIN, Mrs. SHAHEEN, and Mr. VAN HOLLEN) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . . . POINT OF ORDER AGAINST LEGISLATION THAT WOULD REDUCE ACCESS TO SUBSTANCE USE DISORDER PREVENTION, TREATMENT, AND RECOVERY SERVICES AND WORSEN THE OPIOID EPIDEMIC.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that would reduce the expansion of access to substance use disorder prevention, treatment, and recovery services established through the expansion of the Medicaid program under section XIX of the Social Security Act (42 U.S.C. 1396 et seq.) and the consumer protections in the health insurance market, including protections for individuals with pre-existing conditions, the establishment of mental health and substance use disorder services as essential health benefits, the requirement that preventive services such as substance use disorder screenings be covered without cost-sharing at the point of service, and the expansion of mental health parity and addiction equity law to cover health plans in the individual market, and in so doing, worsen the opioid epidemic.

(b) WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 64.** Mr. MANCHIN (for himself, Mr. DURBIN, Mr. HEINRICH, Mr. UDALL, Mr. FRANKEN, Ms. KLOBUCHAR, Ms.

HEITKAMP, Mr. VAN HOLLEN, Mr. CASEY, Mr. TESTER, Mr. BENNET, Ms. BALDWIN, Ms. STABENOW, Mr. DONNELLY, Mrs. SHAHEEN, Mr. WARNER, and Mr. KING) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . . . POINT OF ORDER AGAINST LEGISLATION THAT WOULD FINANCIALLY HARM RURAL HOSPITALS AND HEALTH CARE PROVIDERS BY REDUCING THE NUMBER OF PEOPLE IN RURAL COMMUNITIES WITH ACCESS TO HEALTH INSURANCE.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report if the Congressional Budget Office has determined that it would—

(1) cause an increase in the rate of uninsured individuals and families in rural communities by an amount sufficient to substantially weaken the financial viability of rural hospitals (including small hospitals), clinics (including community health centers), or other health care providers; or

(2) reduce Federal funds upon which rural hospitals and community health centers rely.

(b) WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 65.** Mr. MANCHIN (for himself, Mr. WARNER, Mr. BROWN, Mr. COONS, Mr. VAN HOLLEN, Mr. KAINE, and Mr. CASEY) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . . . POINT OF ORDER AGAINST LEGISLATION THAT WOULD REDUCE BLACK LUNG BENEFITS FOR MINERS DISABLED BY BLACK LUNG DISEASE AND THEIR SURVIVORS.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that would eliminate or weaken the amendments to the Black Lung Benefits Act (30 U.S.C. 901 et seq.) made by section 1556 of the Patient Protection and Affordable Care Act (Public Law 111-148), which—

(1) require the presumption of total disability or death caused by pneumoconiosis for coal miners who worked for at least 15 years in underground mining and who suffer or suffered from a totally disabling respiratory impairment; and

(2) provide automatic entitlement for eligible survivors of miners who were themselves entitled to receive benefits as a result of a lifetime claim.

(b) WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 66.** Mr. REED (for himself, Mr. BLUMENTHAL, Mr. VAN HOLLEN, and Ms. WARREN) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . . . POINT OF ORDER AGAINST CUTTING LONG-TERM SERVICES AND SUPPORTS FOR SENIORS.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that would cut long term services and supports for seniors, including nursing home care and home and community-based care, under the Medicaid program under title XIX of the Social Security Act (42 U.S.C. 1396 et seq.).

(b) WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 67.** Mr. CARDIN submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . . . POINT OF ORDER AGAINST LEGISLATION THAT WOULD ELIMINATE OR REDUCE ACCESS TO PREVENTIVE SERVICES THAT ARE CURRENTLY OFFERED WITHOUT COPAYMENT OR COST-SHARING UNDER THE PATIENT PROTECTION AND AFFORDABLE CARE ACT.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that would eliminate or reduce access to preventive services that are currently offered without copayment or cost-sharing under the Patient Protection and Affordable Care Act (Public Law 111-148), including blood pressure screening, colorectal screening, breast cancer screening, cervical cancer screening, and domestic and interpersonal violence screening and counseling.

(b) WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 68.** Mr. CARDIN (for himself, Mr. BROWN, and Mr. CARPER) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . . . POINT OF ORDER AGAINST LEGISLATION THAT WOULD ELIMINATE OR REDUCE THE CONSUMER PROTECTIONS PROVIDED BY THE PATIENT'S BILL OF RIGHTS UNDER THE PATIENT PROTECTION AND AFFORDABLE CARE ACT.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that would eliminate or reduce the consumer protections provided by the Patient's Bill of Rights under the Patient Protection and Affordable Care Act (Public Law 111-148), including the ban on health plans discriminating against adults and children with pre-existing conditions, dropping coverage, limiting coverage under a health plan, limiting choice of doctors, or restricting emergency room care; the guarantee of a health plan enrollee's right to appeal; coverage of young adults under their parents' health plans; and coverage under a health plan of preventive care with no cost.

(b) WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 69.** Mr. BENNET submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . . . POINT OF ORDER AGAINST LEGISLATION THAT REDUCES ACCESS TO, OR RESULTS IN THE CLOSING OF, RURAL HOSPITALS.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that reduces Medicare or private health insurance payments under the Patient Protection and Affordable Care Act to rural hospitals that could lead to a reduction in health care services provided or the closure of a rural or critical access hospital.

(b) WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 70.** Mr. BENNET (for himself, Mr. KING, and Mr. CARPER) submitted an amendment intended to be proposed by

him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . . . POINT OF ORDER AGAINST PHYSICIAN AND NURSE SHORTAGES IN RURAL AND UNDERSERVED AREAS.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that reduces access to primary medical care, dental, and mental health services in areas designated as Health Professional Shortage Areas or Medically Underserved Areas or Populations, including the repeal of provisions in the Patient Protection and Affordable Care Act that—

(1) expand the number of National Health Service Corps providers trained to provide health care services in shortage areas through the National Health Service Corps Loan Repayment Program; or

(2) encourage provider training specifically in rural areas.

(b) WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 71.** Mr. BOOKER submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the appropriate place, add the following:

**SEC. . . . SENSE OF THE SENATE THAT MEDICAID IS ONE OF OUR NATION'S MOST IMPORTANT POVERTY-REDUCING PROGRAMS.**

(a) FINDINGS.—The Senate finds the following:

(1) In 2015, more than 60,000,000 Americans relied on Medicaid for comprehensive, affordable health care coverage.

(2) According to the Journal of Health Economics, in 2010, Medicaid helped to keep at least 2,600,000 Americans, including adults with disabilities, the elderly, children, and racial and ethnic minorities, out of poverty.

(b) SENSE OF THE SENATE.—It is the sense of the Senate that—

(1) Medicaid is one of our Nation's most important poverty-reducing programs; and

(2) the Medicaid expansion under the Affordable Care Act has expanded coverage to millions of Americans, which not only ensures that more people have access to quality, affordable health care, but improves Americans' financial security.

**SA 72.** Mr. BOOKER submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary

levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . . . POINT OF ORDER AGAINST LEGISLATION THAT WOULD REDUCE COVERAGE FOR CHILDREN WITH AUTISM SPECTRUM DISORDERS.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that would reduce coverage for children with Autism Spectrum Disorders by—

(1) block granting or imposing per capita caps on State Medicaid programs; and

(2) repealing the financial assistance available to families to purchase coverage on the health insurance marketplace created under the Patient Protection and Affordable Care Act (Public Law 111-148).

(b) WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 73.** Mr. BOOKER submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title III, add the following:

**SEC. 3 . . . DEFICIT-NEUTRAL RESERVE FUND RELATING TO ENSURING THAT STATE MEDICAID PROGRAMS' PAYMENT POLICIES ARE ALIGNED WITH THEIR PERIODICITY SCHEDULES.**

The Chairman of the Committee on the Budget of the Senate may revise the allocations of a committee or committees, aggregates, and other appropriate levels in this resolution for one or more bills, joint resolutions, amendments, amendments between the Houses, motions, or conference reports relating to ensuring that the payment policies of State Medicaid programs are aligned with the periodicity schedules of such programs by the amounts provided in such legislation for such purpose, provided that such legislation would not increase the deficit over either the period of the total of fiscal years 2017 through 2021 or the period of the total of fiscal years 2017 through 2026.

**SA 74.** Mr. BOOKER submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . . . POINT OF ORDER AGAINST REDUCING CHILDREN'S ACCESS TO THE EARLY AND PERIODIC SCREENING, DIAGNOSTIC, AND TREATMENT BENEFIT UNDER THE MEDICAID PROGRAM.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that would reduce children's

access to the Early and Periodic Screening, Diagnostic, and Treatment benefit under the Medicaid program by block granting or imposing per capita caps on State Medicaid programs.

(b) WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 75.** Mr. BOOKER submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . POINT OF ORDER AGAINST DECREASING ACCESS TO HEALTH CARE BY IMPOSING UNREASONABLE WORK REQUIREMENTS ON MEDICAID BENEFICIARIES.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that would decrease access to health care by imposing unreasonable work requirements on Medicaid beneficiaries, especially those beneficiaries struggling with mental health conditions, substance abuse issues, and homelessness.

(b) WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 76.** Mr. BOOKER (for himself, Mr. MARKEY, and Mr. VAN HOLLEN) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . POINT OF ORDER AGAINST HARMING HOSPITALS AND CLINICS BY REPEALING THE MEDICAID EXPANSION AND THE FINANCIAL ASSISTANCE OFFERED ON THE HEALTH INSURANCE MARKETPLACE.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that would harm hospitals and clinics, particularly those in underserved areas, by repealing or cutting Federal financial assistance for the Medicaid expansion and for the financial assistance offered on the health insurance marketplace.

(b) WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall

be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 77.** Mr. BOOKER (for himself, Mr. MARKEY, and Mr. VAN HOLLEN) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . POINT OF ORDER AGAINST INCREASING PREMIUM COSTS ON THE HEALTH INSURANCE MARKETPLACE BY REPEALING THE MEDICAID EXPANSION UNDER THE AFFORDABLE CARE ACT.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that would increase premium costs on the health insurance marketplace by repealing the Medicaid expansion under the Affordable Care Act which has lowered premiums costs on the health insurance marketplace by 7 percent in States that have expanded Medicaid under the Affordable Care Act.

(b) WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 78.** Mr. DURBIN (for himself, Ms. HEITKAMP, and Mr. BOOKER) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title III, add the following:

**SEC. 3 . DEFICIT-NEUTRAL RESERVE FUND RELATING TO INCREASING FUNDING FOR FEDERAL INVESTMENTS IN CHILD TRAUMA PREVENTION, SCREENING, AND SUPPORT SERVICES.**

The Chairman of the Committee on the Budget of the Senate may revise the allocations of a committee or committees, aggregates, and other appropriate levels in this resolution for one or more bills, joint resolutions, amendments, amendments between the Houses, motions, or conference reports relating to increasing funding for Federal investments in the prevention, screening, and support (including treatment) for children and youth who have experienced or are at risk of experiencing trauma, which may include the early identification, screening, and expeditious referral to appropriate support services (including treatment) of children and youth, or the implementation of trauma-informed training, workforce capacity, and interventions by appropriate providers and in settings that may come into contact with children and youth who have experienced or are at risk of experiencing trauma, by the amounts provided in such legislation for those purposes, provided that such legisla-

tion would not increase the deficit over either the period of the total of fiscal years 2017 through 2021 or the period of the total of fiscal years 2017 through 2026.

**SA 79.** Mr. DURBIN (for himself and Ms. KLOBUCHAR) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title III, add the following:

**SEC. 3 . DEFICIT-NEUTRAL RESERVE FUND RELATING TO SUPPORTING STEADY, PREDICTABLE GROWTH FOR BIOMEDICAL RESEARCH.**

The Chairman of the Committee on the Budget of the Senate may revise the allocations of a committee or committees, aggregates, and other appropriate levels in this resolution for one or more bills, joint resolutions, amendments, amendments between the Houses, motions, or conference reports relating to supporting at least 5 percent real growth (above inflation) to medical research conducted by each of the National Institutes of Health, the Centers for Disease Control and Prevention, the Defense Health Program, and the Medical and Prosthetics Research Program of the Department of Veterans Affairs by the amounts provided in such legislation for those purposes, provided that such legislation would not increase the deficit over either the period of the total of fiscal years 2017 through 2021 or the period of the total of fiscal years 2017 through 2026.

**SA 80.** Mr. DURBIN (for himself and Ms. KLOBUCHAR) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . POINT OF ORDER AGAINST LEGISLATION THAT WOULD RESULT IN A REDUCTION OF FUNDING FOR BIOMEDICAL RESEARCH AGENCIES.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that would result in a reduction of funding for the National Institutes of Health, the Centers for Disease Control and Prevention, the Defense Health Program, or the Medical and Prosthetics Research Program of the Department of Veterans Affairs.

(b) WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 81.** Ms. BALDWIN (for herself, Mr. VAN HOLLEN, Ms. STABENOW, Mr. BOOKER, Mr. KING, Mr. BROWN, Mr. COONS, and Mr. FRANKEN) submitted an amendment intended to be proposed by her to the concurrent resolution S.

Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4. DON'T MAKE YOUNG PEOPLE SICK AGAIN.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that would make young people sick again.

(b) LEGISLATION THAT MAKES YOUNG PEOPLE SICK AGAIN.—For the purposes of subsection (a), the term “would make young people sick again” with respect to legislation refers to any provision of a bill, joint resolution, motion, amendment, amendment between the Houses, or conference report, that would—

(1) reduce the number of young Americans enrolled in public or private health insurance coverage, as determined based on the March 2016 updated baseline budget projections by the Congressional Budget Office;

(2) weaken dependent coverage of children to continue until the child turns 26 years of age as afforded to them under Patient Protection and Affordable Care Act (Public Law 111-148);

(3) weaken access to care by increasing premiums or total out of pocket costs for young Americans with private insurance.

(c) WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 82.** Mrs. GILLIBRAND (for herself, Ms. HIRONO, Mrs. MURRAY, Ms. HASSAN, Mr. BLUMENTHAL, Mrs. SHAHEEN, Mrs. FEINSTEIN, Mr. SCHUMER, Ms. STABENOW, Mr. BROWN, Mr. CARPER, Mr. UDALL, and Mr. CARDIN) submitted an amendment intended to be proposed by her to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4. DON'T MAKE WOMEN SICK AGAIN.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that makes women sick again by eliminating or reducing access to women's health care, including decreases in access to, or coverage of, reproductive health care services including contraceptive counseling, birth control, and maternity care, and primary and preventive health care as afforded to them under the Patient Protection and Affordable Care Act (Public Law 111-148).

(b) LEGISLATION THAT MAKES WOMEN SICK AGAIN.—For the purposes of subsection (a), the term “makes women sick again” with respect to legislation refers to any provision of a bill, joint resolution, motion, amendment, amendment between the Houses, or conference report, that would—

(1) allow insurance companies to discriminate against women by—

(A) charging women higher premiums for health care based on their gender;

(B) allowing pregnancy to be used as a pre-existing condition by which to deny women coverage;

(C) permitting discrimination against providers who provide reproductive health care benefits or services to women; or

(D) otherwise discriminating against women based on their gender;

(2) reduce the number of women enrolled in health insurance coverage, as certified by the Congressional Budget Office; or

(3) eliminate, or reduce the scope or scale of, the benefits women would have received pursuant to the requirements under title I of the Patient Protection and Affordable Care Act (Public Law 111-148) and the amendments made to that title.

(c) WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 83.** Mr. MENENDEZ (for himself, Mr. DURBIN, Ms. HASSAN, Mr. LEAHY, Mr. HEINRICH, Mr. FRANKEN, Mrs. FEINSTEIN, Mr. REED, Mrs. MURRAY, Mr. CARPER, Mr. BLUMENTHAL, Mr. BOOKER, Mr. BROWN, Ms. CANTWELL, Mr. CARDIN, Mr. COONS, Ms. HIRONO, Mr. MARKEY, Mr. MURPHY, Mrs. SHAHEEN, Mr. UDALL, Mrs. GILLIBRAND, Ms. KLOBUCHAR, Mr. WYDEN, and Ms. STABENOW) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4. POINT OF ORDER AGAINST ELIMINATING OR REDUCING FEDERAL FUNDING TO STATES UNDER THE MEDICAID EXPANSION.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that would eliminate or reduce funding to States available under law in effect on the date of the adoption of this section to provide comprehensive, affordable health care to low-income Americans by eliminating or reducing the availability of Federal financial assistance to States available under section 1905(y)(1) or 1905(z)(2) of the Social Security Act (42 U.S.C. 1396d(y)(1), 1396d(z)(2)) or other means, unless the Director of the Congressional Budget Office certifies that the legislation would not—

(1) increase the number of uninsured Americans;

(2) decrease Medicaid enrollment in States that have opted to expand eligibility for medical assistance under that program for low-income, non-elderly individuals under the eligibility option established by the Affordable Care Act under section 1902(a)(10)(A)(i)(VIII) of the Social Security Act (42 U.S.C. 1396a(a)(10)(A)(i)(VIII));

(3) reduce the likelihood that any State that, as of the date of the adoption of this section, has not opted to expand Medicaid under the eligibility option established by

the Affordable Care Act under section 1902(a)(10)(A)(i)(VIII) of the Social Security Act (42 U.S.C. 1396a(a)(10)(A)(i)(VIII)) would opt to use that eligibility option to expand eligibility for medical assistance under that program for low-income, non-elderly individuals; and

(4) increase the State share of Medicaid spending under that eligibility option.

(b) WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 84.** Mr. DURBIN (for himself, Mr. BROWN, Mr. MURPHY, and Mr. KING) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title III, add the following:

**SEC. 3. DEFICIT-NEUTRAL RESERVE FUND RELATING TO REMOVING THE MEDICAID IMD EXCLUSION AND INCREASING FUNDING FOR FEDERAL INVESTMENTS IN MENTAL HEALTH AND SUBSTANCE USE DISORDER TREATMENT.**

The Chairman of the Committee on the Budget of the Senate may revise the allocations of a committee or committees, aggregates, and other appropriate levels in this resolution for one or more bills, joint resolutions, amendments, amendments between the Houses, motions, or conference reports relating to increasing funding for Federal investments in mental health and substance use disorder treatment, including for the Medicaid expansion population, and which may include allowing Federal funding for services provided under State Medicaid plans to treat individuals with substance use disorders in institutions for mental diseases, notwithstanding the limitation of subdivision (B) following paragraph (29) of section 1905(a) of the Social Security Act (42 U.S.C. 1396d(a)), or supporting workforce and infrastructure capacity to treat individuals suffering from mental illness or substance use disorders, by the amounts provided in such legislation for those purposes, provided that such legislation would not increase the deficit over either the period of the total of fiscal years 2017 through 2021 or the period of the total of fiscal years 2017 through 2026.

**SA 85.** Ms. HASSAN (for herself, Mr. BROWN, Mrs. SHAHEEN, and Ms. BALDWIN) submitted an amendment intended to be proposed by her to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4. POINT OF ORDER AGAINST LEGISLATION THAT WOULD WORSEN THE OPIOID EPIDEMIC BY REDUCING ACCESS TO MEDICATION ASSISTED TREATMENT FOR SUBSTANCE USE DISORDER.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill,

joint resolution, motion, amendment, amendment between the Houses, or conference report that would reduce access to medication assisted treatment for substance use disorders, including opioid addiction, by making changes to the policies enacted by the Patient Protection and Affordable Care Act unless the Congressional Budget Office certifies that such changes would not—

(1) reduce or limit Federal funding for medical assistance provided by States to low-income, non-elderly individuals under the Medicaid eligibility option established by the Patient Protection and Affordable Care Act under section 1902(a)(10)(A)(i)(VIII) of the Social Security Act (42 U.S.C. 1396d(a)(10)(A)(i)(VIII)) or result in fewer individuals receiving such assistance under such option (including the 1,600,000 Americans with substance use disorders who currently receive such assistance and were uninsured prior to the establishment of such option);

(2) reduce the expansion of coverage resulting from the individual market consumer protections of the Patient Protection and Affordable Care Act, including protections for individuals with pre-existing conditions, the establishment of behavioral health as an essential health benefit, the expansion of mental health parity and addiction equity law to the individual market, and coverage of preventive services without cost-sharing;

(3) reduce the number of Americans enrolled in public or private health insurance coverage, as determined based on the March 2016 updated baseline budget projections by the Congressional Budget Office;

(4) increase health insurance premiums or out-of-pocket costs for Americans with private health insurance coverage; or

(5) reduce the scope and scale of benefits covered by private health insurance plans pursuant to the requirements of title I of the Patient Protection and Affordable Care Act and the amendments made by that title.

(b) **WAIVER AND APPEAL.**—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 86.** Mr. BROWN (for himself, Mr. REED, Ms. STABENOW, Mr. CARPER, Mr. UDALL, Mr. CASEY, Mr. BOOKER, Mr. WHITEHOUSE, Mrs. GILLIBRAND, Mr. DURBIN, Ms. BALDWIN, Ms. WARREN, Mr. CARDIN, Mr. KING, and Mr. BLUMENTHAL) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:  
**SEC. 4 . POINT OF ORDER AGAINST LEGISLATION THAT WOULD UNDERMINE ACCESS TO COMPREHENSIVE, AFFORDABLE HEALTH COVERAGE FOR AMERICA'S CHILDREN.**

(a) **POINT OF ORDER.**—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that makes changes to the Medicaid program under title XIX of the Social Security Act (42 U.S.C. et seq.), the Children's Health Insurance Program under title XXI (42 U.S.C. 1397aa et seq.), or Federal re-

quirements for private health insurance coverage unless the Congressional Budget Office certifies that such changes would not result in lower coverage rates, reduced benefits, or decreased affordability for children receiving coverage through the Medicaid Program, the Children's Health Insurance Program, or the private insurance markets established under the Patient Protection and Affordable Care Act.

(b) **WAIVER AND APPEAL.**—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 87.** Mr. WARNER (for himself, Ms. STABENOW, Mr. KAINE, Mr. PETERS, Mr. MARKEY, Mrs. GILLIBRAND, Mr. KING, Mr. NELSON, Ms. WARREN, and Mr. BENNET) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title III, add the following:

**SEC. 3 . DEFICIT-NEUTRAL RESERVE FUND TO INCREASE ACCESS TO HEALTH CARE FOR VETERANS.**

The Chairman of the Committee on the Budget of the Senate may revise the allocations of a committee or committees, aggregates, and other appropriate levels in this resolution for one or more bills, joint resolutions, amendments, amendments between the Houses, motions, or conference reports relating to increasing health care access for veterans, which may include legislation that authorizes the Secretary of Veterans Affairs to carry out certain major medical facility leases of the Department of Veterans Affairs, by the amounts provided in such legislation for those purposes, provided that such legislation would not increase the deficit over either the period of the total of fiscal years 2017 through 2021 or the period of the total of fiscal years 2017 through 2026.

**SA 88.** Mr. WARNER submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . POINT OF ORDER AGAINST LEGISLATION AFFECTING MEDICARE HOSPITAL INSURANCE SOLVENCY.**

(a) **POINT OF ORDER.**—It shall not be in order in the Senate to consider a bill or joint resolution reported pursuant to section 2001 or 2002, or an amendment to, motion on, conference report on, or amendment between the Houses in relation to such a bill or joint resolution that—

(1) reduces the actuarial balance by at least 0.01 percent of the present value of future taxable payroll of the Federal Hospital Insurance Trust Fund established under section 1817(a) of the Social Security Act (42 U.S.C. 1395i(a)) for the 75-year period utilized in the most recent annual report of the Board of Trustees provided pursuant to sec-

tion 1817(b)) of such Act (42 U.S.C. 1395i(b)); or

(2) would cause a decrease in Medicare Federal Hospital Insurance surpluses or an increase in Medicare Federal Hospital Insurance deficits relative to the levels set forth in the applicable resolution for the first fiscal year or for the total of that fiscal year and the ensuing fiscal years for which allocations are provided under section 302(a) of the Congressional Budget Act of 1974 (2 U.S.C. 633(a)).

(b) **MEDICARE LEVELS.**—For purposes of subsection (a)(2), Medicare Federal Hospital Insurance surpluses equal the excess of Federal Hospital Insurance income over Federal Hospital Insurance outlays in a fiscal year or years with such an excess and Federal Hospital Insurance deficits equal the excess of Federal Hospital Insurance outlays over Federal Hospital Insurance income in a fiscal year or years with such an excess.

(c) **WAIVER AND APPEAL.**—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 89.** Mr. CARPER submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . POINT OF ORDER AGAINST LEGISLATION THAT WOULD RESULT IN A REDUCTION OF THE COVERAGE OF OBESITY REDUCTION COUNSELING UNDER MEDICAID OR PRIVATE INSURANCE PLANS.**

(a) **POINT OF ORDER.**—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that would result in a reduction in the coverage of obesity reduction counseling services under the Medicaid program or private insurance plans.

(b) **WAIVER AND APPEAL.**—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 90.** Mr. CARPER (for himself, Mr. DURBIN, and Mr. BLUMENTHAL) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . POINT OF ORDER AGAINST LEGISLATION THAT WOULD RESULT IN A REDUCTION IN TOBACCO CESSATION COVERAGE UNDER MEDICAID OR PRIVATE INSURANCE PLANS.**

(a) **FINDINGS.**—The Senate finds the following:

(1) Tobacco use is the leading cause of preventable deaths in the United States.

(2) Each year, tobacco use leads to \$170,000,000,000 in healthcare spending on illness caused by tobacco use and \$150,000,000,000 in lost productivity.

(3) Tobacco use is more than twice as common among the overall Medicaid population (including individuals covered under the Medicaid expansion added by the Affordable Care Act) than among individuals with private insurance coverage.

(4) The Affordable Care Act—

(A) requires that State Medicaid plans cover tobacco cessation services for pregnant women and individuals covered under the Medicaid expansion with no cost-sharing;

(B) requires that private health insurance plans cover tobacco cessation products and services without cost-sharing; and

(C) prohibits the exclusion of tobacco cessation drugs from coverage under Medicaid.

(5) Expanded coverage for tobacco cessation leads to better health outcomes and lower health costs.

(b) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that would result in a reduction in the coverage of items and services related to the cessation of tobacco under the Medicaid program or private insurance plans.

(c) WAIVER AND APPEAL.—Subsection (b) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (b).

**SA 91.** Ms. STABENOW submitted an amendment intended to be proposed by her to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . . . POINT OF ORDER AGAINST CHANGES TO THE ACA.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that make changes to the Patient Protection and Affordable Care Act without obtaining a budget score by the Congressional Budget Office (based on annual projections, a 10-year projection, and a 30-year projection) that includes the estimated effect of the legislation on the number of uninsured individuals (broken down by economic subgroup and State), the effect of such legislation on average premiums (broken down by marketplace and employer sponsored insurance), and the effect of such legislation on uncompensated care costs (broken down by State, projected for both providers and State government spending).

(b) WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 92.** Ms. STABENOW submitted an amendment intended to be proposed by

her to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . . . POINTS OF ORDER AGAINST CERTAIN LEGISLATION RELATING TO MEDICAL CARE.**

(a) COST ESTIMATE.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that would make changes to the Medicare program under title XVIII of the Social Security Act unless a cost estimate of the Congressional Budget Office is made available to the Senate prior to consideration of such legislation that includes the estimated effect of such legislation on both current and future Medicare beneficiary out-of-pocket expenses, including premiums and cost-sharing, over the next 30 years.

(b) BENEFICIARY OUT-OF-POCKET EXPENSES.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that would increase Medicare beneficiary out-of-pocket expenses under the Medicare program, including premiums and cost-sharing, as determined by the Congressional Budget Office in the cost estimate described in subsection (a) with respect to such legislation.

**SA 93.** Ms. STABENOW (for herself, Mr. CARPER, and Mrs. GILLIBRAND) submitted an amendment intended to be proposed by her to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . . . POINT OF ORDER AGAINST LEGISLATION THAT WOULD REDUCE AMERICANS' ACCESS TO HIGH QUALITY MATERNITY CARE COVERAGE.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that, according to the Congressional Budget Office, would reduce the number of Americans with insurance coverage of maternity care and childbirth as afforded in the Patient Protection and Affordable Care Act (Public Law 111-148).

(b) WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 94.** Ms. STABENOW (for herself, Mr. CARDIN, Mr. MURPHY, Mr. DURBIN, Ms. CANTWELL, Mr. FRANKEN, Mr. CARPER, Ms. BALDWIN, Mr. PETERS, Mr. BROWN, and Mr. UDALL) submitted an amendment intended to be proposed by her to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and

setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . . . POINT OF ORDER AGAINST REDUCING OR ELIMINATING ACCESS TO MENTAL HEALTH CARE.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that the Director of the Congressional Budget Office determines would reduce access to mental health care and services or reduce the number of individuals with mental illness enrolled in insurance coverage, relative to the Congressional Budget Office's March 2016 updated baseline, by means such as—

(1) eliminating or reducing Federal financial assistance currently available to States under section 1905(y)(1) or 1905(z)(2) of the Social Security Act (42 U.S.C. 1396d(y)(1), 1396d(z)(2)) or otherwise eliminating or reducing mental health protections established by the Affordable Care Act, including the addition of mental health services to the list of services covered under section 1937(b)(5) of the Social Security Act (42 U.S.C. 1396u-7(b)(5)); or

(2) reducing the affordability of coverage established by the Affordable Care Act's consumer protections, including—

(A) the expansion of mental health parity and addiction equity law to individual health insurance coverage;

(B) the prohibition on discriminating against enrollees with pre-existing conditions such as mental illness;

(C) coverage of preventive services like depression screenings without cost-sharing; and

(D) the establishment of mental health services as an essential health benefit.

(b) WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 95.** Mr. MARKEY (for himself, Mr. FRANKEN, and Mr. BROWN) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . . . POINT OF ORDER AGAINST LEGISLATION THAT WOULD PENALIZE STATES FOR IMPROVING CONTINUITY BETWEEN CRIMINAL JUSTICE AND PUBLIC HEALTH SYSTEMS.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that would penalize States for improving the continuity of care between the criminal justice and public health systems, including by ensuring that individuals who are enrolled in a State Medicaid program under title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) have their enrollment in such program suspended, but not terminated, in the event that they are incarcerated, or by providing for the automatic

enrollment of eligible individuals in a State Medicaid program upon their release from incarceration.

(b) **WAIVER AND APPEAL.**—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 96.** Mr. MARKEY submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . POINT OF ORDER AGAINST LEGISLATION THAT WOULD INCREASE THE MEDICARE PART B PREMIUM.**

(a) **POINT OF ORDER.**—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that would increase the Medicare part B premium for Medicare beneficiaries, as determined by the Congressional Budget Office.

(b) **WAIVER AND APPEAL.**—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 97.** Mr. BLUMENTHAL (for himself and Ms. KLOBUCHAR) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title III, add the following:

**SEC. 3 . DEFICIT-NEUTRAL RESERVE FUND RELATING TO IMPROVING DRUG PRICING TRANSPARENCY FOR CONSUMERS.**

The Chairman of the Committee on the Budget of the Senate may revise the allocations of a committee or committees, aggregates, and other appropriate levels in this resolution for one or more bills, joint resolutions, amendments, amendments between the Houses, motions, or conference reports relating to improving drug pricing transparency for consumers by the amounts provided in such legislation for those purposes, provided that such legislation would not increase the deficit over either the period of the total of fiscal years 2017 through 2021 or the period of the total of fiscal years 2017 through 2026.

**SA 98.** Mr. MURPHY submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary

levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . POINT OF ORDER AGAINST LEGISLATION THAT FAILS TO ENSURE THE SAME PATIENT BILL OF RIGHTS THAT CONSUMERS HAVE TODAY.**

(a) **POINT OF ORDER.**—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that would fail to ensure that consumers have the same patient bill of rights as they have on the date of such consideration. Such patient bill of rights includes the rights of consumers under the Patient Protection and Affordable Care Act (111-148) to—

- (1) appeal health plan decisions;
- (2) maintain health coverage without fear of an arbitrary rescission by their insurance company;
- (3) choose a doctor;
- (4) fair treatment of emergency care;
- (5) health insurance coverage without annual or lifetime limits on essential health benefits; and
- (6) enhanced access to preventive services.

(b) **WAIVER AND APPEAL.**—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 99.** Mr. MURPHY submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . POINT OF ORDER AGAINST LEGISLATION THAT INCREASES UNCOMPENSATED CARE COSTS FOR HOSPITALS.**

(a) **POINT OF ORDER.**—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that would increase uncompensated care costs for hospitals.

(b) **WAIVER AND APPEAL.**—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 100.** Ms. CANTWELL (for herself, Mr. CARPER, Mr. BENNET, Mr. WHITEHOUSE, Mrs. SHAHEEN, and Mr. MURPHY) submitted an amendment intended to be proposed by her to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . POINT OF ORDER AGAINST ANY CHANGES TO MEDICARE, MEDICAID, OR THE PREMIUM TAX CREDITS PROVIDED BY THE AFFORDABLE CARE ACT THAT WOULD WEAKEN AND REDUCE INVESTMENTS IN HEALTH CARE DELIVERY SYSTEM REFORMS THAT IMPROVE PATIENT HEALTH AND REDUCE COSTS.**

(a) **FINDINGS.**—The Senate finds the following:

(1) The Affordable Care Act is moving the health care system of the United States from a fee-for-service system that frequently incentivizes the overutilization of health care services and wasteful health care spending to a value- and performance-based health care system that promotes patient-centered and team-based care to keep Americans as healthy as possible, improve health outcomes, and lower health care costs.

(2) Because of the investments in health care delivery system reforms made by the Affordable Care Act, a third of Medicare payments to health care providers are now based on the overall quality of patient care and health outcomes achieved by such providers.

(b) **POINT OF ORDER.**—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that would change the Medicare program, the Medicaid program, or the premium tax credits provided by the Affordable Care Act in a manner that would result in hospitals, health care centers, and physicians and other health care providers reducing their investments in health care delivery system reforms that improve patient health outcomes and reduce costs.

(c) **WAIVER AND APPEAL.**—Subsection (b) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (b).

**SA 101.** Mr. BENNET submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title III, add the following:

**SEC. 3 . DEFICIT-NEUTRAL RESERVE FUND RELATING TO ENSURING THAT THE TOP 15 PERCENT SICKEST MEDICARE BENEFICIARIES WITH CHRONIC CONDITIONS HAVE ACCESS TO MEDICARE ACCOUNTABLE CARE ORGANIZATIONS OR OTHER INNOVATIVE MEDICARE PILOT PROGRAMS, INCLUDING PATIENT-CENTERED MEDICAL HOMES.**

The Chairman of the Committee on the Budget of the Senate may revise the allocations of a committee or committees, aggregates, and other appropriate levels in this resolution for one or more bills, joint resolutions, amendments, amendments between the Houses, motions, or conference reports relating to ensuring that the top 15 percent sickest Medicare beneficiaries with chronic conditions have access to Medicare accountable care organizations or other innovative Medicare pilot programs, including patient-centered medical homes, by the amounts provided in such legislation for those purposes, provided that such legislation would not increase the deficit over either the period of the total of fiscal years 2017 through



2021 or the period of the total of fiscal years 2017 through 2026.

**SA 102.** Mr. BENNET (for himself and Mr. BLUMENTHAL) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . . . POINT OF ORDER AGAINST LEGISLATION THAT REDUCES PRICE TRANSPARENCY FOR CONSUMERS.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that removes price transparency of health care services or price comparisons that enable consumers to have greater knowledge in making health care decisions, including requirements set forth by the Patient Protection and Affordable Care Act (Public Law 111-148).

(b) WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 103.** Mr. TESTER (for himself, Mr. BROWN, and Mrs. MURRAY) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title III, add the following:

**SEC. 3 . . . DEFICIT-NEUTRAL RESERVE FUND RELATING TO AUTHORIZING CHILDREN ELIGIBLE FOR HEALTH CARE UNDER LAWS ADMINISTERED BY SECRETARY OF VETERANS AFFAIRS TO RETAIN SUCH ELIGIBILITY UNTIL AGE 26.**

The Chairman of the Committee on the Budget of the Senate may revise the allocations of a committee or committees, aggregates, and other appropriate levels in this resolution for one or more bills, joint resolutions, amendments, amendments between the Houses, motions, or conference reports relating to supporting children who are eligible to receive health care furnished under the laws administered by the Secretary of Veterans Affairs, including by allowing such children to retain such eligibility until age 26, by the amounts provided in such legislation for those purposes, provided that such legislation would not increase the deficit over either the period of the total of fiscal years 2017 through 2021 or the period of the total of fiscal years 2017 through 2026.

**SA 104.** Mr. TESTER submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary

levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . . . POINT OF ORDER AGAINST LEGISLATION THAT WOULD WEAKEN THE ABILITY OF THE DEPARTMENT OF VETERANS AFFAIRS TO DIRECTLY FURNISH HEALTH CARE TO VETERANS.**

It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that authorizes funding for non-Department of Veterans Affairs-provided care, funded by the Department of Veterans Affairs, which would reduce the availability of services directly provided by the Department of Veterans Affairs, including primary health care, mental health care, rural health care, and prosthetic care.

**SA 105.** Mr. TESTER submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . . . POINT OF ORDER AGAINST LEGISLATION THAT WOULD EXTEND THE CHOICE PROGRAM OF THE DEPARTMENT OF VETERANS AFFAIRS WITHOUT ADDRESSING PROBLEMS WITH THE THIRD PARTY ADMINISTRATION OF THE PROGRAM.**

It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that extends the sunset date of the Choice Program under section 101 of the Veterans, Access, Choice, and Accountability Act of 2014 (Public Law 113-146; 38 U.S.C. 1701 note) unless the Secretary of Veterans Affairs certifies that problems relating to the third party administration of the program have been addressed or the legislation extending the sunset includes provisions addressing such problems.

**SA 106.** Mr. CORKER (for himself, Mr. PORTMAN, Ms. COLLINS, Ms. MURKOWSKI, and Mr. CASSIDY) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

On page 45, line 15, strike “January 27” and insert “March 3”.

**SA 107.** Mr. HEINRICH submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . . . POINT OF ORDER AGAINST LEGISLATION THAT TAXES THE HEALTH BENEFITS OF HARD-WORKING AMERICANS.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that directly or indirectly taxes the health benefits of hard-working Americans.

(b) WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 108.** Mr. UDALL (for himself and Mr. HEINRICH) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . . . POINT OF ORDER AGAINST CUTTING FEDERAL FUNDING TO MEDICAID EXPANSION STATES.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that would reduce the Federal funding received by States for the provision of medical assistance under State Medicaid programs under title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) to low-income, non-elderly individuals under the eligibility option established by the Patient Protection and Affordable Care Act under section 1902(a)(10)(A)(i)(VIII) of the Social Security Act (42 U.S.C. 1396d(a)(10)(A)(i)(VIII)).

(b) WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 109.** Mr. UDALL (for himself, Mr. TESTER, Ms. CANTWELL, Mr. FRANKEN, Ms. HEITKAMP, Mr. HEINRICH, and Mr. SCHATZ) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4 . . . POINT OF ORDER AGAINST ELIMINATING OR REDUCING FEDERAL PAYMENTS RECEIVED BY AN INDIAN HEALTH PROGRAM OR BY AN URBAN INDIAN ORGANIZATION UNDER MEDICAID FOR SERVICES PROVIDED TO INDIANS AND ALASKAN NATIVES WHO ARE ELIGIBLE FOR BENEFITS UNDER THAT PROGRAM.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment,

amendment between the Houses, or conference report that the Director of the Congressional Budget Office determines would eliminate or reduce, relative to the Congressional Budget Office's March 2016 updated baseline, Federal payments received by an Indian health program or by an urban Indian organization under title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) for services provided to Indians and Alaskan Natives who are eligible for benefits under such title.

(b) WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**SA 110.** Mr. HEINRICH (for himself, Mr. BENNET, Mr. WYDEN, Mr. UDALL, Mr. TESTER, and Mr. MERKLEY) submitted an amendment intended to be proposed by him to the concurrent resolution S. Con. Res. 3, setting forth the congressional budget for the United States Government for fiscal year 2017 and setting forth the appropriate budgetary levels for fiscal years 2018 through 2026; which was ordered to lie on the table; as follows:

At the end of title IV, add the following:

**SEC. 4. POINT OF ORDER AGAINST THE SALE OF FEDERAL LAND TO REDUCE THE FEDERAL DEFICIT.**

(a) POINT OF ORDER.—It shall not be in order in the Senate to consider any bill, joint resolution, motion, amendment, amendment between the Houses, or conference report that would provide for the sale of any Federal land (other than as part of a program that acquires land that is of comparable value or contains exceptional resources or that is conducted under the Federal Land Transaction Facilitation Act (43 U.S.C. 2301 et seq.)) that uses the proceeds of the sale to reduce the Federal deficit.

(b) WAIVER AND APPEAL.—Subsection (a) may be waived or suspended in the Senate only by an affirmative vote of three-fifths of the Members, duly chosen and sworn. An affirmative vote of three-fifths of the Members of the Senate, duly chosen and sworn, shall be required to sustain an appeal of the ruling of the Chair on a point of order raised under subsection (a).

**AUTHORITY FOR COMMITTEES TO MEET**

Mr. ENZI. Mr. President, I have five requests for committees to meet during today's session of the Senate. They have the approval of the Majority and Minority leaders.

Pursuant to Rule XXVI, paragraph 5(a), of the Standing Rules of the Senate, the following committees are authorized to meet during today's session of the Senate:

**COMMITTEE ON ARMED SERVICES**

Mr. President, I ask unanimous consent that the Committee on Armed Services be authorized to meet during the session of the Senate on January 10, 2017, at 9:30 a.m.

**COMMITTEE ON HOMELAND SECURITY AND GOVERNMENTAL AFFAIRS**

Mr. President, I ask unanimous consent that the Committee on Homeland

Security and Governmental Affairs be authorized to meet during the session of the Senate on January 10, 2017, at 3:30 p.m.

**COMMITTEE ON THE JUDICIARY**

Mr. President, I ask unanimous consent that the Committee on the Judiciary be authorized to meet during the session of the Senate on January 10, 2017, at 9:30 a.m., in room SR-325 of the Russell Senate Office Building, to conduct a hearing entitled "Attorney General Nomination."

**SELECT COMMITTEE ON INTELLIGENCE**

Mr. President, I ask unanimous consent that the Select Committee on Intelligence be authorized to meet during the session of the Senate on January 10, 2017, at 1 p.m. in room SD-106 of the Senate Dirksen Office Building.

**PERMANENT SUBCOMMITTEE ON INVESTIGATIONS**

Mr. President, I ask unanimous consent that the Permanent Subcommittee on Investigations of the Committee on Homeland Security and Governmental Affairs be authorized to meet during the session of the Senate on January 10, 2017, at 10 a.m., to conduct a hearing entitled, "Backpage.com's Knowing Facilitation of Online Sex Trafficking."

**PRIVILEGES OF THE FLOOR**

Mr. THUNE. Mr. President, I also ask unanimous consent that Matthew Taylor, a congressional fellow in Senator COCHRAN's office, be granted floor privileges for the remainder of the 115th Congress.

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

Mr. LEAHY. Mr. President, I ask unanimous consent that Mara Greenberg, a detailee on the Senate Judiciary Committee, and Zachary Blau, a fellow on the Senate Judiciary Committee, be granted Senate floor privileges for the duration of the 115th Congress.

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

Mr. ALEXANDER. Mr. President, I ask unanimous consent that Elizabeth Joseph, a health policy fellow in Senator COCHRAN's office be granted floor privileges through July 31, 2017.

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

**ORDERS FOR WEDNESDAY,  
JANUARY 11, 2017**

Mr. ENZI. Mr. President, I ask unanimous consent that when the Senate completes its business today, it adjourn until 12 noon, Wednesday, January 11; further, that following the prayer and pledge, the morning hour be deemed expired, the Journal of proceedings be approved to date, and the time for the two leaders be reserved for their use later in the day; finally, that following leader remarks, the Senate resume consideration of S. Con. Res. 3, with 3 hours of debate remaining on

the resolution for the majority and 3 hours for the minority.

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

**ORDER FOR ADJOURNMENT**

Mr. ENZI. Mr. President, if there is no further business to come before the Senate, I ask unanimous consent that it stand adjourned under the previous order, following the remarks of Senator BROWN.

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

Mr. ENZI. I yield the floor.

I suggest the absence of the quorum. The PRESIDING OFFICER. The clerk will call the roll.

The bill clerk proceeded to call the roll.

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

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

**PRESCRIPTION DRUG PRICES**

Mr. BROWN. Mr. President, skyrocketing drug prices are crippling far too many American families. The Kaiser Family Foundation found that nearly 8 in 10 Americans believe the cost of their prescription drugs is too high and that Congress should work to lower the price of medication that people need.

This should be our top health priority for 2017, lowering drug costs for families, not taking health care away from Americans with no plan to replace it. Think about that. This Congress is hell-bent on, instead of attacking one of the major causes of health care inflation—and we have done a good job the last 10 years, by and large, of keeping prices from going much higher than they would have otherwise. Keep that in mind while we hear the generally specious arguments against the Affordable Care Act. Instead of doing that, the majority party has fallen all over itself to try to take away health insurance from 900,000 people in my State; taking away from 1 million seniors the Medicare consumer protections and Medicare services of preventive care, such as osteoporosis screening, diabetes screening, physicals, all that the doctors order; taking away from 100,000 young people the ability to stay on their parents' health care plan; and stripping from virtually all Ohio citizens the consumer protections of denying people coverage because of previous conditions, cutting people off their insurance policy because they happen to get too sick and might have cost the insurance companies too much money.

This health care coverage that has saved 24,000 American lives each year since 2014, just think what could happen if we took away their health care coverage.

Instead, lowering drug prices should be something we can come together on.