

by releasing a new formulation that is extended release over time. They can patent that and pull the original drug off the market, and then it prohibits generic competition from entering the market against that original formulation and, thus, maintain their exclusivity well beyond the intended period of time. The only purpose for doing this is not to deliver more effective drugs but to prevent that generic competition.

One example is the drug Namenda, which is used by patients with Alzheimer's. Near the end of the exclusivity period, the manufacturer switched from a twice-daily drug to a once-daily drug. That move prevented pharmacists from being able to switch patients to a lower cost generic, allowing the company to continue to profit as a result of their exclusive use of that patent.

Secondly, the bill would define "patent thickets," which occur when an innovator seeks multiple overlapping patents or patents with identical claims near when they are about to lose their right to exclusivity. Companies take advantage of our country's robust innovation protection in order to hang onto their monopolies as long as possible. One example is the drug Humira, which is one of the most widely prescribed drugs in the world. It is commonly used to treat arthritis and other autoimmune diseases. AbbVie, the manufacturer of Humira, has 136 patents and 247 patent applications on their drug, which has been available for more than 15 years—136 patents with 247 patent applications. There has to be a reason for that.

This type of behavior makes it very difficult for biosimilar drugs to come to market. While the patent on the actual drug formula—the original one—may have expired, there are still in this case hundreds of other patents to sort through and, frequently, to litigate in terms of the validity of those additional patents. The artificial structuring of these multiple patents can delay the entry of generic or biosimilar competition for much longer than anybody ever would have intended—certainly longer than Congress intended by giving patent protection.

By defining product hopping and patent thickets as anti-competitive behavior, we would allow the Federal Trade Commission to bring antitrust suits against the bad actors who deliberately game the system, and we would give them injunctive authority—not money damage authority, but injunctive authority to make the system fairer and operate as Congress intended.

The second bill I am going to introduce has to do with Medicare part D—one of the most successful and popular pharmaceutical programs around. Part D sponsors may voluntarily report fraud data to the Centers for Medicare and Medicaid Services, but they are not required to report the number of specific instances of potential fraud, waste, and abuse they identify or the

actions they took to address these issues. My bill would implement recommendations for the Department of Health and Human Services Office of the Inspector General to require plan sponsors to report that fraud and improve oversight of this important program.

I have learned a lot about prescription drugs during these hearings, a lot about the wonderful lifesaving innovation, the importance of preserving that period of exclusivity for people who invest in the research and develop these new lifesaving drugs, but I have also learned a little bit about some of the abuses, which I have talked about here today, and the need for us to continue to work together to find solutions to provide Texans and all Americans who are struggling to cover the cost of their prescriptions with some relief.

By eliminating some of these tactics used by pharmaceutical companies to delay and deter competition, we will increase the availability of generics and give patients greater freedom to choose a drug that works at a price they can afford. By creating more accountability under Medicare part D, we can prevent taxpayers from footing the bill for a broken system.

While we are still working to find a solution for the multitude of problems and challenges we face in dealing with the pharmaceutical drug industry, one thing is abundantly clear: A one-size-fits-all, government-run healthcare system is not going to work. Indeed, we need to make targeted, smart reforms that will bring down the cost of prescriptions and not the quality of the entire healthcare system. That is precisely what these two bills will do, and I hope we will be able to advance these pieces of legislation to promote more affordable medications.

I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from Washington.

Mrs. MURRAY. I ask unanimous consent to speak as in morning business.

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

WOMEN'S HEALTHCARE

Mrs. MURRAY. Madam President, this week, families across our country are preparing to celebrate Mother's Day and recognize the hard work that women do to support their families and build a brighter future in their communities.

Here in Congress, we should be working to help moms back in Washington State and across the country. Unfortunately, instead of looking for ways to support women, President Trump has been pushing an ideological agenda that undermines their health, reproductive rights and freedoms, and economic security.

When it comes to healthcare, President Trump is working to sabotage the care moms and their families rely on. He changed Federal rules to let insurance companies sell junk coverage that does not cover maternity care, and he

is arguing in court to strike down protections for women and people with preexisting conditions in all plans insurers sell.

Instead of supporting the Title X Family Planning Program, which has a history of bipartisan support and a tremendous track record helping women get critical, low-cost family planning and preventive healthcare services, President Trump is chipping away at it and working to strip title X grants from Planned Parenthood, which serves tens of thousands of women in my home State of Washington each year and millions more nationwide, including mothers like Shannon.

Shannon first went to Planned Parenthood when she was 18 for what turned out to be endometriosis. It is a condition that causes severe menstrual pain and can affect fertility. Thanks to the treatment she received at Planned Parenthood, today Shannon is managing her chronic pain and raising an adorable little girl.

When I was in Seattle a few weeks ago, another constituent, Cindy, shared how a routine screening at Planned Parenthood saved her life by detecting cancer early on and giving her the head start she needed to beat it. Today Cindy is not just a survivor; she is a mother because she was able to get pregnant after she went into remission.

We should be supporting providers that help women like them get the care they need, not burdening them with restrictions designed to force out Planned Parenthood or gag clauses that prevent providers from even discussing a patient's right to a safe, legal abortion. Moms deserve better.

Unfortunately President Trump's attacks on women's reproductive rights go well beyond his changes to the title X program. Since day one, he has been working to jam our courts full of far-right judges to appease extreme Republicans who want to see *Roe v. Wade* struck down. When President Trump nominated Justice Kavanaugh to the Supreme Court, we heard from women and men across the country, concerned about what his confirmation would mean. Countless women shared their personal stories about what life was like before *Roe v. Wade* and what the right to get a safe, legal abortion has meant to their families.

So while Republicans continue to press ahead with extreme, harmful legislation—like the bill that was just passed in Georgia—and President Trump continues to tell outright lies meant to demonize women and their healthcare providers, people are going to continue calling out those lies, calling out the attempts to turn back the clock, and standing in solidarity with women across the country.

President Trump's harmful attacks on women's healthcare are hardly the only time he has ignored how his policies would hurt women and their families. He has also cruelly and unnecessarily separated hundreds of migrant parents and their children. Yolany is a

mother who is being detained in Tacoma, WA, while her 6-year-old son has been sent all the way across the country to New York. According to media reports, they were kept apart for almost 2 months before they were reunited. Their story is just one of so many pointless tragedies President Trump's heartless family separation policy has caused.

Moms deserve better, especially when there are so many other challenges on which they need us to lead. There is the maternal mortality crisis and the appalling fact that our country has the highest maternal death rate in the developed world. We know this crisis is worse for women of color—for African-American women in particular, who face an even higher maternal death rate. Because of a new report from the Centers for Disease Control and Prevention, we also know that three out of five pregnancy-related deaths in our country are preventable.

We should be working together to take action to stop so many mothers from dying in childbirth and building on the \$50 million Maternal Mortality Initiative that I fought to enact in this year's funding bill to expand evidence-based programs to prevent maternal mortality and advance maternal health equity.

There is the childcare crisis and the reality that for far too many parents, quality, affordable childcare is not available. One mother in Washington State told me how she struck out with more than 10 childcare centers before she finally found one that could care for her son, and when she did find it, it cost her more than her mortgage. We should be working to make sure all parents can go to work and know their children will be well cared for.

We should also be fighting for paid family leave so that people will have the time they need to welcome new members to their families and start building those bonds that will last a lifetime and so that no parent will have to choose between a paycheck and caring for a sick child.

At a time when there is so much we could be doing to make life better for mothers and fathers and families across the country, it is disappointing that President Trump has spent so much time looking for ways to make things worse.

While the Trump administration may not be fighting for families, moms are. Just last week, I attended a rally here in Washington, DC, and met a mom who came all the way across the country, from Washington State, to speak up for families like hers. I know what it is like to be in her shoes—or tennis shoes, I should say. I also know that when people like her speak up and fight for change, they do make a difference, which is why I am so inspired by the moms whose stories I have shared today and by the many others who shared their stories with me back in my home State of Washington.

I wish all the moms out there a happy Mother's Day. I know you are

going to keep fighting for your families, and I want you to know we are going to keep fighting for you.

I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from Hawaii.

Ms. HIRONO. Madam President, I thank Senator MURRAY for organizing all of us to come to the floor in honor of Mother's Day. I will take time to talk about the ongoing attacks on women's health in this country.

I feel a sense of urgency about the increasingly hostile, escalating, and unrelenting attacks on women's health by Donald Trump and Republicans. From continuous efforts to defund Planned Parenthood, to the taking away of title X funds, to trying to repeal the Affordable Care Act—all programs that support healthcare for millions of women in this country—I have to ask, why? What is the motivation to take away healthcare services for millions of women in this country? It is not clear why they are doing this. What is clear is the harm they are causing women.

Repealing the Affordable Care Act would mean that insurance plans would no longer be required to cover maternity care and birth control. Insurance companies would be able to discriminate against people with preexisting conditions. Astoundingly, for women, this would include pregnancy.

Donald Trump and congressional Republicans are proposing trillion-dollar cuts to Medicaid. If implemented, this could endanger tens of millions of women in this country who rely on Medicaid for coverage during pregnancies and births. Do they even care that these cuts to Medicaid are particularly cruel in the face of an infant and maternal mortality crisis in our country, particularly for Black women?

By establishing a gag rule, Donald Trump is forcing healthcare providers to choose between providing full and accurate information on all available healthcare options for women, including for abortion, and hundreds of millions of dollars in Federal title X funding. States like Hawaii are refusing to succumb to this unjustified coercion by refusing title X funds and are replacing them with hard-earned State funds so that providers in our State, for example, can give the necessary healthcare to women.

By trying to pass onerous, new abortion restrictions in States across the country, conservative forces are working hard to undermine a woman's constitutional right to have an abortion. One institution that can stand up to this assault on women's rights and women's health is our Federal judiciary. Last month, for example, a Federal judge in Washington State blocked the implementation of the Trump administration's title X gag rule. In March, a Federal judge in Kentucky prevented a new law from going into effect that would have restricted abortion after 6 weeks of pregnancy. These

two recent examples demonstrate the importance of our courts in upholding the Constitution and the law and in constraining radical rightwing assaults on women's health and rights.

To counter what independent judges are doing, Donald Trump, Leader MCCONNELL, and Senate Republicans are packing our courts with ideologically driven conservative judges who will be on their ideological page. Over the past 2½ years, they have confirmed more than 100 new Federal judges, an overwhelming majority of whom was selected by two ultraconservative organizations—the Federalist Society and the Heritage Foundation.

Their efforts to pack the courts continue this week in an upcoming vote on a nominee for the Second Circuit in New York, Michael Park, who fought to restrict access to reproductive healthcare for women. In one recent example, Mr. Park defended Kansas's attempt to defund Planned Parenthood by terminating its Medicaid contracts. This would have ended the vital services Planned Parenthood provides to low-income patients, services such as cancer screenings and access to contraception. Fortunately, the judges who heard that case rejected Mr. Park's arguments. Yet, now, with his confirmation to the Second Circuit all but assured, Mr. Park is set to become the judge in these types of cases. It is no wonder that both of his home State Senators oppose his nomination.

In their not being satisfied with packing our courts with judges who have ideologically rightwing agendas, Donald Trump and Republican leaders are resorting to incendiary, reprehensible, and false rhetoric to inflame their base. We have seen this most recently in the debate around the so-called Born-Alive Abortion Survivors Protection Act and the vilification of women who seek abortions later in pregnancy. Infanticide is already a crime, but you would never know it if you listened to Republican politicians and their mouthpieces on FOX News and the conservative media.

In a FOX News op-ed, my colleague from Nebraska, for example, accused the Democrats of "blurring the line between abortion and outright infanticide." During the debate on the bill, ultraconservative FOX News host Laura Ingraham compared Planned Parenthood—the Nation's largest maternal health provider that has saved thousands of lives—to Adolf Hitler. She said: "Hitler, just like Planned Parenthood, practiced and defended mass extermination."

Immediately after the Senate defeated this unnecessary bill, Donald Trump tweeted:

Senate Democrats just voted against legislation to prevent the killing of newborn infant children. The Democrat position on abortion is now so extreme that they don't mind executing babies AFTER birth.

The President's incendiary and completely false rhetoric on this issue has become a rallying cry at his bizarre political rallies across the country. Last

month, in Green Bay, WI, for example, he said:

The baby is born, the mother meets with the doctor, they take care of the baby, they wrap the baby beautifully, and then the doctor and the mother determine whether or not they will execute the baby.

This kind of rhetoric is simply outrageous. It is not harmless electioneering. It is dangerous. It is incitement. It is also provoking a dramatic uptick in threats to abortion providers and supporters of abortion rights across the country.

This sustained rightwing attack is taking a heavy emotional toll on women who seek to have abortions later in their pregnancies and the doctors who provide this essential care.

Kate Carson, a woman from Boston who sought an abortion after Laurel, her daughter, was diagnosed with catastrophic brain malformations in 2012, wrote a powerful op-ed about her painful decision.

Madam President, I ask unanimous consent to have printed in the RECORD Kate Carson's op-ed, dated February 19, 2019.

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

[From USA Today, Feb. 19, 2019]

I HAD A LATER ABORTION BECAUSE I COULDN'T GIVE MY BABY GIRL BOTH LIFE AND PEACE

(By Kate Carson, Opinion Contributor)

No one loves my baby more than I do. Her death was a gift of mercy. Now, women like me will always be a scapegoat for policies limiting women's rights.

People are talking about me again, loudly, unkindly. Even the president of the United States has had his say about families like mine. I have told this story so many times, but I will tell it again as many times as it takes.

I help run a support group for families who have ended pregnancy after poor prenatal or maternal diagnoses. If you're wondering, "Who are these women who get abortions in the third trimester?" We are. I am. Parents who love our babies with our entire hearts. Desperate acts like an abortion in the 36th week of pregnancy are brought about only by the most desperate circumstances and are only available to those who can come up with a lot of money quickly.

I know. I've been there.

My daughter, Laurel, was diagnosed in May 2012 with catastrophic brain malformations (including Dandy-Walker malformation) that were overlooked until my 35th week of pregnancy. I did not know much about brain disorders at that point. I imagined developmental delay, special education classes, financial pressure, an overhaul of expectations for Laurel's life and my motherhood. Here were the doctors' real expectations for Laurel: a brief life of seizures, full-body muscle cramps, and aspirating her own bodily fluids.

When I heard the list of all the things my beloved daughter would not do—talk, walk, hold her head up, swallow—I grasped for what she would be able to do.

"Do children like mine just sleep all the time?" I asked.

The neurologist winced. Children like yours, he told me—slowly—are not often comfortable enough to sleep.

Our choice was sad—but clear.

Let me answer some questions you might be thinking: Yes, we were sure that these

problems were severe. No, there is no cure, nor any on the horizon. Yes, we were counseled in-depth on our options, including adoption. Because we wanted to spare our daughter as much suffering as possible, our choice was very sad, but crystal clear: abortion.

I imagined an abortion at eight months would be grisly. But no matter how violent my imagination, it surely could not compare with the suffering Laurel would have endured in her own broken body.

In Massachusetts, my home state, a later abortion can be obtained only if the life or health of the mother is at risk. So I set off on a 2,000-mile journey from Massachusetts to Colorado to access this abortion. I landed, not in the nightmare I had imagined, but in the safest, kindest, most dignified hands I have ever encountered as a patient anywhere. Dr. Warren Hem at his Boulder Abortion Clinic is one of the few doctors in the country performing this procedure. After a single injection and a couple of hours, my baby was laid to rest in my womb, the purest mercy that I knew how to give my Laurel.

As the usual hubbub of hate and misunderstanding around abortion swelled to a roar this month, the president unfairly addressed families like mine in his State of the Union address. He hasn't really listened to women like me or doctors like Dr. Hem. He seems to care nothing for the true stories of heartbreak, loss and extreme medical complexity behind abortion later in pregnancy. Instead, his agenda must inflate fear and horror until every last American thinks of unspeakable violence.

Mercy means something different to each family.

This is not about abortion. It is about power. This administration needs the public to be angry at women like me and misinformed about what compels women to seek later abortions, which make up less than 1.5 percent of abortions, according to the Centers for Disease Control and Prevention. But I believe that Americans can hear our story and meet the painful, complicated truth about abortions later in pregnancy with love and understanding.

And most Americans have compassion for a woman's choice when it comes to her reproductive health care. In fact, nearly 70 percent of Americans do not want to see the Supreme Court completely overturn Roe v. Wade, according to the Pew Research Center.

Nobody loves Laurel more than I do. Her death was a gift of mercy. Mercy means different things to different loving families, and that has to be OK. To all the families who faced similar circumstances and made a different choice, I honor you. I trust your wisdom. I celebrate your child's brief and beautiful life.

We must treat each other with love, tenderness and respect. It is horrible, as a parent, to choose between life and peace for our children, especially when we want to give our children both beautiful and precious gifts.

It is devastating to lose a child. But, unlike most bereaved parents, women like me will live out the rest of our lives as scapegoats, fuel for an agenda that seeks to strip women and families of our reproductive freedoms.

When I think of my baby Laurel, I feel love and peace. Unfortunately, I cannot be with that peace because there are fresh wounds in the way, the throbbing pain of being hated and misunderstood.

Ms. HIRONO. Madam President, here is some of what Kate wrote:

I help run a support group for families who have ended pregnancy after poor prenatal or maternal diagnoses. If you're wondering,

"Who are these women who get abortions in the third trimester?" We are. I am. Parents who love our babies with our entire hearts. Desperate acts like an abortion in the 36th week of pregnancy are brought about only by the most desperate circumstances and are only available to those who can come up with a lot of money quickly.

I know. I've been there.

My daughter, Laurel, was diagnosed in May 2012 with catastrophic brain malformations . . . that were overlooked until my 35th week of pregnancy.

I did not know much about brain disorders at that point. I imagined developmental delay, special education classes, financial pressure, an overhaul of expectations for Laurel's life and my motherhood. Here were the doctors' real expectations for Laurel: a brief life of seizures, full-body muscle cramps, and aspirating her own bodily fluids.

It is devastating to lose a child. But, unlike most bereaved parents, women like me will live out the rest of our lives as scapegoats, fuel for an agenda that seeks to strip women and families of our reproductive freedoms.

Madam President, it is outrageous and offensive that Donald Trump and his allies in Congress would seek to turn women like Kate into scapegoats for their political agendas.

I have been an advocate of abortion rights for decades, and I fear that one day soon, women in this country will wake up and realize they no longer have control over their own bodies. What could be more intrusive than the government's telling women what they can do with their own bodies?

In the face of these ongoing attacks on women's health and women's rights, we will continue to raise our voices. We will continue to fight back.

I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from Pennsylvania.

Mr. CASEY. Madam President, I rise to speak about the pending nominations. I will have comments on both.

First, I ask unanimous consent that both sets of remarks appear in separate parts of the RECORD that are relevant to those nominations.

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

The PRESIDING OFFICER. The Senator from New Hampshire.

WOMEN'S HEALTHCARE

Mrs. SHAHEEN. Madam President, I come to the floor this afternoon to join my colleagues in raising concerns about the unrelenting attacks that this administration has waged on the health of women in New Hampshire and across the country.

With Mother's Day just around the corner, it is important to make clear that we cannot stand idly by while the administration undermines access to maternity care, to family planning, and to reproductive care for women.

Through misguided executive orders, regulations, and other actions, this administration is making it more difficult for women to access the care and services they need in communities across the country and abroad.

Now, new mothers deal with significant medical expenses. That is why we