

Thank you, Mr. President. I yield the floor.

By Mr. FLAKE (for himself and Mr. MCCAIN):

S. 2850. A bill to amend the White Mountain Apache Tribe Water Rights Quantification Act of 2010 to clarify the use of amounts in the WMAT Settlement Fund; read the first time.

S. 2850

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,*

**SECTION 1. USE OF FUNDS IN WMAT SETTLEMENT FUND FOR WMAT RURAL WATER SYSTEM.**

(a) AUTHORIZATION OF WMAT RURAL WATER SYSTEM.—Section 307(a) of the White Mountain Apache Tribe Water Rights Quantification Act of 2010 (Public Law 111–291; 124 Stat. 3080) is amended in the matter preceding paragraph (1) by inserting “, (b)(2),” after “subsections (a)”.

(b) FUNDING.—Section 312(b)(2)(C)(i)(III) of the White Mountain Apache Tribe Water Rights Quantification Act of 2010 (Public Law 111–291; 124 Stat. 3093) is amended by striking the period at the end and inserting the following: “, including the planning, design, and construction of the WMAT rural water system, in accordance with section 307(a).”.

**SUBMITTED RESOLUTIONS**

**SENATE RESOLUTION 507—RECOGNIZING THE IMPORTANCE OF THE GOAL OF NATIONAL WOMEN’S HEALTH WEEK TO EMPOWER ADOLESCENT GIRLS AND WOMEN OF ALL AGES TO MAKE INFORMED CHOICES ABOUT THEIR SEXUAL ACTIVITY AND EFFECTIVE STEPS TO PREVENT AGAINST HIV**

Mr. BOOKER submitted the following resolution; which was referred to the Committee on Health, Education, Labor, and Pensions:

S. RES. 507

Whereas approximately ½ of the 36,700,000 people living with human immunodeficiency virus (commonly known as “HIV”) worldwide are women;

Whereas approximately 1,000 adolescent girls and young women worldwide are infected with HIV each day;

Whereas 22 percent of new HIV infections worldwide in 2016 were in young women between 15 and 24 years of age;

Whereas 120,000 children worldwide died in 2016 of causes related to acquired immune deficiency syndrome (commonly known as “AIDS”);

Whereas AIDS is a leading cause of death among adolescents globally;

Whereas young girls who experience violence are 3 times more likely to be infected with HIV, and a survey of 11 countries found that 1 in 3 women reported their first sexual experience as forced or coerced;

Whereas girls account for 74 percent of new HIV infections among adolescents in sub-Saharan Africa;

Whereas 1 in 4 people living with HIV in the United States is a female who is 13 years of age or older;

Whereas approximately 226,000 women live with HIV in the United States;

Whereas 20 percent of the AIDS diagnoses in the United States, from the beginning of

the epidemic through the end of 2015, were among women;

Whereas HIV affects all demographics of women, however, African American women are disproportionately affected;

Whereas African American women made up more than 61 percent of new HIV infections in 2015, while only accounting for 14 percent of the female population in the United States;

Whereas ½ of the women living with HIV in the United States are receiving care;

Whereas only 4 in 10 HIV infected women in the United States have reached viral suppression;

Whereas the annual number of HIV infections through perinatal transmission in the United States has declined by over 90 percent since the early 1990s;

Whereas, when a woman living with HIV receives comprehensive care before, during, and after a pregnancy, the risk of passing HIV to their child reduces to less than 1 percent;

Whereas women and adolescent girls face serious prevention challenges due to inadequate access to evidence-based, age appropriate comprehensive sexuality and HIV prevention education and prevention tools, including—

- (1) male and female condoms;
- (2) pre-exposure prophylaxis (commonly referred to as “PrEP”) and testing;
- (3) sexual and gender based violence prevention and care services; and
- (4) sexual and reproductive health information and services, including screening and treatment for sexually transmitted infections;

Whereas PrEP regimens are more than 90 percent effective in reducing the risk of HIV infection from sex, yet only 10 to 20 percent of at risk women were aware of PrEP regimens as a viable HIV prevention option in 2014; and

Whereas transgender women and women who are lesbian, bisexual, transgender, and intersex are between 19 and 40 percent more at risk of HIV than the general population, and have risk factors that are exacerbated by stigma, discrimination, and violence: Now, therefore, be it

*Resolved*, That the Senate—

(1) recognizes the importance of the goal of National Women’s Health Week to empower young women to make informed choices about their sexual activity and take effective steps to protect against human immunodeficiency virus (commonly referred to as “HIV”);

(2) applauds the leadership of the United States on efforts to eliminate new pediatric HIV infections in the United States and around the world, and supports providing adolescent girls and young women with the evidence-based approaches necessary to prevent new HIV infections in themselves and their children;

(3) supports the investment of the United States President’s Emergency Plan for AIDS Relief (commonly referred to as “PEPFAR”) in the DREAMS (Determined, Resilient, Empowered, AIDS-free, Mentored, and Safe) partnership, that aims to significantly reduce new HIV infections among adolescent girls and young women through evidence-based, multi-sectoral approaches and encourages PEPFAR to expand this approach and investment;

(4) commends PEPFAR for significantly reducing in 2017, for the first time, new HIV infections among adolescent girls and young women within the highest-burden areas of 10 sub-Saharan African countries, and notes the need for ongoing work so women and girls can realize their right to live free from HIV, violence, and discrimination, including in the United States;

(5) encourages State and local governments, including public health agencies and media organizations, to recognize and support National Women’s Health Week, publicize its importance among communities, and encourage individuals, especially women and girls, to get tested for HIV;

(6) supports effective and comprehensive HIV prevention education programs targeted at women and girls to promote their knowledge and access to information and services, including for early identification of vulnerabilities through screening for violence, testing, and other modalities that connect those in need to evidence-based and human rights-based prevention, care, and treatment services; and

(7) urges continued investment and engagement across foreign assistance programs and diplomatic efforts to address violence against women and girls, to combat discrimination on the basis of sexual orientation and gender identity, and to recognize the inability of adolescent girls to access a full range of their sexual and reproductive health and rights as a key driver of the HIV pandemic.

**SENATE RESOLUTION 508—SUPPORTING THE GOALS OF MYALGIC ENCEPHALOMYELITIS/CHRONIC FATIGUE SYNDROME INTERNATIONAL AWARENESS DAY**

Mr. MARKEY (for himself, Mr. KING, Mr. VAN HOLLEN, and Ms. COLLINS) submitted the following resolution; which was referred to the Committee on Health, Education, Labor, and Pensions:

S. RES. 508

Whereas the Health and Medicine Division of the National Academies of Sciences, Engineering, and Medicine (referred to in this preamble as “HMD”), formerly known as the Institute of Medicine, has found Myalgic Encephalomyelitis/Chronic Fatigue Syndrome (referred to in this preamble as “ME/CFS”) to be “a serious, chronic, complex, and systemic disease that frequently and dramatically limits the activities of affected patients”;

Whereas between 836,000 and 2,500,000 individuals of all ages, races, and sexes in the United States are believed to be afflicted with ME/CFS, with millions more afflicted by ME/CFS worldwide, and the vast majority of individuals with ME/CFS are undiagnosed or misdiagnosed;

Whereas ME/CFS is approximately 4 times more prevalent in women than in men;

Whereas ME/CFS is a chronic disease that persists for decades and leaves ¼ of individuals with ME/CFS housebound or bedbound, often for years;

Whereas 50 to 75 percent of individuals with ME/CFS cannot work or attend school;

Whereas medical expenses and lost productivity related to ME/CFS cost the economy of the United States \$17,000,000,000 to \$24,000,000,000 annually;

Whereas the cause of ME/CFS is unknown, there is no diagnostic test for ME/CFS, and there is no treatment for ME/CFS that is approved by the Food and Drug Administration;

Whereas HMD has noted a “paucity of research” on ME/CFS and that “more research is essential”;

Whereas individuals with ME/CFS struggle to find doctors who are willing and able to care for them and ME/CFS is included in less than ½ of medical curricula;

Whereas, in recognition of the dearth of research on ME/CFS and the profound impact

that the disease has on individuals with ME/CFS and their loved ones and caretakers, the National Institutes of Health (referred to in this preamble as the “NIH”) is “committed to unraveling the underlying biologic cause(s) of ME/CFS as swiftly as possible, and promoting research that will inform the development of effective strategies for treatment and prevention of this devastating condition”;

Whereas, in 2017, 11 Institutes at the NIH that participate in the Trans-NIH Myalgic Encephalomyelitis/Chronic Fatigue Syndrome Working Group and the Office of the Director of the NIH contributed more than \$7,000,000 in grants to assist in establishing Collaborative Research Centers and a Data Management Coordinating Center to improve the coordination of ME/CFS research and help accelerate understanding of ME/CFS; and

Whereas, in 2018, May 12 is recognized as International Awareness Day for ME/CFS and other neurological conditions: Now, therefore, be it

*Resolved*, That the Senate—

(1) supports the goals of Myalgic Encephalomyelitis/Chronic Fatigue Syndrome International Awareness Day;

(2) recognizes and affirms the commitment of the United States to—

(A) discovering the cause of, and a cure for, Myalgic Encephalomyelitis/Chronic Fatigue Syndrome; and

(B) improving the availability and quality of medical care for individuals with Myalgic Encephalomyelitis/Chronic Fatigue Syndrome; and

(3) encourages—

(A) the National Institutes of Health and other Federal agencies to work with experts, stakeholders, and individuals with Myalgic Encephalomyelitis/Chronic Fatigue Syndrome to—

(i) consider the recommendations of the National Academies of Sciences, Engineering, and Medicine relating to Myalgic Encephalomyelitis/Chronic Fatigue Syndrome; and

(ii) support research to discover the cause of, and a cure for, Myalgic Encephalomyelitis/Chronic Fatigue Syndrome; and

(B) the medical community to enhance practitioner training to provide appropriate and accessible care for individuals with Myalgic Encephalomyelitis/Chronic Fatigue Syndrome.

**SENATE RESOLUTION 509—PROVIDING FOR MEMBERS ON THE PART OF THE SENATE OF THE JOINT COMMITTEE ON PRINTING AND THE JOINT COMMITTEE OF CONGRESS ON THE LIBRARY**

Mr. McCONNELL submitted the following resolution; which was considered and agreed to:

S. RES. 509

*Resolved*, That the following named Members be, and they are hereby, elected members of the following joint committees of Congress:

JOINT COMMITTEE ON PRINTING: Mr. Blunt, Mr. Roberts, Mr. Wicker, Ms. Klobuchar, and Mr. Udall.

JOINT COMMITTEE OF CONGRESS ON THE LIBRARY: Mr. Blunt, Mr. Roberts, Mr. Shelby, Ms. Klobuchar, and Mr. Leahy.

**SENATE RESOLUTION 510—EX-PRESSING SUPPORT FOR THE DESIGNATION OF THE MONTH OF MAY 2018 AS “NATIONAL BLADDER CANCER AWARENESS MONTH”**

Mr. MENENDEZ (for himself and Mr. ISAKSON) submitted the following resolution; which was considered and agreed to:

S. RES. 510

Whereas more than 700,000 people in the United States live with bladder cancer;

Whereas more than 81,000 people are expected to be diagnosed with bladder cancer and more than 17,000 will die due to the disease in 2018 alone;

Whereas bladder cancer affects people of all ages and backgrounds and is among the top 10 cancers with the highest incidence rates in the United States;

Whereas bladder cancer is known as one of the most expensive cancers to treat on a per patient basis, with a recurrence rate of approximately 50 to 80 percent, requiring life-long surveillance;

Whereas bladder cancer symptoms, such as blood in the urine, are easily recognized, however, many are unaware of the threat of bladder cancer, often prolonging the time to diagnosis;

Whereas, if diagnosed early, bladder cancer is treatable;

Whereas military veterans are twice as likely as nonveterans to be diagnosed with bladder cancer;

Whereas women are often diagnosed at a later stage in the development of bladder cancer, and when diagnosed at the same stage as men, women have a worse prognosis;

Whereas, if diagnosis and treatment are delayed, the life expectancy of an individual with bladder cancer decreases;

Whereas the quality of life of a person with bladder cancer will depend on future treatment and diagnosis developments, which will rely on research advancements;

Whereas research advancements for bladder cancer are limited by a lack of awareness about the disease within the medical community and the general public;

Whereas increased awareness of bladder cancer will promote early diagnosis and increase the chances of survival;

Whereas increased awareness of bladder cancer will bolster public support of the disease and thus increase funding for innovative research and the development of new treatment options and diagnostic tools;

Whereas, traditionally, on the first Saturday in May each year, survivors, caregivers, and loved ones walk together throughout the United States to raise awareness of bladder cancer;

Whereas the Bladder Cancer Advocacy Network and its community of patients, caregivers, and specialists seek—

(1) to foster a community of hope and support;

(2) to fund and conduct research for innovative treatments and diagnostic tools; and

(3) to increase public awareness and understanding of bladder cancer; and

Whereas May would be an appropriate month to designate as “National Bladder Cancer Awareness Month”: Now, therefore, be it

*Resolved*, That the Senate—

(1) supports the designation of May 2018 as “National Bladder Cancer Awareness Month”;

(2) supports the goals and ideals of National Bladder Cancer Awareness Month; and

(3) calls on the people of the United States, interested groups, and affected persons—

(A) to promote awareness of bladder cancer and to foster understanding of the impact of the disease on patients and their families and caregivers;

(B) to take an active role in the fight to end bladder cancer; and

(C) to observe National Bladder Cancer Awareness Month with appropriate ceremonies and activities.

**AUTHORITY FOR COMMITTEES TO MEET**

Mr. BARRASSO. Mr. President, I have 9 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 BANKING, HOUSING, AND URBAN AFFAIRS**

The Committee on Banking, Housing, and Urban Affairs is authorized to meet during the session of the Senate on Tuesday, May 15, 2018, at 10 a.m. to conduct a hearing on the following nominations: Thelma Drake, of Virginia, to be Federal Transit Administrator, Department of Transportation, Jeffrey Nadaner, of Maryland, to be an Assistant Secretary of Commerce, and Seth Daniel Appleton, of Missouri, to be an Assistant Secretary of Housing and Urban Development; to be immediately followed by a hearing to examine the nominations of Richard Clarida, of Connecticut, to be Vice Chairman of the Board of Governors of the Federal Reserve System, and to be a Member of the Board of Governors of the Federal Reserve System, and Michelle Bowman, of Kansas, to be a Member of the Board of Governors of the Federal Reserve System.

**COMMITTEE ON ENERGY AND NATURAL RESOURCES**

The Committee on Energy and Natural Resources is authorized to meet during the session of the Senate on Tuesday, May 15, 2018, at 10 a.m. to conduct a hearing on the nomination of Aimee Kathryn Jorjani, of Wisconsin, to be Chairman of the Advisory Council on Historic Preservation.

**COMMITTEE ON HEALTH, EDUCATION, LABOR, AND PENSIONS**

The Committee on Health, Education, Labor, and Pensions is authorized to meet during the session of the Senate on Tuesday, May 15, 2018, at 10 a.m. to conduct a hearing entitled “Examining Oversight Reports on the 340B Drug Pricing Program”.

**COMMITTEE ON HOMELAND SECURITY AND GOVERNMENTAL AFFAIRS**

The Committee on Homeland Security and Governmental Affairs is authorized to meet during the session of the Senate on Tuesday, May 15, 2018, at 2:30 p.m. to conduct a hearing entitled “Authorities and Resources Needed to Protect and Secure the United States.”

**COMMITTEE ON THE JUDICIARY**

The Committee on the Judiciary is authorized to meet during the session