

Within days of assuming command of the Big Red One in 2016, he deployed with his division headquarters, 500 of his soldiers, to Iraq. He assumed leadership of the Combined Joint Forces Land Component Command-Iraq in support of Operation Inherent Resolve.

Major General Martin's combat leadership was remarkable in Iraq. During the 9-month deployment, he led the fight, alongside the Government of Iraq, against the Islamic State in Iraq and Syria in Mosul. His efforts, and the efforts of the brave soldiers in the U.S. Army and all of our troops, led to the defeat of ISIS in Mosul and the destruction of their territorial hold. ISIS had been in control of Mosul since 2014 but were beaten back by Major General Martin and his forces. They liberated 1.8 million Iraqis, and it was a remarkable victory.

In the manner of a true combat leader, Major General Martin was one of the last soldiers to return from the mission in July of 2017. When General Martin returned stateside, he quickly demonstrated his leadership back on base at Fort Riley, and he led the 100th anniversary of the division.

He has been an outstanding partner to me and fellow Kansans on a number of initiatives to support the Big Red One. He has been involved in the communities of Manhattan and Junction City and those other communities that surround Fort Riley. It is no surprise to me that he has been selected for promotion to lieutenant general. He is a proven leader, capable of completing the most complex challenges under the most stressful situations. The Army has made the right move with his promotion and, furthermore, by placing him in a position of greater responsibility.

I am confident Kansans will join me in congratulating soon-to-be-confirmed Lieutenant General Martin on his promotion. We honor and thank him for his service.

We recognize the sacrifices he and his family have made over the last 32 years. I recognize his wife Leann and their children, Kylie and Joey, for their service over the years. Strong Army families make strong Army soldiers.

I have no doubt—none—that Major General Martin will continue to be one of the Army's best leaders, and I look forward to seeing what lies ahead for him in his career.

Congratulations, General Martin.

I yield the floor.

The PRESIDING OFFICER. The Senator from Idaho.

Mr. CRAPO. Mr. President, I rise in support of the nominations of Ms. Jelena McWilliams to be Chair and a member of the Federal Deposit Insurance Corporation.

As one of the three primary Federal financial regulators, the FDIC plays a critical role in the U.S. financial system, particularly for community banks. As head of the FDIC, Ms. McWilliams will be responsible for ad-

ministering the Deposit Insurance Fund and ensuring the safety and soundness of the financial system while also promoting economic growth. She will also contribute to deliberations on financial stability as a member of the Financial Stability Oversight Council.

In having focused extensively on financial institutions throughout her career in both the private and public sectors, Ms. McWilliams is supremely qualified for this position.

She has a unique view of the U.S. regulatory system and its regulated entities, most recently serving as the chief legal officer, executive vice president, and corporate secretary for Fifth Third Bank, which is a regional bank based in Ohio. Prior to that, she served as a valuable member of the Banking Committee's staff for both Senator SHELBY and me. Ms. McWilliams also worked as an attorney at the Federal Reserve during the financial crisis and on the Small Business Committee under former Senator Snowe.

Many of my colleagues and I can personally attest to her qualifications, her good judgment, and her expertise, which will be an asset to the FDIC and to the country.

At her nomination hearing in January, Ms. McWilliams demonstrated a deep knowledge of the issues overseen by the FDIC as well as a commitment to carrying out its mission. She discussed how her personal experience has shaped her conviction in the FDIC's unique responsibility as a deposit insurer, noting that one of the side effects of the civil war that broke apart the former Yugoslavia was a collapse of its financial system. Her parents, who still lived there, had their savings disappear overnight when a local bank closed its doors. Yugoslavia had no deposit insurance, and her then 68-year-old father returned to work as a day laborer.

As she stated at her hearing, "I can assure you that the core mission of the FDIC resonates profoundly with me and, if confirmed, I will not take its mission or my duties lightly."

Ms. McWilliams has conveyed a strong desire to encourage economic growth and facilitate new bank creation by continuing to address the disproportionate regulatory burden that is faced by community banks. Additionally, she acknowledged the need to expand Americans' access to credit and the banking system.

If confirmed as a member and Chair of the FDIC, I look forward to having the opportunity to work with Ms. McWilliams on these important issues. I strongly support her nominations today, and I urge my colleagues to do the same.

I yield the floor.

The PRESIDING OFFICER. The Senator from Connecticut.

HEALTHCARE

Mr. MURPHY. Mr. President, starting in January of 2017, extending to today, the President, often with the help of this Republican Congress, has

engaged in a very deliberate, very purposeful campaign of sabotage to the American healthcare system. We are now starting to see the very serious consequences of this campaign of sabotage. It started on Inauguration Day when President Trump signed an Executive order that ordered all of his agencies to dismantle the Affordable Care Act. It found its way to the Senate floor when Republicans spent most of 2017 trying to pass legislation that would take insurance away from 23 million people, according to the CBO.

The President undertook a number of steps to try to weaken the exchanges where millions of people get their healthcare. He cut the open enrollment period in half. He stopped funding advertising. He pulled funding for the navigators, who are the people who go out and try to help people sort through their healthcare options. There is no reason to do that, to try to stop people from being able to sign up for healthcare, unless your intention is sabotage. There is no public policy reason to give people less time to sign up or to give them less information about their options.

Most recently, the Republicans finally succeeded in repealing the individual mandate which the Congressional Budget Office said will, by itself, increase premiums by 10 percent and wipe out insurance for 13 million people. The administration is now trying to expand the sale of what we call junk plans, which are insurance plans that don't have to cover a minimum set of benefits, that don't have to protect people with preexisting conditions or existing sicknesses from higher premium rates.

I think I came down to the floor 2 weeks ago to talk about the first two rate filings of the rate filing season. These were in Maryland and Virginia. The rate filings were, quite frankly, catastrophic. While these were the worst of the bunch, all of the rate filings were much higher than the rate of medical inflation.

The worst requested increase was when one insurance plan in Maryland asked for a 91-percent increase in premiums. One insurance plan in Virginia asked for a 64-percent increase in premiums. In Maryland, the head of the insurance plan who asked for the 91-percent increase said the reasons for it were the continuing actions on the administration's part to systematically undermine the market and to make it almost impossible to carry out its mission. No one can afford a 91-percent increase in premiums, and no one can afford a 64-percent increase in premiums. Frankly, very few people can afford a 15- or a 20-percent increase in premiums.

This week, we received the rate filings from the State of Oregon. In Oregon, the Providence Health Plan, with about 90,000 customers, which is one of the bigger plans in the State, is asking for a 14-percent premium increase. Now, that is not 91 or 64, but there are

a lot of families who simply aren't going to be able to afford a double-digit premium increase in Oregon. It is important to note that Oregon put into place a new State-based reinsurance program, and if not for that reinsurance program, this would have been a 20-percent increase.

I am just going to keep track of all of these increases so we have a sense of what is happening to consumers as a result of this campaign of sabotage. We will add this rate increase in Oregon of 14 percent, and I will make sure I get it right.

The CBO has told us, the repeal of the individual mandate is going to jump premiums by 10 percent. So, in Oregon, you can be relatively sure that had the Republicans not repealed this big part of the Affordable Care Act, you would have been looking at a single-digit increase, something that would have mirrored medical inflation. Yet, because of the actions that had been taken here and because of many of the actions that have been undertaken by this Congress, we are looking at a double-digit increase.

Keith Forrester, who is the head of one of Oregon's biggest insurance companies, said our rate increase reflects the expected costs of providing coverage to our members, including the impact of eliminating the individual mandate.

Senate Democrats are going to be down on the floor pretty relentlessly over the course of the next few months to make people understand that as you are getting your health insurance bills, as you are seeing these big increases, a big reason will be due to the actions that your elected leaders have taken—this Republican Congress and this administration.

Yet the rate increases might be getting even bigger than they already are today. That is because of this expected proliferation of these new junk plans. Again, these are called short-term plans by the administration because they used to be, truly, short-term options. They were 3 months in duration. You would pick up one of these plans in between coverage, and because they were short-term plans, they were not required to cover mental health and maternity, and they could charge you more if you were sick.

This administration has decided these plans can now be sold for a full year, meaning they will essentially stand side by side with regulated plans that have minimum benefits and protect people with preexisting conditions. The administration said, only a couple hundred thousand people nationwide might sign up for these plans.

The CMS's Chief Actuary says—this is President Trump's CMS, the administration's own Chief Actuary—that is wrong; that, in fact, it will be a million and a half people potentially signing up for these junk plans. It could get as big as 1.9 million by 2022.

Who will sign up for these junk plans? It will be healthy people because

healthy people aren't going to need all of the coverage. It will be people who don't have preexisting conditions, who don't have additions or diagnosed mental illnesses. It will leave behind in the exchange plans the people who need the coverage. Those people will not go on the junk plans because they will need insurance plans that cover their illnesses or their diagnoses. What we know is that if you have a sicker population in the exchange-based plans, in the regulated individual market, those premiums will go up.

A recent study found, the combination of the individual mandate and the proliferation of these new junk plans will result, on average, in 16-percent increases in premiums all across the country. In Connecticut, that could mean the premiums will go up by \$1,155.

Now, that is not something the health insurance companies did. That is not because of rising medical costs. That is because of decisions that were made by this Republican Congress and this Republican administration—two decisions. There was one decision to repeal a big part of the Affordable Care Act that protected sick people, that kept their rates lower. Another decision by the administration was to give relatively healthy people access to stripped-down plans.

Admittedly, those two changes may offer some benefit to people today who are healthy. I am not going to deny that those two changes may provide a lower insurance rate for a subset of people who are healthy, but we are not supposed to just represent the healthy people. Today you are healthy, and tomorrow you are not. We are supposed to represent all Americans. In fact, we probably should be going the extra mile to make sure people who, through no fault of their own, have serious diagnoses aren't paying an arm and a leg more for coverage, but we are not doing that because of the steps this Republican Congress and this Republican President have taken.

On average, insurance rates are going to go up for everybody in Connecticut by \$1,100, according to one study, and they are going to potentially skyrocket for people who can't get onto these stripped-down junk plans.

I think it is really important we talk about this. As I walked across the State of Connecticut last summer—something I have come to do in the last few years; I take about 5 or 6 days and walk from one side of the State to the other, which is something the Presiding Officer and others probably can't do in States that are a little bit longer across than 110 miles—healthcare was the dominant theme. In their having heard the news that I would be in a certain town during the day, people waited for me who were miles ahead on the road. They waited ahead of me for hours and hours to talk to me about their illnesses and about their fears that this Congress and this President were going to take away their coverage.

We were successful in defeating the full repeal of the Affordable Care Act, and that is great news, because the Affordable Care Act is more popular than ever before, but this Congress and this President are trying to ruin some of the most important protections in our healthcare system because they are mad that they lost the repeal vote by one vote.

So it is important for us to tell Americans what the consequences of that sabotage campaign are. It certainly means that people are going to get less protection, but it also means that, over the course of the next few months, as rates are filed across the country, you are going to see some devastatingly high premium increases due to the Republican campaign of healthcare sabotage—this week, 14 percent in Oregon; last week or the week before, 91 percent in Maryland, 64 percent in Virginia. This is what happens when you strike blows at the American healthcare system, and it is important for Americans to understand what that means.

With that, Mr. President, I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER (Mr. LEE). The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

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

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

#### WOMEN'S HEALTHCARE

Mr. WYDEN. Mr. President, I hope that one day soon it will not be necessary to come to the floor of this Senate and shine a spotlight on how the Trump administration is making it harder and harder for women in America to get the healthcare they need and deserve. It seems like not a week goes by without the Trump administration full-on attacking women's healthcare. It is the agenda of what I call healthcare discrimination, and it is out in full force.

The latest news came out officially less than 24 hours ago. The Trump administration has put itself right in the middle of women and their doctors, denying access to critical information that millions of women rely on from physicians and nurses—the very providers they trust and depend on. What this means is that across this country you can say good-bye to the guarantee that women are getting the whole story about their health and the options they have for their care. For millions of women, the healthcare they need is going to have to get a Trump stamp of approval, and that Trump stamp of approval is going to be the requirement to get the care they need.

I just want to say to my colleagues here in the Senate that I think this alone makes a mockery of all the talk I remember hearing from Republican colleagues in this body who said there is going to be patient-centered care in