

video service's recommendation mechanism continues to push content that involves children being in suggestive or exploitative situations. By "suggestive or exploitative," I mean content that features partially clothed children—children in bathing suits and children dressing and undressing themselves.

YouTube's recommendation system works by promoting similar videos to the one the user is already watching, which means that, by design, one vile video can lead to another and another and another until the user is buried in smut that shouldn't even exist. The comments on these videos have turned into a predator's chat room that allows users to share time stamps that mark the most explicit moments in a video.

YouTube did disable comments in videos that involve children, but its algorithms continue to push this content via the recommendation feature. YouTube needs to stop this. It needs to fix this.

The point of describing these things is not to throw individual companies and their technologies under the bus, but it is crucial that we understand that even at home or at school, our children are very vulnerable and exposed. Even benign technology that doesn't necessarily expose children to pornography can pose a risk.

In 2015, the Electronic Frontier Foundation filed a complaint with the Federal Trade Commission against Google. It alleged that the tech giant's Google for Education program was exploiting minors' personal information and potentially exposing it to third parties. Think about that. It was exposing their information to third parties.

The Chromebooks that were issued to students were loaded with Google Sync, which allowed for the collection and storage of students' browsing history, information, and passwords. Program administrators were given complete access to a cloud system, which allowed them to alter settings. This exposed students' data—educational data and personal data—including physical location data. This was exposed to Google's development team and to third-party websites. One wrong click would expose students' "virtual you"—their presence, all of their information—online.

In Tuesday's Judiciary Committee hearing, I asked the founder and CEO of Protect Young Eyes, Christopher McKenna, what steps he would take, what he would recommend, to protect our children from online predators. His answer was really simple: Give parents the option to control content access, and don't hide the tools that are necessary to do this. Give them to the parents. Make certain that they have them.

Now, I am not suggesting a takeover or a ban of these social media apps, and I am not suggesting we drop a regulatory anvil on these companies. What I am suggesting is that we should not have to ask the makers of popular dig-

ital services to stop catering to child predators. They should choose to recognize that predators lurk in every corner of society, and they should change the age ratings on these apps. They should issue the warnings to parents. They should choose to make parents aware of what a simple click or a tap on a screen might unlock right before their children's eyes. They should choose to stop this horrific cycle of dehumanization and exploitation before it begins. They should choose to work with us to make certain that consumers have all of the information they need.

I yield the floor.

THE PRESIDING OFFICER. The Senator from New Hampshire.

AFFORDABLE CARE ACT

Mrs. SHAHEEN. Madam President, on Tuesday, the Fifth Circuit Court of Appeals heard oral arguments in the Texas v. United States case to overturn the Affordable Care Act. Unfortunately, although the Affordable Care Act is currently the law of the land, the Department of Justice—our Nation's highest law enforcement authority—was not there to defend the law of the land, the Affordable Care Act. The DOJ was not there because it had been instructed by this President and this administration to join the effort to overturn the Affordable Care Act.

Sadly, the stakes of the Texas v. United States litigation are profound. This year in New Hampshire alone, approximately 90,000 Granite Staters obtained health insurance coverage through the Affordable Care Act's Medicaid expansion or through the ACA's health insurance marketplaces. Across the country, more than 17 million Medicaid expansion enrollees and 11 million people in the marketplaces' health plans depend on the Affordable Care Act for their coverage. Yet the Department of Justice refuses to defend them. It refuses to defend the law of the land in court.

In this case, if the courts side with the Trump administration and the Republican attorneys general, millions of these people will return to the days when they were one cancer diagnosis, one medical complication, or one car accident away from medical bankruptcy.

The Affordable Care Act's coverage expansion is also our most powerful tool in combating the opioid epidemic. This is critically important in New Hampshire as we have the third highest overdose death rate from opioids of any State in the country. In New Hampshire, more than 11,000 people receive substance use disorder treatment thanks to the Affordable Care Act's Medicaid expansion, and many more Granite Staters are able to get substance use disorder treatment thanks to coverage obtained through the ACA's health insurance marketplaces.

Just think. Without the expansion of Medicaid, which is a bipartisan effort in New Hampshire, and without the ACA's health insurance marketplaces,

we would have thousands of people affected by substance use disorders who would not be able to get treatment. There is no plan B if the Affordable Care Act is overturned.

In 2017, a mother named Nansie, from Concord, wrote to my office. I will not use her last name.

I ask unanimous consent to have printed in the RECORD Nansie's 2017 letter.

There being no objection, the material was ordered to be printed in the RECORD, as follows:

DEAR SENATOR SHAHEEN: Thank you for giving me the opportunity to share my story about ACA. It saved my son's life.

Benjamin went to Keene State College with the same hopes and dreams many have when building their American dream. While there he tried heroin. Addiction overcame him but did not stop him from graduating. After graduation he suffered a long road of near death existence. After a couple of episodes where he had to be revived (fentanyl) he chose recovery. It was due to Obamacare that we were able to get him insured so that he could get the proper help he needed and a suboxone program that assisted him with staying "clean". In April it will be a year for Ben in his recovery. Without Obamacare this would not have been possible. In early 2016 we had very long waiting lists for rehab and then the ones with the means to pay were the first accepted.

I can't find the words to define my gratitude to President Obama. I believe my son would not be alive today if it were not for this plan that provided the means he needed to get the help he needed at the time he needed it. Ben still has a long road ahead of him but I will see to it that he never walks it alone.

It is one of my greatest wishes that one day I could shake President Obama's hand and thank him for providing the tools that saved my son's life.

Sincerely,

NANSIE J. GARNHAM FEENY.

Mrs. SHAHEEN. Madam President, in Nansie's letter, she writes:

The ACA saved my son's life. It was due to ObamaCare that we were able to get him insured so that he could get the proper help he needed and get into a Suboxone program that assisted him. Now, if the courts side with the Trump administration, this critical source for treatment and recovery could be ripped away.

We don't have enough time for me to go through the whole list of all of the benefits under the Affordable Care Act that will be lost if the ACA gets overturned. One of the benefits, though, that would be thrown out yet is critically important to the people of New Hampshire and across this country is that of the consumer protections against skyrocketing prescription drug costs. They will be gone.

A couple of weeks ago, I was at a hearing in the Committee on Aging, and we had someone from the FDA who was testifying. She talked about the fact that the major driver in prescription drug costs under Medicare and Medicaid was the cost of biologic drugs and that what was bringing down that cost was the pathway for biosimilars to create alternatives of those biologic drugs for those people. What she failed to point out was that this provision

was in the Affordable Care Act and that if the Affordable Care Act gets struck down, this provision will get struck down. Those increased costs that we have been seeing of those biologic drugs are going to continue going up.

What is probably even more important for most people in New Hampshire is that the Affordable Care Act includes a very important program that has closed the Medicare Part D coverage gap—what is called the doughnut hole—for prescription drug coverage. This program has saved New Hampshire's seniors an average of \$1,100 a year in Medicare prescription drug costs. These savings help to ensure that Granite Staters who have fixed incomes can pay their utility bills or put food on the table.

The court's decision could wipe out these critical Medicare savings for seniors, just as it could wipe out coverage for preexisting conditions, coverage to keep young people on their parents' insurance up until they are the age of 26, and coverage for essential health benefits, which means that mental health care and coverage for substance use disorder treatment are required by insurance companies to be covered.

So given what is at stake, at this point I want to offer a unanimous consent request that the Senate proceed to the consideration of S. Res. 134, which is a resolution I introduced to express a sense of the Senate that the Department of Justice should reverse its position in the *Texas v. United States* case and defend the Affordable Care Act.

UNANIMOUS CONSENT REQUEST—S. RES. 134

Mr. President, I ask unanimous consent that as in legislative session, the Judiciary Committee be discharged from further consideration of S. Res. 134 and the Senate proceed to its immediate consideration; further, that the resolution be agreed to, the preamble be agreed to, and the motions to reconsider be considered made and laid upon the table with no intervening action or debate.

The PRESIDING OFFICER (Mr. YOUNG). Is there objection?

The Senator from Wyoming.

Mr. BARRASSO. Mr. President, reserving the right to object, whether you support the ObamaCare law or oppose it—and let me be clear, I oppose it—it remains the law.

This week, a Federal appellate court heard arguments related to the case of *Texas v. United States*, and I expect it will eventually end up before the U.S. Supreme Court.

Regardless of the outcome, our commitment remains to protect people with preexisting conditions. As a doctor, as a husband of a breast cancer survivor, I know the importance of making sure patients can have access to high-quality healthcare at an affordable cost.

Since the Obama healthcare law passed, this has not happened for many families to whom I speak at home in Wyoming. They keep telling me that

ObamaCare made their insurance unaffordable, and it has made it more difficult for them to get the care they need. Simply put, they know that the Obama healthcare law has failed because they have personally experienced the law's sky-high premiums and fewer choices.

It has taken Washington Democrats a little longer to figure that out. Now they are clamoring for a one-size-fits-all healthcare plan. They want a healthcare system controlled by Washington bureaucrats, and as a doctor, my focus is on making healthcare better for patients, period.

Republicans in the Trump administration are taking on the tough issues facing patients across the country. We eliminated the individual mandate so that patients aren't punished for refusing to buy insurance they cannot afford. We support more insurance choices, such as association health plans, so folks can find the best coverage for themselves and their families. We are taking on the drug companies. Congress has already eliminated gag clauses, and more reforms are on the way. Finally, with the President's support, we are going to end surprise medical bills. Simply put, Republicans want patients to pay less for the coverage they already have.

Democrats want to take away people's health insurance, especially the coverage they get through their work. It is simply wrong. The question is whether Washington Democrats are interested in actually solving the problem or playing politics.

Therefore, I object.

The PRESIDING OFFICER. Objection is heard.

The Senator from New Hampshire.

Mrs. SHAHEEN. Mr. President, I knew my colleague from Wyoming was going to object. I am disappointed in his objection, and I know he is a doctor. I believe he cares about his former patients. I believe he cares about providing healthcare to his constituents, as I believe all of my colleagues care about that.

That is why I am so puzzled by why there has been a 9-year effort to try and undermine the Affordable Care Act and the healthcare that it provides to people in this country.

As I said earlier, there is no followup plan that will provide coverage for people with preexisting conditions if the Affordable Care Act is overturned. There is no followup plan that will provide coverage for people with substance abuse disorders, for mental health coverage. That is all going to go out the window.

By failing to send a clear message to the Justice Department that they should defend the Affordable Care Act, we are putting access to care at risk for millions of Americans across this country.

What we should be doing—and we should have done it as soon as the effort to overturn the Affordable Care Act was defeated in 2017—is working

together to put in place changes that make the Affordable Care Act work better. We should be looking for ways to provide coverage to people that is affordable, that provides quality healthcare, that is accessible to every American. Instead of that, we have no plan B. There is no bill that would provide coverage if this administration is successful in overturning the Affordable Care Act.

I am very disappointed, though not surprised, by the reaction from my colleague from Wyoming.

I yield the floor.

The PRESIDING OFFICER. The Senator from Delaware.

NOMINATION OF PETER C. WRIGHT

Mr. CARPER. Mr. President, I rise in opposition today to the nomination of Peter Wright to serve as the Assistant Administrator for EPA's Office of Land and Emergency Management.

I take little joy in opposing the nomination but do so for three reasons. Before I say those three reasons—I stood on this floor right up until the end of the last Congress, trying to get Peter Wright confirmed with a unanimous consent approach, and we failed at the very end.

The irony of it is, having stood here and tried to get him confirmed at the end of the last Congress and today being in a position in which I am asking for us to postpone, at least for today, his nomination—there is an irony there, and I don't have the time to go into all of the reasons, but I will mention a few of them.

In the last Congress, I worked with the EPA to negotiate a set of significant policy concessions that I believe would have allowed the Senate minority to agree to a more expeditious confirmation process for Mr. Wright.

I worked diligently until the closing of the last Congress—right until the bitter end, if you will—to achieve that objective, as I have done in good faith for other EPA nominees.

In fact, the very last nominee confirmed in the last Congress was an EPA nominee to head the Agency's Tribal Office, Chad McIntosh. My staff and I and others were very much involved in getting him confirmed.

In this Congress, EPA has refused to reengage with my office, with our committee staff, or with me on this nomination. The Agency no longer agrees to the policy concessions that I previously secured and to which they had previously committed in the last Congress. While this has been a real disappointment for me, unfortunately, it is hardly a surprise, given the increasingly extreme policy and tone of this EPA.

Second, EPA, under Mr. Wright's leadership for the past year, has failed to advance an area of policy that is critical to me and to many other Senators, and that is the regulation of PFAS chemicals known as permanent chemicals. Per- and polyfluorinated alkyl substances, known as PFAS, are a class of manmade chemicals that includes something called PFOA, PFOS,