

emergency room care. Most of them don't cover prescription drugs. So regardless of how the law impacts people who have other types of insurance, I feel strongly that these junk plans are very distorting of the market and not worth the paper they are written on for those who have chosen to take that route.

Last fall, we heard all my colleagues across the aisle say, often repeatedly, that they support protections for people with preexisting health conditions. Today I just offered an opportunity for Democrats and Republicans to come together to protect people's access to quality, affordable healthcare when they need it the most, but there was an objection.

I say to the American people that we must not lose sight of the fight right in front of us. We have a President who time after time has sabotaged our healthcare system, raised healthcare costs, and pushed these junk insurance plans that don't have to cover people with preexisting conditions. We have an administration that is asking a court to strike down the Affordable Care Act and its protections for people with preexisting conditions in their entirety.

The choice for the American people could not be more clear. We want to make things better, and my Republican colleagues refuse to join us in this effort, which would be to prevent this administration from making things worse.

I yield the floor.

The PRESIDING OFFICER. The Senator from Connecticut.

PROTECTING AMERICANS WITH PREEXISTING CONDITIONS ACT OF 2019

Mr. MURPHY. Mr. President, the House recently passed a piece of legislation called the Protecting Americans with Preexisting Conditions Act. The substance of this legislation would prevent a Trump administration rule from going into effect that would allow for States to license the kind of insurance plans that Senator BALDWIN was referring to. These are plans that do not cover preexisting conditions or the essential healthcare benefits.

I am going to offer right now a unanimous consent request to proceed to immediate consideration of this bill. I suspect it will be objected to. After an opportunity for Republicans to object, I will speak to the merits of this legislation. So let me start with a request to bring this legislation that will protect people with preexisting conditions and the essential healthcare benefits to the floor.

UNANIMOUS CONSENT REQUEST—H.R. 986

Mr. President, my motion is as such: As if in legislative session, I ask unanimous consent that the Senate proceed to the immediate consideration of Calendar No. 90, H.R. 986, Protecting Americans with Preexisting Conditions Act of 2019; that the bill be considered read a third time and passed; and that the motion to reconsider be considered made and laid upon the table with no intervening action or debate.

The PRESIDING OFFICER. Is there objection?

The Senator from Tennessee.

Mr. ALEXANDER. Mr. President, reserving my right to object, section 1332 is the innovation waiver that is part of the Affordable Care Act, passed by the Democratic majority. That act includes protection for preexisting conditions. Using the flexibility granted under section 1332 does not change anything about preexisting conditions. So it is misleading to the American people to suggest that it does.

This is another Democratic attempt to make it more expensive, to cost more for what you pay for healthcare out of your own pocket by taking away flexibility from the States to find a less expensive way for you to afford healthcare and, at the same time, not changing the preexisting condition protection that is provided by the Affordable Care Act. This is the latest attempt to do it, but the boldest attempt to raise the cost of your healthcare is Medicare for All, which if you have insurance on the job, as 181 million Americans do, would take that insurance away from you.

I object.

The PRESIDING OFFICER. Objection is heard.

Mr. MURPHY. Thank you, Mr. President. Again, I share in Senator BALDWIN's disappointment that we can't move immediately to this legislation. This isn't a political game. These are individuals all across the country who are relying on us to make sure that they are not subject to the abuses of the market. They are relying on us to make sure we don't return to the days in which insurance companies could prevent you from getting healthcare simply because you were sick or return to the days when you bought an insurance product and then it didn't turn out to ultimately be insurance.

Let's be clear. The waiver that the President has allowed States to take advantage of would absolutely—it would by definition of the rule—allow for States to waive the preexisting condition requirement. The rule itself says that the innovation that happens at the State level does not have to comply with the essential healthcare benefits requirement. It says in the rule that you do not have to comply with preexisting conditions requirements. That is the reason that they are so cheap. So I am at a loss as to why we have Republicans on the floor saying that preexisting conditions will be protected under this rule. That is not true. The rule says that States do not have to comply with the preexisting requirement. It says that States do not have to cover essential healthcare benefits. That is why these junk plans are attractive, because they aren't actually insurance, and they are only insurance for people who are at the time very healthy.

We have to get on the same page here. We have to be reading from the same script. The fact of the matter is,

the definition of the rule allows for protections for people with preexisting conditions to be discriminated against.

I am sorry that we weren't able to bring up this piece of legislation because healthcare insurance should be healthcare insurance. And what we worry about are two things. First is that by allowing for the marketing of these junk plans, you are going to have all sorts of people who today aren't sick jumping into those plans, coming off of the plans that protect people with preexisting conditions. The people who are going to be left behind on those regulated plans are people who are sick, people who have preexisting conditions. So you are, all of a sudden, bifurcating the insurance market. You are going to have a market for people who are currently healthy, and then you are going to have a market for people who are sick or have ever had a preexisting condition.

You do not have to be an actuary and you don't have to have taken classes in healthcare insurance economics to know that when that happens, rates skyrocket for people who have a preexisting condition—for the millions of people around this country who have had a serious diagnosis at some point during their life.

So as you sell these junk plans, there is no way but for costs to go up. That is on top of the increases we saw last year. Last year, insurance companies priced in the costs of Trump administration sabotage. They priced into their premiums the attacks on our healthcare system from the Republican Congress.

In many States, we saw insurance plans pushing 60 percent, 40 percent, and, in some cases, 80 percent increases in premiums. Now on top of that, for sick people, for people with preexisting conditions, the rates are going to be even bigger because of the flight of those without preexisting conditions into marketplaces set up specifically for them.

The second thing we worry about is that these junk plans market themselves as insurance, but they aren't. Here is a list of things that I would generally consider to be covered under my insurance plan.

If I bought an insurance plan, if I handed over a check to the insurance company, I kind of think that if I go to the emergency room, I am not going to have to pay for it out of my pocket. I am thinking to myself: Well, you know what, if I need prescription drugs, they are going to cover some of that. Well, if I have a mental health diagnosis, doesn't insurance cover my head as well as the rest of my body?

These are the things that I would assume that insurance covers, but these junk plans don't cover these things.

Junk plans do not cover trips to the emergency room. Junk plans often don't cover hospitalizations. They don't cover prescription drugs. Almost none of them cover maternity care. Your checkups might not be covered

under a junk plan. Preexisting conditions will cost you more. Contraception isn't going to be in lots of these plans. They are not required to cover lab services or pediatrics. Mental health isn't going to be in many of these junk plans. As for rehab services, if you get injured, you are not going to find those in some of these plans. And if you have a chronic disease, there is nothing in the law that requires treatment for those to be covered.

So all of a sudden, as for the things you thought insurance covered, they don't cover it, and you have been paying a premium for years. Then, when you finally need access to the system, it is not there. That is what these plans can do. That is what the law and the Trump administration rule allows States to license as insurance. And that is why we are on the floor today, to ask—to plead—to our colleagues to bring legislation before this body, either Senator BALDWIN's legislation or Representative KUSTER's legislation that has already passed the House, that would stop these junk insurance plans from being sold all around this country, which will trick many Americans into believing they have insurance when they don't and will dramatically raise the cost of care potentially in many States for people who have serious preexisting conditions.

I am not surprised at the objection to both of our unanimous consent requests. Nevertheless, I am disappointed in it. We will continue to be down here on the floor for as much time as it takes to try to rally the whole of this body to protect people with preexisting conditions, to fight back against the sabotage of the Affordable Care Act and the healthcare system by this President. Hopefully, one day we will be successful.

I yield the floor.

The PRESIDING OFFICER. The Senator from Michigan.

Ms. STABENOW. Mr. President, I am proud to be here on the floor today to join with Senator BALDWIN and Senator JONES on their resolution with Senator MURPHY. I have to say to Senator MURPHY, before he puts that down, I have to look at that list and tell you that, before the Affordable Care Act, I would get calls like this, and I am sure you did, too.

Someone calls me and would say: I paid into healthcare all my life and never gotten sick, and then I finally needed surgery. What do you mean it only pays for 1 day in the hospital? Well, it never paid for more than 1 day in the hospital, but they didn't know it because they didn't get sick.

So folks buy the junk plans—and thank you for the list—but they buy the junk plan being healthy and then will never know that it doesn't cover those things unless they get sick. When they find out, it will be too late.

So that is why we are here because we know that healthcare isn't political. It shouldn't be political. It is personal for every one of us. It is personal

for ourselves and our families. It affects all of us, whether we are Democrats, Republicans, Independents, vote, don't vote, urban, rural from any State in the Union.

In fact, when people tell me their healthcare stories, they don't start by telling me their political affiliation. They talk to me about what has happened to them, what has happened to their mom and dad, what has happened to their children. Political affiliation doesn't matter.

People in Michigan simply want to know that the healthcare they depend on will be there for them and be affordable for them and their family today and into the future, and that is the fight that we have as Democrats. We will continue that fight.

Unfortunately, they have reason to be worried about the rise of short-term, limited duration insurance plans. They should be worried about what these plans don't cover—junk plans, as we are calling them. As Senator BALDWIN said so well, they are junk. They don't really cover anything. They make you feel good, as long as you are healthy, that you have got insurance, but then you find out, when you get sick, that your child is not covered or you are not covered.

The fact many of these plans are medically underwritten, which means that the insurance company—by the way, junk plans are about putting decisions back in the hands of the insurance company, instead of you knowing that you and your doctor can decide what you need and that it will be covered. The insurance companies can charge whatever they want based on somebody's health, gender, age, or other status.

Remember when being a woman was considered a preexisting condition? I do. These plans are bringing that back. One recent study found that none of these plans that have been approved by the Trump administration so far cover maternity care—none of them. We fought hard—I fought hard—as a member of the Finance Committee to make sure that women's healthcare and maternity care were covered. Our healthcare is as basic a healthcare as any man's healthcare and ought to be covered the same.

I want to repeat this. We have a maternal health crisis in this country, and the administration is pushing plans that don't cover basic coverage for women. On top of that, these junk plans can exclude people with preexisting conditions—yes, they can—and impose yearly or lifetime caps on care.

Remember when you had to worry about how many cancer treatments the insurance company would pay for? Now, there aren't caps so that you can decide and your doctor can decide with you on what it takes to put you in remission and put you on a healthy path. It is estimated about half of Michigan families include somebody with a preexisting condition—about half—with everything from heart disease to asth-

ma to arthritis. I met with some of them earlier this month during the National Brain Tumor Society's Head to the Hill event.

Tiffany, who is from Livonia, was just 17 years old when she was diagnosed with a brain tumor. Since then, her tumor has reoccurred six times. She has been through seven surgeries, chemotherapy, and radiation treatments. The location of her tumor means that Tiffany has also lost some of the use of her left arm and hand. Tiffany doesn't have a choice. Her life depends on having comprehensive health insurance. Unfortunately, that kind of insurance is getting less and less affordable.

So when our Republican colleagues come to the floor and say that we just want to raise prices, let me tell you what has really happened in the last year. The sabotage by the Trump administration, the unravelling of the Affordable Care Act, the junk plans, now the instability and going into court to try to totally repeal the Affordable Care Act, all of that instability—everything that has been done—means that comprehensive health insurance costs have gone up 16.6 percent this year, so somebody buying insurance is paying an average 16.6 percent more than they did last year because of all of this effort to sabotage, undermine, and unravel the healthcare system.

Tiffany should be able to focus on getting the treatment she needs and living her best life possible, not how she will pay for the insurance she needs. We all know Tiffany isn't alone. It is estimated that 130 million people in our country are living with preexisting conditions—130 million people. That is 130 million people who could be hurt either directly or indirectly by these short-term junk plans.

Two weeks ago, I had the chance to speak at the Detroit Race for the Cure, which raises money for breast cancer research and services. As I stood on the stage and looked out at over 10,000 people, a lot of beautiful pink all surrounding us in downtown Detroit, I saw people with preexisting conditions. One woman, who was standing on the stage near me, asked me the question: Why is it that I have to worry about whether or not I will be able to get insurance in the future? Why do I have to worry about that?

She added: Why don't President Trump and other Republicans understand this is my life?

It is not political for her. It is personal. It is her life. I think that is a very good question: Why don't Republicans understand that people like Tiffany and those women in pink deserve healthcare protections?

Protecting people with preexisting conditions isn't about politics. It is about saving lives. I urge my colleagues to support this commonsense legislation and the efforts of Senator BALDWIN and JONES.

VIOLENCE AGAINST WOMEN ACT

Mr. President, I want to take an additional moment to talk about a second issue that is about saving lives.

For almost 25 years, the Violence Against Women Act has helped prevent domestic violence and provide survivors with the things they need to build a better life for themselves and their families. This important piece of legislation is now expired.

The House passed a VAWA—Violence Against Women’s Reauthorization bill 48 days ago and sent it to us. It contained important updates to protect people from violent dating partners and stalkers, and it helps restore Tribal jurisdiction over certain crimes committed on Tribal lands.

Unfortunately, just as in the case of junk insurance plans, we have seen no action on this floor—no action—by the majority leader. I think, in fact, it has been over 2 months since we have had actual legislation and votes on legislation that would solve problems and address concerns of the American people. It has been 48 days since the House of Representatives sent us a bill to continue support and funding for domestic violence shelters and other important support.

Well, people with preexisting conditions have waited long enough. Survivors of domestic violence have waited long enough. People whose lives are being threatened by violent dating partners or stalkers have waited long enough.

Here is my question for the Senate majority leader: What are you waiting for?

I yield the floor.

I suggest the absence of a quorum.

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

The assistant bill clerk proceeded to call the roll.

The PRESIDING OFFICER. The Senator from North Carolina.

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

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

Mr. BURR. I ask unanimous consent that we start the 4:30 votes now.

I ask for the yeas and nays.

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

The question is, Will the Senate advise and consent to the Nielson nomination?

Is there a sufficient second?

There appears to be a sufficient second.

The clerk will call the roll.

The assistant bill clerk called the roll.

Mr. THUNE. The following Senator is necessarily absent: the Senator from North Carolina (Mr. TILLIS).

Further, if present and voting, the Senator from North Carolina (Mr. TILLIS) would have voted “yea.”

Mr. DURBIN. I announce that the Senator from California (Ms. HARRIS) is necessarily absent.

The PRESIDING OFFICER. Are there any other Senators in the Chamber desiring to vote?

The result was announced—yeas 51, nays 47, as follows:

[Rollcall Vote No. 123 Ex.]

YEAS—51

Alexander	Fischer	Paul
Barrasso	Gardner	Perdue
Blackburn	Graham	Portman
Blunt	Grassley	Risch
Boozman	Hawley	Roberts
Braun	Hoover	Romney
Burr	Hyde-Smith	Rounds
Capito	Inhofe	Rubio
Cassidy	Isakson	Sasse
Cornyn	Johnson	Scott (FL)
Cotton	Kennedy	Scott (SC)
Cramer	Lankford	Shelby
Crapo	Lee	Sullivan
Cruz	McConnell	Thune
Daines	McSally	Toomey
Enzi	Moran	Wicker
Ernst	Murkowski	Young

NAYS—47

Baldwin	Hassan	Rosen
Bennet	Heinrich	Sanders
Blumenthal	Hirono	Schatz
Booker	Jones	Schumer
Brown	Kaine	Shaheen
Cantwell	King	Sinema
Cardin	Klobuchar	Smith
Carper	Leahy	Stabenow
Casey	Manchin	Tester
Collins	Markley	Udall
Coons	Menendez	Van Hollen
Cortez Masto	Merkley	Warner
Duckworth	Murphy	Warren
Durbin	Murray	Whitehouse
Feinstein	Peters	Wyden
Gillibrand	Reed	

NOT VOTING—2

Harris	Tillis
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The nomination was confirmed.

ORDER OF BUSINESS

The PRESIDING OFFICER. The Senator from Wyoming.

Mr. ENZI. Mr. President, I ask unanimous consent that the remaining votes be 10 minutes in length.

The PRESIDING OFFICER. Is there objection?

Without objection, it is so ordered.

EXECUTIVE CALENDAR

The PRESIDING OFFICER. The clerk will report the next nomination.

The legislative clerk read the nomination of Stephen R. Clark, Sr., of Missouri, to be United States District Judge for the Eastern District of Missouri.

The PRESIDING OFFICER. The question is, Will the Senate advise and consent to the Clark nomination?

Mr. WICKER. I ask for the yeas and nays.

The PRESIDING OFFICER. Is there a sufficient second?

There appears to be a sufficient second.

The clerk will call the roll.

The legislative clerk called the roll.

Mr. THUNE. The following Senator is necessarily absent: the Senator from North Carolina (Mr. TILLIS).

Further, if present and voting, the Senator from North Carolina (Mr. TILLIS) would have voted “yea.”

Mr. DURBIN. I announce that the Senator from California (Ms. HARRIS) is necessarily absent.

The PRESIDING OFFICER (Mr. LANKFORD). Are there any other Senators in the Chamber desiring to vote?

The result was announced—yeas 53, nays 45, as follows:

[Rollcall Vote No. 124 Ex.]

YEAS—53

Alexander	Fischer	Paul
Barrasso	Gardner	Perdue
Blackburn	Graham	Portman
Blunt	Grassley	Risch
Boozman	Hawley	Roberts
Braun	Hoover	Romney
Burr	Hyde-Smith	Rounds
Capito	Inhofe	Rubio
Cassidy	Isakson	Sasse
Cornyn	Johnson	Scott (FL)
Cotton	Kennedy	Scott (SC)
Cramer	Lankford	Shelby
Crapo	Lee	Sullivan
Cruz	McConnell	Thune
Daines	McSally	Toomey
Enzi	Moran	Wicker
Ernst	Murkowski	Young

NAYS—45

Baldwin	Hassan	Rosen
Bennet	Heinrich	Sanders
Blumenthal	Hirono	Schatz
Booker	Jones	Schumer
Brown	Kaine	Shaheen
Cantwell	King	Sinema
Cardin	Klobuchar	Smith
Carper	Leahy	Stabenow
Casey	Manchin	Tester
Collins	Markley	Udall
Coons	Menendez	Van Hollen
Cortez Masto	Merkley	Warner
Duckworth	Murphy	Warren
Durbin	Murray	Whitehouse
Feinstein	Peters	Wyden
Gillibrand	Reed	

NOT VOTING—2

Harris	Tillis
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The nomination was confirmed.

EXECUTIVE CALENDAR

The PRESIDING OFFICER. The clerk will report the next nomination.

The bill clerk read the nomination of Carl J. Nichols, of the District of Columbia, to be United States District Judge for the District of Columbia.

The PRESIDING OFFICER. The question is, Will the Senate advise and consent to the Nichols nomination?

Mr. WHITEHOUSE. Mr. President, I ask for the yeas and nays.

The PRESIDING OFFICER. Is there a sufficient second?

There appears to be a sufficient second.

This is a 10-minute vote.

The clerk will call the roll.

The bill clerk called the roll.

Mr. THUNE. The following Senator is necessarily absent: the Senator from North Carolina (Mr. TILLIS).

Further, if present and voting, the Senator from North Carolina (Mr. TILLIS) would have voted “yea.”

Mr. DURBIN. I announce that the Senator from California (Ms. HARRIS) is necessarily absent.

The PRESIDING OFFICER. Are there any other Senators in the Chamber desiring to vote?

The result was announced—yeas 55, nays 43, as follows: