

Mr. DURBIN. I announce that the Senator from New Jersey (Mr. MENENDEZ) is necessarily absent.

Mr. THUNE. The following Senators are necessarily absent: the Senator from North Dakota (Mr. CRAMER), the Senator from Texas (Mr. CRUZ), the Senator from Florida (Mr. RUBIO), and the Senator from Florida (Mr. SCOTT).

The yeas and nays resulted—yeas 53, nays 42, as follows:

[Rollcall Vote No. 206 Ex.]

YEAS—53

Baldwin	Hassan	Reed
Bennet	Heinrich	Rosen
Blumenthal	Hickenlooper	Sanders
Booker	Hirono	Schatz
Brown	Kaine	Schumer
Butler	Kelly	Shaheen
Cantwell	King	Sinema
Cardin	Klobuchar	Smith
Carper	Lujan	Stabenow
Casey	Manchin	Tester
Collins	Markey	Van Hollen
Coons	Merkley	Warner
Cortez Masto	Murkowski	Warnock
Duckworth	Murphy	Warren
Durbin	Murray	Welch
Fetterman	Ossoff	Whitehouse
Gillibrand	Padilla	Wyden
Graham	Peters	

NAYS—42

Barrasso	Grassley	Paul
Blackburn	Hagerty	Ricketts
Boozman	Hawley	Risch
Braun	Hoeven	Romney
Britt	Hyde-Smith	Rounds
Budd	Johnson	Schmitt
Capito	Kennedy	Scott (SC)
Cassidy	Lankford	Sullivan
Cornyn	Lee	Thune
Cotton	Lummis	Tillis
Crapo	Marshall	Tuberville
Daines	McConnell	Vance
Ernst	Moran	Wicker
Fischer	Mullin	Young

NOT VOTING—5

Cramer	Menendez	Scott (FL)
Cruz	Rubio	

The PRESIDING OFFICER. On this vote, the yeas are 53, the nays are 42.

The motion is agreed to.

EXECUTIVE CALENDAR

The PRESIDING OFFICER. The clerk will report the nomination.

The senior assistant legislative clerk read the nomination of Robin Michelle Meriweather, of Virginia, to be a Judge of the United States Court of Federal Claims for a term of fifteen years.

The PRESIDING OFFICER. The Senator from Wisconsin.

UNANIMOUS CONSENT REQUEST—S. 2024

Ms. BALDWIN. Mr. President, I rise to urge my Democratic and Republican colleagues to stand with the majority of Americans who believe a woman should have the right to choose what is best for her and her family, health, and future.

The bills we are advancing today are commonsense, straightforward measures that will ensure more women can access the safe reproductive care that they need and deserve. Our legislation will also ensure that doctors can do their jobs, get the training they need to keep their patients safe.

For 2 years, millions of women across this country have lived without full reproductive rights, while many more

live in fear that their rights and freedoms could be on the chopping block. The overturning of Roe v. Wade has jeopardized Americans' lives, health, and future fertility. The Dobbs decision also forced women and their doctors to navigate a complicated and ever-changing patchwork of laws that dictate Americans' rights based on their ZIP codes.

For example, in my home State of Wisconsin, women were sent back to live under an 1849 criminal abortion ban. Judges and politicians were invited into the exam room, while lawyers told doctors how to do their jobs. And these dire impacts reached further than exam rooms; they reached into medical schools that are training our next generation of doctors.

For our top-ranked medical schools, a post-Roe reality sowed chaos as students and their instructors wondered how future doctors in our State would have access to the full slate of training necessary to safely practice obstetrics and gynecology.

The overturning of Roe put those medical schools' accreditations on the line. It opened the prospect that OB/GYNs might not be trained to provide sometimes lifesaving abortion care. No matter who you are, the idea that doctors could graduate without the proper training to do their jobs and save lives should scare all of us.

We also saw prospective students who might otherwise be attracted to our top-tier research institutions reconsider starting their careers in Wisconsin. We saw a downtick of OB/GYN residents interested in coming to our State. And while it is disheartening to say, can you blame them? Why would you want to start a career in a State that restricts you from doing your job and prevents your patients from exercising their right to control their own bodies?

That is why last year I introduced my Reproductive Health Care Training Act, commonsense legislation to support training for healthcare providers in abortion care, including for providers forced to travel out of State due to abortion restrictions.

My bill with Senator MURRAY would help ease the burden of travel costs for eligible medical programs to expand and support education for students, residents, and advanced practice clinicians in States that allow comprehensive training in abortion care.

Our legislation would also help ensure that medical programs accommodating an influx of students have the resources they need to provide training to students who must travel across State lines to complete their education.

The reality of post-Roe America is that there are still countless places in the United States where medical students cannot access training in comprehensive reproductive care. The Reproductive Health Care Training Act will ensure future doctors can meet the needs of their patients and provide safe

care, especially in States like Wisconsin that have abortion restrictions.

Every woman, no matter where she lives, deserves access to comprehensive reproductive care. The Reproductive Health Care Training Act will ensure America's future doctors are able to provide the sometimes lifesaving care Americans deserve.

So as in legislative session, and notwithstanding rule XXII, I ask unanimous consent that the Committee on Health, Education, Labor, and Pensions be discharged from further consideration of S. 2024, the Reproductive Health Care Training Act, and the Senate proceed to its immediate consideration; further, that the bill be considered read a third time and passed; and the motion to reconsider be considered made and laid upon the table.

The PRESIDING OFFICER. Is there objection?

The Senator from Kansas.

Mr. MARSHALL. Mr. President, reserving the right to object, first of all, let's discuss the title of this bill: Reproductive Health Care Training Act of 2023. Why are my friends across the aisle afraid to use the word "abortion"?

This bill has nothing to do with reproductive healthcare. This is an abortion training act of 2023. Let's just call it like it is. This is the abortion training act of 2023.

What my colleague from Wisconsin didn't say or tell you is that this bill is unconstitutional. This bill uses taxpayer dollars to fund a direct pipeline of more abortions across the Nation through the Department of Health and Human Services.

This bill establishes a program to award grants or contracts to eligible entities for the purposes of expanding and supporting abortion training and for preparing and encouraging—encouraging—preparing and encouraging students to become abortionists. It encourages efforts to train abortionists with a focus on—get this—a focus on racial and ethnic minority groups, people with disabilities, tribal, and medically underserved communities. Does this imply there is a priority to train and send abortionists to these groups?

This bill authorizes \$25 million to be appropriated for this abortion training pipeline—again, against the Hyde Amendment. This is unconstitutional.

This bill has not received any type of markup in the Health Committee. The Federal Government should not be spending taxpayer dollars to encourage medical students and clinicians to take life when their principal duty, their sacred oath, is to protect life and to do no harm from conception to natural death. Therefore, I object.

The PRESIDING OFFICER. The objection is heard.

The Senator from Wisconsin.

Ms. BALDWIN. Yet again my Republican colleagues have sent a clear message to women across America. They don't think women should have the right to control their bodies.

This bill would have ensured more women could access the safe reproductive care that they need and deserve, including sometimes lifesaving abortion care.

Instead, my colleagues have turned their back on the millions of women in States where abortion is restricted. They have turned their backs on millions of women who are increasingly struggling to find OB/GYN care in their community. They have turned their back on OB/GYN residents and students who just want to learn how to care for their patients.

Without access to training and comprehensive reproductive care for our doctors, more women in States like my own will live in healthcare deserts, without the care they need to stay healthy, start a family, and get screenings for cancer and other serious illnesses.

My Reproductive Health Care Training Act would have ensured America's future doctors have the training they need to provide safe care, especially in States that have abortion restrictions.

This fight is not over, and I am in it for as long as it takes to restore a woman's freedom to make her own decisions about her health, her family, and her future.

The PRESIDING OFFICER. The Senator from Washington.

UNANIMOUS CONSENT REQUEST—S. 1297

Mrs. MURRAY. Mr. President, I am here today with a very simple bill to protect doctors who are providing legal care against attacks from extreme out-of-state, out-of-touch politicians.

In my State, abortion is not only legal but protected by our State constitution. But when I talk to abortion providers in Spokane, where they see a lot of patients fleeing restrictive abortion bans from States like Idaho, they are terrified that they could face a lawsuit that will threaten their practice and their livelihood, just for doing their jobs, just for providing care their patients need—care that is, once again, completely legal in my State. We are talking about people who are following the law and simply want to provide care to their patients. This should be cut-and-dried.

So, Mr. President, as if in legislative session and notwithstanding rule XXII, I ask unanimous consent that the Judiciary Committee be discharged from further consideration of S. 1297, the Let Doctors Provide Reproductive Health Care Act, and the Senate proceed to its immediate consideration; and, further, that the bill be considered read a third time and passed; and the motion to reconsider be considered made and laid upon the table.

The PRESIDING OFFICER. Is there objection?

The Senator from North Carolina.

Mr. BUDD. Mr. President, I object to S. 1297 for a simple reason: It would make it easier for unborn life to be ended.

The Supreme Court's Dobbs decision brought renewed hope to Americans

who believe in the sanctity of each and every life, including life in the womb. After 49 years, a new culture of life is enriching our country from coast to coast.

But this bill would take us backward. This bill would, first of all, allow abortion on demand in pro-life States, so long as the patient is from another State. And that is crazy.

Second, this bill would expose doctors and nurses who work in religious organizations, clinics, and hospitals. It would expose them to costly lawsuits if they stand by their deeply held beliefs. That also is crazy.

And, finally, this bill would violate the spirit of bipartisan Hyde protections by providing millions of taxpayer dollars to the abortion industry. That also is crazy.

I was elected to protect life, liberty, and the pursuit of happiness for all, including for life for the unborn. But this bill puts more unborn lives in danger. Therefore, I object.

The PRESIDING OFFICER. The objection is heard.

The Senator from Washington.

Mrs. MURRAY. Mr. President, let's be clear. Republicans who are now in the middle of trying to rewrite history and claim they only want State politicians overruling women—already an extreme position, by the way—just made clear that actually, on second thought, they have no problem whatsoever with politicians targeting doctors in States like mine, where abortion is legal. I think that pretty much gives the game away.

I yield the floor.

The PRESIDING OFFICER. The Senator from Nevada.

UNANIMOUS CONSENT REQUEST—S. 2053

Ms. CORTEZ MASTO. Mr. President, we are now 2 years into a world without Roe v. Wade, a world in which daughters have fewer rights than their mothers and their grandmothers did at their age.

In the 2 years since the Supreme Court overturned Roe, nearly half the States in our country have banned—or effectively banned—access to abortion. Women in those States have extremely limited options for accessing essential healthcare.

For many of these women, their only option for getting the reproductive care they need is going to another State. Last year alone, 171,000 Americans traveled across State lines to access an abortion.

Pro-choice States like Nevada are welcoming these women with open arms and providing them with the essential healthcare their own States have outlawed. In the last 2 years, the number of women coming to Southern Nevada from out of State to get abortion care has doubled.

But even though Nevada is a safe place for women who need healthcare, anti-choice politicians living outside my State are telling women: No, sorry, if you try to travel outside this State, we are going to prosecute anyone who helps you.

Elected officials in States like Tennessee and Texas and Alabama are trying to punish women for leaving their State for reproductive care, as well as anyone who helps them, including their doctors or even their employers. Why? Because for these anti-choice politicians, this is about controlling women.

That is why today I am calling for passage of my Freedom to Travel for Health Care Act. Our legislation reaffirms that women have a fundamental right to interstate travel and makes it crystal clear that States cannot prosecute women—or anyone who helps them—for going to another State to get the critical reproductive care that they need.

The Freedom to Travel for Health Care Act would also empower the Attorney General and anyone impacted to sue the anti-choice politicians who have violated their rights and put these barbaric restrictions in place. And it would protect healthcare providers in pro-choice States like mine—in Nevada—who help these women traveling from out of State.

Now, I wrote this bill 2 years ago, after the fall of Roe v. Wade, because, like many women across the country, I could see that the anti-choice movement would never stop trying to dismantle women's rights. And we are seeing that play out before our very eyes. We are hearing it today on the floor. We see it in our States.

Last month, Lauren Miller came here to Washington to testify in a Senate subcommittee hearing and tell her story. Lauren was a mother of one and was thrilled to find out that she was pregnant once again, this time with twins. She and her husband couldn't wait to grow their family. But at her 12-week ultrasound, Lauren learned the most devastating news: Half of one of her twins' brains was filled with fluid, and it was not going to survive. Lauren needed to abort this fetus to save the other viable twin and to protect her own life.

The problem was that Lauren lived in Texas, where abortions are almost entirely banned. Lauren's doctors wouldn't even talk to her about having a lifesaving abortion because they were so afraid of Texas's intentionally confusing laws, and they did not want to be prosecuted for practicing medicine to help her.

In her testimony, Lauren said:

My pregnancy was not my own. It belonged to the State.

Even after she ended up in the hospital at risk of organ damage to her kidneys and her brain, she still could not get the care that she needed. Lauren was forced to set aside several days and thousands of dollars while she was terribly ill so that she could fly to Colorado, just to access reproductive healthcare—just to access 21st century medicine.

And if that wasn't enough of a burden, Lauren and her husband were terrified to travel out of State because of Texas's bounty laws. In Texas, private